Spiritual care of couples practicing natural family planning

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There are few studies that have investigated the spiritual problems of couples practicing natural family planning (NFP). The purpose of this paper is to analyze the spiritual problems and interventions of couples who were taught NFP by means of a professional online Web-based support system. Responses from this online system and its forums were categorized according to spiritual responses, spiritual problems, and spiritual interventions to the practice of NFP. Themes addressed included spiritual care in regards to decisions about the transmission of new life, difficulties in dealing with chastity and abstinence, bioethical problems related to pregnancy and illness, end of the reproductive life decisions, ethical treatment of women's health problems, sacrifice, and personal and relational struggles. Online community support, help in building confidence in NFP methods, and bioethicist referral are key interventions. The complexity of these spiritual responses, problems, and appropriate interventions require the expertise of health professionals in cooperation with bioethicists. We concluded that NFP can be viewed as both a spiritual practice and a means of spiritual growth.

Keywords: Natural family planning, Fertility, Spirituality

INTRODUCTION

The association of human fertility with spirituality and spiritual beliefs has been a part of human civilization from the beginnings of recorded history (Motz 1997). Many major cultures worshiped a god of fertility and conducted religious ceremonies related to fertility (Stuckey 2005). Civilization itself is believed to have originated in the Fertile Crescent. Fertility as it relates to agriculture, livestock, and the propagation of the human family was essential for all human civilizations—and still is today. The first command from the God of the three Abrahamic religions was to be fruitful and multiply. In many cultures today, when a young woman reaches

menarche there are celebrations; and in some cultures she is thought to be endowed with special powers (Chrisler and Zittel 1998; Stuckey 2005). Although fertility is essential for the survival of the human family and although human fertility is integral to the expression of spirituality, there are little to no studies on spiritual care of fertility.

Spiritual responses to the practice of natural family planning

There are several studies that investigated how monitoring fertility for the purpose of avoiding or achieving pregnancy affects spirituality among couples using

natural family planning (NFP). An older quantitative study compared the spiritual well-being and intimacy among a cohort of couples practicing NFP with a similar cohort using hormonal contraception and found higher spiritual and religious well-being and intimacy among the NFP couples (Fehring and Lawrence 1994). Previous qualitative studies have indicated that couples who use NFP feel that NFP somehow enhances their spirituality (McCusker 1977; Tortorici 1979; Borkman and Shivanandan 1984; Boys 1989; Fehring et al. 1989). Couples using NFP have reported that they “feel in step” with Church teaching, they are “doing God’s will,” they are “allowing God’s will” to take place in their lives, they “appreciate God’s gift of fertility more,” and they allow themselves “to be co-creators with God” (Fehring and McGraw 2003).

A recent survey conducted by researchers at Marquette University with 334

couples using NFP found that 70 percent of the husbands and 88 percent of the wives felt that NFP had a good effect on their spiritual well-being (unpublished study; see table 1). In the same survey 71 percent of the husbands and 85 percent of the wives responded that NFP had a good effect on their relationship with God, and 86 percent of the wives and 68 percent of the men felt that it had a good effect on their satisfaction with life.

The same couples were also interviewed qualitatively for the effect of the practice of NFP on their spiritual lives. Researchers found that although there was difficulty with abstinence and a feeling of a lack of spontaneity and sexual imbalance, for the most part they felt that NFP was helpful to the marriage (VandeVusse et al. 2003). NFP stimulated greater understanding of human sexuality, and it increased communication, self-mastery, and a sense of a shared responsibility. It also deepened their spirituality. The spirituality theme was derived from comments by respondents who reported their spiritual beliefs or religious affiliation as reasons for using NFP.

Three subcategories were derived from their responses, i.e., they indicated they felt closer to God, congruent with church teachings, and more open to new life. These three sub-themes are further explained below.

Closer to God

Individuals and couples reported that NFP enhanced their spirituality and enabled them to feel more connected to God. Some also said that being closer to God helped them feel more connected to their spouses. Respondents also indicated that NFP enabled them to recognize gifts from God, such as fertility, sexuality, and children.

Table 1 *Effect of NFP on spirituality*

	Husbands		Wives	
	#	%	#	%
Effect on spiritual-well-being				
Good effect	218	70	279	88
Bad effect	6	2	3	1
No effect	86	28	35	11
Effect on relationship with God				
Good effect	221	71	268	85
Bad effect	2	1	2	1
No effect	87	28	45	14
Effect on satisfaction with life				
Good effect	211	68	271	86
Bad effect	9	3	5	2
No effect	90	28	39	12
Effect on being open to having new baby				
More open	172	56	215	69
Less open	6	2	11	4
No change	132	43	88	28

Supported church teachings

Using NFP allowed a smaller number of respondents to live consistently with their religious beliefs and to avoid guilt. Example responses from couples that illustrate this sub-theme are as follows:

“NFP has definitely enabled me to understand the important role of fertility in a Catholic marriage. I believe the method literally enables me to be Catholic ... open to conception, to the partnership in creation a married couple has with God, while not being fearful that I will have more children than I desire or could handle.

Without the method, I would have difficulty living up to my Catholic beliefs while enjoying my sexual relationship with my husband.”

Open to new life

Roman Catholic Church teachings include the willingness to be “open to new life” or to welcome a child, whether or not the pregnancy was planned. “I think having her [second child] made us more open to planning two more. It has deepened our co-spirituality ... and has kept us open and sensitive to life, even though we think our family is complete.”

From all indications in this qualitative and quantitative research study, it seems that NFP enhances spiritual and religious well-being among NFP couple users. However, couple users of NFP also have expressed spiritual distress with the use of NFP as indicated by an anger with Church teaching on human sexuality and birth control, feeling that the Church is out of step with modern times, questioning of God’s intent in the matter of birth control, and expressing that couples have a free will in the matters of birth control (Fehring and McGraw 2003). There are no studies that specifically investigated the spiritual

problems and spiritual interventions of couples using NFP.

Spiritual responses to sub-fertility

There are few studies that investigated the spiritual care of couples with sub-fertility. A review article by Roudsari et al. (2007). stated that religion can help couples with sub-fertility by the social action and support from members of their faith system, they might also have better behaviors that are supported by their religious beliefs that would give them better health (e.g., no smoking, less alcohol, better nutrition) and might help them with sub-fertility. Their given religion might help them in the decision making as to what treatment to pursue (from an ethical standpoint). Religion and spirituality also help some sub-fertile couples keep the process and want for a child in perspective, i.e., not pursuing having a biological child at all costs and all means available (Ventura et al. 2007). Some of the spiritual responses are the questioning as to why me, anger with God, bargaining with God, feeling that it is punishment from God while others find spirituality as a deep source of coping with infertility. Prayer is often used (both individual and intercessory prayer) to help cope and to seek divine intervention (Roudsari et al. 2007). Compassionate listening, humor, touch, prayer, and meditation are mentioned as spiritual care interventions that can be used by health professionals for couples with sub-fertility. The only study that investigated prayer as an intervention involved couples involved with in vitro fertilization and found that those couples who received intercessory prayer had a higher pregnancy rate than those couples that were not prayed for (Cha et al. 2001).

The purpose of this current study was to investigate the spiritual problems and

spiritual interventions among couples using NFP and health professionals teaching NFP in an online fertility support system. For the purposes of this paper spirituality and religiosity were viewed as two separate but intertwined concepts. Religiosity is conceptually defined as beliefs, practices, moral values, and guidance, designed to facilitate closeness to the sacred and transcendent God (Marshall 1995; Koenig 2004; Haffner 2007). It also involves sacred beliefs and practice about a higher power, or God. Spirituality is the affirmation of life in a (harmonious) relationship with God, self, community, and environment that nurtures and celebrates wholeness. This is an integrated relational definition (Fehring 1994).

METHODS

This study was a clinical descriptive qualitative study of spiritual responses and interventions among users and healthcare providers of an online NFP service program. Researchers and clinicians at Marquette University developed an online fertility health monitoring support system to help women and couples learn how to monitor the menstrual cycle based on natural indicators of fertility (Fehring et al. 2011). The fertility health website has a section for fertility instructions, menstrual cycle fertility charting, fertility health forums, and fertility/menstrual cycle social profiles. Women who register on the website are able to access an electronic menstrual cycle charting system and discussion forums, and have consultation from health professionals with expertise in the menstrual cycle and human fertility. At registration, all users were asked to sign an online consent form. This study received approval from the Marquette University Office of Research Compliance.

Since launching in 2008, over 3,000 couples have registered and used the

website. There have been over 3,000 posts in the online forums on 700 plus topics. Topical areas include protocol questions, unusual bleeding, breastfeeding, menstrual cycle variability, infertility, medications and fertility, vaginal infections, polycystic ovarian syndrome, menstrual cramping and pain, and infertility. One of the discussion forums on our fertility website is "Ask the bioethicist." This forum is for questions that women and men (couples) have in the use of NFP who are using these methods to either achieve or avoid pregnancy. The forum addresses values and beliefs in regards to living with fertility. The forum is also a place where the health professionals provide spiritual care. The online health professionals were two advanced practice nurses, an obstetrician-gynecologist consultant, and a Catholic moral theologian consultant.

The responses in the forums that related to the spirituality of living with fertility were downloaded into a Microsoft Word file, read, and analyzed for categories and themes by two professional nurses. There were 116 responses from 66 individuals that were analyzed from these forums. The participants' mean age was 29.2 (range 20–42), they were married an average of 4.7 years, and had an average of 2.0 living children. Most (87%) were of the Catholic faith, 80 percent had college degrees, 82 percent were White-Americans, and 50 percent were in regular cycles, and 31 percent breastfeeding.

Agreement of themes and categories were based upon reflection, discussion, and experience with helping couples learn NFP. Special attention was given to the trajectory of experiences, from women who were tracking their cycles for the first time to women who have been for many years, i.e., temporality. We also focused on relational and moral/value aspects of spirituality. The spiritually based themes were categorized as follows: (1) spiritual responses to the

practice of NFP, (2) spiritual problems in the practice of NFP, and (3) spiritual interventions to help couples with spiritual problems in relation to the practice of NFP.

RESULTS

Spiritual responses to the practice of NFP

There were a variety of human spiritual responses (both positive and negative) to the practice of NFP and living with fertility as a couple. Responses that were expressed included those that indicated individual and couple struggle, but also personal and couple growth. Therefore, under the broad category of spiritual responses to NFP (i.e., living with fertility) there are sub-categories of personal struggle, relationship struggle, and personal and relationship growth. The following are some of the responses and example quotes for each of these sub-categories.

Personal spiritual struggles in the use of NFP

- feeling alone in the use of NFP
- lack of trust in NFP
- lack of trust in personal indicators of fertility
- lack of confidence in NFP for avoiding pregnancy
- fear of an unintended pregnancy while using NFP
- feeling that the libido is high during fertile phase
- lack of joy when using NFP
- anger with Church teaching on human sexuality.

Example quote: Anger with Church teaching

I am a devout Catholic and have sought help on this to no avail. I have seen NFP

teachers, my OB/GYN, this site, an endocrinologist, prayers, etc. I am frustrated with what is supposed to bring two people closer—it doesn't. We can't even satisfy our husbands outside of intercourse, so what are we to do? No wonder so many Catholic women use BC. This is nearly impossible and it's making me resent the Church. Sorry to vent.

Relationship spiritual struggle

- stress in coping with periodic abstinence
- feeling pressure from spouse to have sex during fertile phase
- libido between husband and wife not in sync.

Example quote: Pressure from spouse to have sex

So I get frustrated because I want to do this (NFP) too but he seems to be all over me on peak days and pressure me which he knows we will probably get pregnant on those days. I just get frustrated in always having to say no and pushing him away. I realize how much work and care children take and just don't want to have children to have them. I would like to have a sound mind with raising children and not be so stressed that I can't even be a good mother.

Personal and relationship spiritual growth

- development of self-mastery over sexual desires
- trust in NFP method, spouse, and God
- sorrow for past sexual wrongs while using NFP
- finding meaning in self-sacrifice in the use of NFP
- realization that this (NFP) is part of God's plan
- expressed deepening of spirituality in the use of NFP
- husband is in tune with subtle signs of fertility and romance

- husband shares in the charting and responsibility of using NFP.

Example quote: Spiritual growth

So far, we have not made any real, long-term efforts to plan for the fertile periods and make conscious efforts to try the whole “courting” concept and do other, intentional things together to better our relationship and communication; I suppose that is why we have 4 kids!! But, this time around we are much more committed to avoiding pregnancy for longer than we have in the past and we will be using this time during Lent to refocus our energy and reconnect in other ways.

Response from another user:

If it's any consolation, the difficult experience forced us to grow in self-mastery and deepened our spiritual capacity for suffering. My husband is a wonderful man who learned to ... “man up” when it came to the regulation of our desires for physical intimacy. It's not fun to live through, but the effort pays off at the end of the tunnel. Best wishes.

Example quote: Sacrifice in use of NFP

Putting another human being first involves a “kind of death to self” and this IS painful. If we look to other successful mothers, most have recognized this necessity. If you look to the Saints, they all have suffered through a “death to self.” If we look to Jesus Christ our Lord, he actually died for us (the ultimate self-sacrifice).

Spiritual problems in the practice of NFP

The major spiritual problems found in our analysis are difficulty in decision making with regard to when and how many children to have; questions about the morality of sexual acts within and outside of marriage (i.e., while engaged); questions about the morality of medical treatments for

women's health problems (e.g., using uterine ablation to treat unusual uterine bleeding); and use of sterilization towards the end of the reproductive life. The following are the categories mentioned with more specific sub-categories.

Lack of cooperation between man and woman

- wife taking on too much of the responsibility for NFP
- immature expression of human sexuality—especially by husband
- husband pressures to have sex during fertile phase
- husband wanting vasectomy and withholding sex from wife
- treating wife like sex object
- threatening use or use of sterilization at end of reproductive life.

Example quote: Threatening sterilization

Hi I am a practicing catholic and my husband is just baptized catholic that's it though. We have 4 kids 4 and under. My husband agreed to nfp after our third but he said if this doesn't work he wants a vasectomy and if he can't get one we just won't have sex, I never agreed to that though. So when we conceived our 4th 7 months after our 3rd was born using billings. It took me 2 1/2 months to tell him, at this point I had to tell him for I was starting to show, it started the vasectomy talks again. He knows where I stand and I told him all the reasons I don't believe in it and he was going to go ahead with it without me. He went to the first vasectomy apt and the way the dr was talking he assumed he didn't need my consent so he told me he didn't need my consent. I started to cry and told him I am supposed to get him to heaven and I feel like I am failing, he said well it is either do this without me liking it or we don't have sex anymore which will wear on us, he just needs that 100% guarantee we won't have anymore kids,

he says he is just done, in an exhausted tone.

Discernment of children in relation to time (i.e., transmission of new life)

- stress of having several young children under 3 years of age
- coping with post-partum depression and the fear of having another child
- providentialism in having children, e.g., relying on God to provide.

Example quote: Discerning transmission of life

Hi Everyone, I am interested to discuss this—I have two children, one 3 years old and one 7 months old. I struggled with postpartum depression with both, and the fog is beginning to lift now with baby #2, although in my experience with my first child, the symptoms did not really go away until sometime between the first and second birthday. Husband and I are prayerfully considering our family size, and I have severe reservations about going through pregnancy and the “newborn phase” again. I literally lose a large part of myself for months at a time, and getting back to “normal” is a slow and halting process. I don’t have any purely medical reasons to avoid pregnancy itself, but having parented a newborn twice now, I know that as much as I love my kids, the newborn phase is not something I honestly ever want to do again.

Morality of sexual activities within relationships

- use of mutual masturbation
- use of condoms during fertile phase
- use of withdrawal during fertile phase.

Example quote: Morality of sexual practice

My husband questions whether it is morally acceptable to give me my orgasm when he is abstaining from his for NFP purposes. He argues that it is morally acceptable to have a “quickie” where his

orgasm is all that is required for the sexual act to be valid. As the women’s orgasm is not life bearing in any way is it ok for him to give me the gift of my orgasm during times of abstinence?

I have brought up the obvious concern of him getting too aroused by this activity and being tempted to have his orgasm on his own. He told me this isn’t a problem for him as long as he knows from the start it is a fertile time and therefore needs to abstain.

I also wonder about the good of doing this together...both abstaining in unison even if it would be morally ok for him to give me the gift of my orgasm during these times. My husband finds so much fulfillment in our sexual life together and always has such a huge desire to please me and spend lots of time on making sure I am fulfilled and happy in this area of our marriage.

Example quote: Providentialism and use of NFP

Theoretical providentialists would like to find such statements in Church documents, but they can’t. They are not there, because the Church does not want them there. They are not there because “It is for freedom that Christ has set us free.” The Church lays on each married couple the solemn responsibility to discern well for themselves, and on all of us the solemn injunction against presuming to know what is right for others. She resists going further on purpose—not because there are so few people willing to hack the rigors of real Christianity, but because real Christianity is, precisely, freedom.

Morality of hormonal contraception to treat women’s health problems

- no support for NFP and moral treatments from health professionals
- use of Depo to treat unusual uterine bleeding

- use of birth control pill to treat dysmenorrhea and multiple other problems
- morality of using uterine ablation for uterine bleeding
- scruples on morality of medical treatments—e.g., when woman is no longer fertile.

Example quote: Morality in use of birth control pill as intervention

I was diagnosed with severe Dysmenorrhea when I was in college (unmarried) and prescribed an oral contraceptive. It solved the problem entirely. At the time, I was told that pregnancy often changed things, and that I probably wouldn't have such pain after having my first child.

Three children later, that has not occurred—the dysmenorrhea is getting worse and is at the point now where I am incapacitated for a day or two during my period. The pain is similar to that of being in labor, and normal pain medications don't really help (even in high doses as my doctor has prescribed).

My gynecologist is understanding and supportive of our choice to use NFP to space our children, but he says that the only way he knows to fix dysmenorrhea is to have me take oral contraceptives.

I'm wondering about the ethics of such a choice. Is it acceptable to take a medication for a medical condition, when that medication will also have a contraceptive effect?

Spiritual interventions in the care of couples using NFP

There was a variety of interventions used to address the spiritual problems listed in the previous section. The most frequent were listening and letting couples vent, referral to a bioethicist, use of prayer, use of literature, building confidence in the use of NFP, and community support. As in the other sections, more specific subcategories and examples are provided.

Use of prayer and other religious practices

- prayer (for self and for others)
- relating abstinence to time of Lent
- discernment through rosary and novenas
- praying for conversion
- use of confession.

Example quote: Examples of prayer

I've been trying to pray the rosary daily and I think over time it makes you change...be less stressed and more open to God's love. Pray for the conversion of your husband. (I had to pray for mine, too!!) I think sometimes, God puts women in some men's lives to help them get closer to God! Stay strong and know that when you follow God's path ... you do carry your little crosses ... but you also will be blessed. Happy Easter :)

Another example quote:

You are truly doing the right thing in standing your moral ground. I believe in the power of the rosary. Maybe you could start the 9 day novena divine mercy chaplet on Good Friday and offer a special intention for your husband to have a change of heart.

Referral to Catholic bioethicist and NFP only physician

- correct appeal to formed conscience
- NFP only physician providing advice on moral treatments for health problems.

Example quote: Formation of conscience

Yes—but conscience needs to be informed—and spiritual leaders (especially like professor Miller who is an academic professor of moral theology and has a PhD)—certainly can provide some very good guidance through—natural law theory—over 2,000 years of the best moral thinkers from many religions—philosophers, etc. and not just the moral whims of the day Conscience is not just what “I feel what is best for me.”

Building confidence in use of NFP

- providing scientific evidence for efficacy of NFP during peri-menopause
- teaching use of a high tech and objective method of NFP
- aggressive management in helping couples with difficulty in monitoring fertility.

Examples quote: Use of scientific objective NFP method

Love the monitor too! I hated being the gatekeeper, and always second guessed myself...which is probably why we had two surprises using a cervical mucus method. We have been with MM (Marquette Method) for three years. So easy, so objective, and accurate!

Another example quote:

Ha! Yes! Although we feel like we have fewer opportunities to be intimate, we love this method so much more for the very clear windows. And as we get used to it and are less fearful of unexpected pregnancy (we already have six kids) I'm sure we won't be so conservative. My husband and I both agree that the peace of mind with this method is worth any potentially lost "green light" days.

Online community of support

- listening and allowing couples to vent in a safe online anonymous environment
- citing authority and religious texts (e.g., *Catechism of the Catholic Church*)
- sharing books on holy sex and other topics
- suggestion of using date night (for dealing with abstinence)
- suggestions on how to express love without use of intercourse
- provide hope that NFP will work (by other couples and health professionals)
- older mature couples helping younger couples keep perspective
- examples of serious reasons for delaying or not having any more children

- other sharing their feelings about the seriousness of PPD and having experienced PPD
- recommending books on harmful effects of sterilization on relationship and marriage
- helping couples keep life and sex in perspective, i.e., they will not die from not having intercourse for 1–2 weeks.

Example quote: Community of support

If your husband is open to reading about this and investing some soul searching and work into improving the marriage relationship, I highly recommend Holy Sex by Gregory Popcak, PhD. He's very tongue-in-cheek and entertaining, but doesn't dodge the hard stuff when it comes to sex and Catholic teaching. It really helped my husband. I had a very hard time reading it because it touched so explicitly on the ways I had been abused in our marriage. It was a god-send though.

Another example quote:

PLAN A DATE NIGHT!!!! 4 kids under 4 can cause ANYONE to lose their sense of control or sense of self. Maybe your husband is stressing about supporting more children and that's a logical concern. We have 3 kids and it is wild! So, you have a full plate.

Find a saint that you can connect with and ask for intercession. It works :)

DISCUSSION

Our analysis of the online forums in a NFP website indicate a wide variety of positive and negative spiritual responses to the practice of NFP. Even some of the negative responses (at first reaction) are in a sense positive, e.g., suffering in the context of Catholic teaching can be transforming for the individual. Overall, the responses reveal that couples struggle with periodic

abstinence, lack of trust and confidence in NFP methods, questioning Church teaching, and a sense of loneliness in the use of NFP methods. Positive spiritual responses include development of self-mastery and an expression of deepening spirituality. The responses are most likely skewed towards the negative, since persons who post in the forums are doing so because of problems they need help with. Furthermore, negative responses can stimulate others to contribute to the negative thread of discussion. A previous study that directly asked couples how the use of NFP affected their spirituality had more positive spiritual responses and had more responses that reflected their fertility as a gift (from God) and that they saw themselves as co-creators with God (Fehring and McGraw 2003). However, there is a tendency in the online user forums for more experienced couples to help the younger couples to keep their problems and struggles in perspective. In a previous study these struggles and benefits of practicing NFP were referred to as thorns and roses (Fehring and McGraw 2003).

The spiritual and ethical problems revealed in the forums are extremely difficult and have resulted in debate in ethical and religious circles. These problems include decisions on the seriousness for avoiding pregnancy in regards to the transmission of new life, morality of sexual practices, the problem of the female and male libidos not being in sync with the fertile phase, the pressures from husbands wanting sexual activity, and the morality of treatment methods for various women's health problems (especially use of the hormonal birth control pill), and the use of sterilization to prematurely end reproductive life. Analysis of each of these problems from an ethical and Church teaching standpoint would take a paper in itself. However, Church teaching is clear that it is up to the couple to discern when and how many children they have and what

constitute serious reasons (Barrett 2002). The Church asks couples to be generous to life and to discern with a prayerful relation with God, self, spouse, and children already born. Church teaching is also clear that the use of contraceptive methods are moral when they are valid treatments for women's health problems and do not cause an early abortion (U.S. Conference of Catholic Bishops 2009).

The interventions used by couples, health practitioners, and bioethicists are varied as expressed through the online forums. What is probably unique about this online system approach is that couples can feel a part of an online community and receive support and examples from other couples who are experiencing similar or the same problem. Since the practice of NFP can be a lonely experience, this online community of support is a tremendous benefit. There are only about 4 percent of sexually active Catholic couples that currently use NFP—most use some form of contraception or if, older, have used sterilization (Ohlendorf and Fehring 2007). Couples who struggle with NFP are surrounded by other Catholic couples who use contraception, experience Catholic physicians who promote the use of contraception, and are often not supported by Catholic clergy in the use of NFP or who even discourage its use.

Prayer is certainly a common intervention used both by the individual woman and couple and is frequently offered by other couples and the health practitioners in the online program. The prayer methods used vary from simple prayers, to use of the rosary and offering of novenas. Referral of questions to the bioethicist and offering authoritative readings and online sources are also common interventions. One of the most useful interventions is the help from the online healthcare professionals in tailoring instructions in how to monitor fertility and helping couples

quickly gain confidence in NFP—especially through the life transitions of postpartum breastfeeding and the perimenopause when a pregnancy would be difficult and unhealthy.

In the mid-1960s, a study was conducted by members of the papal birth control commission and a professor from the University of Notre Dame to assess if NFP, or rhythm at that time, was helpful or harmful to married life. The authors of the study essentially concluded that the use of rhythm was harmful to marriage and the results were presented to the commission. Some authors believe the study was a turning point for the commission members to recommend changes in Church teaching on contraception (McClury 1995). Of interest, the 1968 papal encyclical (*Humanae vitae*) by Paul VI, seems to answer the majority report finding that NFP harms marriage and stated that far from harming marriage the practice of NFP confers on the marriage higher spiritual benefits, such as development of self-mastery, more attraction to the spouse, respect for the dignity of the spouse, and being better educators/example to their children (Paul VI 1968, nn. 27, 63; Fehring 2004). If these statements by Pope Paul VI are true, one should be able to identify these benefits among users of NFP.

Of further interest is that another couple on the commission (a French couple, Dr. Charles and Mrs. Elisabeth Rendu) conducted a poll among hundreds of couples that attended their family planning center (Rendu and Rendu 1980). The participants in their analysis were using a rhythm and temperature method of family planning from 2 to 13 years of their marital life. The Rendus categorized the hundreds of responses from the French rhythm couples into the following themes: “A deeper love; Meaningfulness of the effort; It is more natural; The wife admires her husband; Fosters respect for the partner; Improved conjugal harmony; Partners are better

prepared for the conjugal act; Discovery of other means to express love; Meaningfulness of continence.” These are themes that one would hardly describe as being harmful to married life—rather themes that elevate the marital bond.

As was shown by our analysis of responses, NFP can be a challenge and struggle for some couples, especially those going through transitions and those who do not have the support of their spouse, their health professionals, their clergy, and their faith community. Couples also have difficult problems to deal with such as appropriate and moral treatments for health problems and discernment as to when and if to have more children. However, something that is worthwhile usually requires struggle and constant work, such as a marriage, raising children, and getting a college degree. Although use of NFP can be a struggle there are many spiritual and relationship benefits that have been illustrated in this and other qualitative studies.

Although couples often struggle with periodic abstinence, there are benefits that arise from the use of NFP. The main one is that it can engender self-mastery over sexual desires and by doing so lessen the possibility of treating the spouse as a sexual object. Furthermore, it helps deepen the relationship and keeps the sexual embrace new. The practice of periodic abstinence has been compared with the practice of fasting and abstaining as a religious practice (Marshall 1995; Koenig 2004; Haffner 2007). Such a practice can deepen spiritual life and provide perspective. NFP is a source of helping the husband reach what theologian John Grabowski called “Kingship” and develop self-mastery and respect for his wife (Grabowski 2004). As such NFP is essentially a spiritual practice.

One of the overall problems with couples’ use of NFP is that they view NFP as just another form of contraception and not as a means of living with and

accepting their God-given gift of fertility (Fehring 1995). Some couples do see the benefits of using NFP, as being healthy and not subjecting their body to artificial hormones. Others see that NFP can be helpful to the relationship, increase intimacy and communication. Those couples who see fertility as a gift from God and place this practice in context as to what God has intended bring the practice to another level—to a transcendence level and truly integrate fertility within their relationship as a couple and with their God. This transcendence level might come after years of practice and maturity of a couple.

A limitation of this clinically focused qualitative study is that it involves a relatively small number of participants that are rather homogenous, i.e., white, middle class, educated Catholic females. Furthermore, the responses analyzed were not sought but rather elicited from online forums. However, the responses are reflective of what would be found in a clinical practice or other types of NFP programs that are provided by health professionals. In order to get a deeper understanding of spirituality in the practice of NFP, a qualitative study that directly asked couples how use of NFP affects their spirituality would be recommended. Furthermore, a study that analyzed how couples experienced their spirituality in the beginning of use and then tracked over time or in comparison with couples who have used NFP for many years would be worthwhile. A more diverse sample of participants especially one that included poorer less educated Hispanic and African-American couples would provide a richer pool of responses to analyze.

CONCLUSION

This study shows that there are many complex responses, ethical and human problems, and many involved interventions in

the practice and support of NFP. Thus, there needs to be cooperation among health professionals with moral theologians in the provision of NFP services. It also shows that the best professions to provide these health services are professional nurses and physicians that have special training in how to provide NFP services and the ability to help couples with the fertility transitions—so too to be able to best intervene and assess potential and actual health problems. The complexity should not be up to the lay person. That is why the popes from Pius XII through Paul VI, John Paul II, and Benedict XVI have called upon health professionals to provide NFP services (Fehring 2009). Lay couples are called upon to be witnesses and supportive of others using or considering the use of NFP. Having an online system allows access to a community of support, both lay and professional, in a country with few couples using NFP and few healthcare providers with expertise in NFP. NFP is a spiritual practice not without struggles in its use. However, the spiritual gifts and benefits are, generally speaking, worth the struggle and worth the efforts of health professionals to aid in its use.

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BIOGRAPHICAL NOTE

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