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Responsible Parenthood in the Philippine Today

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Notes & Comment

*Responsible Parenthood in the Philippines Today**

THE MAIN ISSUE

In the Philippines today, the main issue is not whether we should have birth control, family planning, or birth regulation. (Since these terms have an unfavorable connotation, I prefer the word, "responsible parenthood"). No one disputes its need and serious urgency. Family planning is here to stay. The crucial question is whether we should have birth regulation at *any price*, even at the expense of higher human and Christian values which are part and parcel of our Filipino way of life. The same moral issue underlies any important human decision. Take a poor Tondo family in dire economic straits: does it matter how the father solves his financial problem, say, by highway robbery? To relieve the economic distress of one's family is a very good thing, in fact a grave responsibility, but one may not murder to get food or money.

THE "CAFETERIA" APPROACH TO FAMILY PLANNING

"Let each couple be free to choose the means of birth control they like," say some proponents of family planning. "The latest and most scientific contraceptive means must be made available especially to indigent couples since their conscience is free to accept

* This is a revised version of a talk delivered at a Seminar on Family Planning sponsored by the Pampanga Medical Society, San Fernando, Pampanga, 11 June 1966.

For some of the ideas in the first part of this talk, the author is indebted to Fr. Vicente San Juan, S.J. of the Institute of Social Order.

or reject them". This so-called "cafeteria" approach to family planning is *unscientific* for several reasons.

No conscientious physician uses the "cafeteria" approach in the treatment of diseases. The responsible physician does not tell a patient in a crisis-situation: "Here are all the alternatives; you are free to choose what you like". No, he tries to opt for the best and always gives an honest prognosis of other alternatives, e.g. harmful side effects.

It is the serious responsibility of physicians to inform women who intend to take the pills of their probable harmful side effects. Dr. Frank B. Walsh in *Ophthalmology* (1965) reports cases of women who suffered strokes, eye damage, and other injuries after taking oral contraceptives. Dr. Anne L. Southan (Cf. *Parents Better Homemaking*, November, 1965) claims that pills also tend to decrease lactation and therefore mothers should not start too soon after childbirth. Dr. Jesus de la Paz who runs a family clinic in Davao says that the Church has wisely and prudently suspended a definitive judgment on the pills because "We don't know what harm may come even from the second generation pills, since we are dealing with very powerful hormones" (a strong dosage has a masculinizing effect).

Last year the medical experts of the Vatican Council's Birth Control Commission were agreed that for the time being they would not recommend the pills to their own wives and daughters. Responsible medical opinion, e.g. the President of the British Medical Association in 1964, indicates that many more years of observation are required before the oral pills, and may I add, the intrauterine device (IUD), can be said to be beyond the experimental stage. Just as in the case of penicillin today (Cf. *Time Magazine*, June 3, 1966) there is question here of the *ultimate* effects of the pill. As responsible Physicians, do we tell our clients this: that they may be undergoing mass experimentation? Dr. Frank Ayd, Jr. (Cf. *The National Catholic Reporter*, August 18, 1965) has gathered together several statements of medical experts to the effect that the pill has an abortifacient effect. If this is true, and this effect is verified with regard to the latest sequential pills being marketed in the Philippines, then from the moral aspect, they would fall under the Church prohibition of abortion.

ETHICAL SHORTCUTS ARE DISASTROUS

Both physicians and druggists are well aware of the rapid and alarming rise of induced criminal abortions in this country but

figures¹ are very difficult to come by because abortion is punishable by law. However the sale of abortive preparations far exceeds that of the fastest selling oral contraceptive which lately have been put to gross immoral purposes. Hence a few advocates of family planning feel compelled to make contraceptives more easily available as the lesser of two evils. Now one does not right wrong by committing another wrong. In the question at hand, the principle of the lesser evil does not apply, because between massive abortion and contraception, other morally permissible options are open. Let us be on our guard in adopting *ad hoc* panic solutions whose short-range immediate benefits will ultimately lead to greater harmful consequences for our people and our country. History has shown that a "contraceptive civilization" inevitably leads to an "abortive civilization."

The problem of family planning in the Philippines is a very difficult and complex one involving as it does a confused interplay of socio-economic, medical, and cultural factors as well as personal moral-religious elements. It requires a multi-faceted solution which takes into account especially the socio-economic development of the country and the cultural attitudes and motivations of the Filipino people. A simplistic, piece-meal, short-sighted solution of cheap, easily available contraceptives is unscientific and in the long run is self-defeating.

I hope that the Filipino people are not merely interested in the most "convenient" and most "efficient" solution to the national problem of family planning. The issue which should be our chief concern is: How can we solve this problem in a *human* and *Christian* way? To use a crude example, if three out of eight barrio tenants do not have buri hats to protect them from the sun, the solution is not to chop off their heads but to make three more hats. To produce more food to take care of our growing population is more difficult than drastic fertility control by contraception and requires great moral effort. The point I wish to make is that ethical shortcuts are in the long run disastrous for the human person and for the whole nation.

BIRTH CONTROL IN SOUTHEAST AND EAST ASIA

The fact that all the non-Christian countries in Southeast and East Asia—Taiwan, Hong Kong, South Korea, Japan, Indonesia, Thailand, Communist China, Malaya, India, Pakistan, and Ceylon—are attempting to solve their population problems by means which we as the only Christian nation in this part of the world believe to be immoral, does not mean that we must follow suit simply because "everybody else is doing it". These are pagan peoples and their choice is excusable.

¹ A statistical research project on "abortions" among the married is being conducted at the present time and should be completed at the end of the year.

But we who take pride in being the only Catholic country in the Orient should know better. Let us now begin to make an independent national choice based not on expediency but on moral and religious conviction.

Sometimes we wonder why it is extremely difficult for a Catholic missionary to convert the Japanese people to Christianity. Philippine Catholicism is a real stumbling block to many Asian pagans. As one Japanese buddhist put it: "How is it that the Philippines which is the only Christian country in Asia, is so filled with graft and corruption in its government, is so much more dishonest, say, in its customs service than even a pagan country like Japan?" This typical objection calls for hard sober reflection. How can we ever expect to be the showcase of Christianity in the East if we adopt a national policy of birth control which contradicts our very Christian tradition and culture?

Empirical data thus far available seem to show that the "cafeteria" philosophy of family planning which places primary emphasis on the dissemination of cheap, easily available contraceptives, inevitably leads to a loss of fundamental respect for the value of human life and the dignity of the unique human person. There is a history of an escalation of promiscuous birth regulation programs into ultimate demands for the legalization of abortion in such countries as Japan, Scandinavia, Switzerland, and in the Iron-curtain countries. The Asian experience of Japan and India has shown that sterilization and abortion have been tried experimentally as part of an over-all birth control program. In successive International Congresses of the Planned Parenthood Federation, the historical trend has been from "no abortions" to "restricted abortions" and then to "legalized abortions". In 1965 the American Medical Association dropped its bid to relax state laws on abortion in favor of lawful sterilization. Dr. Joseph P. Donnelly of Margaret Hague Memorial Hospital remarked: "The proposal was so easy in its terms it would place in jeopardy the life of every unborn child".

Dr. Alan Guttmacher, President of the Planned Parenthood Federation of America, proposed at the White House Conference on Health (November 4, 1965) that the United States study as models the mass abortion programs of Japan and the Iron countries for making abortion easier, shortly after proclaiming, during his visit to the Philippines, that he was opposed to abortions. The only courageous person to challenge this proposal was a Texas physician who criticized "convenience" abortions. "You can say it's 'convenient' to rob a bank," he remarked, let's pass a law to make it legal to rob a bank in certain desperate circumstances".

GENUINE NATIONALISM

It is very sad that a foreign-imported, promiscuous birth control program whose past history in Asia has been quite shocking and de-

pressing is being sold to our own people, to the uninformed and unsuspecting masses, no longer by foreigners with a colonial mentality, but by our own Filipino physicians in the name of liberty, science, and progress. Let us not suppose that to be independent, scientific, and progressive, we must necessarily adopt the latest gadget on the market. Let us not mistake "gadgetry" for science. The success of the Canadian Physical Education Program was not due to "gadgets" but to a deep respect for the physical laws of the human body. In the long run "gadgetry" will not solve the *human* problem of family planning.

In our search for national self-sufficiency and greatness, we consider smuggling anti-Filipino. In the task of nation-building, we are vigorously opposed to the importation of narcotics, pornographic literature and movies which will undermine the morals of our people especially the young. Shall we now import and accept without question as a national policy an indiscriminate and irresponsible family planning program inspired and financed from abroad which will undermine the moral fibre of our country and which disregards the Christian conscience of our people?

What is even more shocking to us is the unpublicized fact that the pills are being used not so much for limiting the size of the family as for avoiding the shameful consequences of gross immorality, i.e. premarital relations, prostitution, or the "querida system". The road to national decay is not afar off, if we encourage sexual immorality because of a contraceptive mentality sanctioned solely by the external control of *hiya*.

THE EDUCATION OF HUMAN SEXUALITY

The "cafeteria" approach to family planning is inadequate and inhuman because it presupposes that the education of human sexuality is irrelevant or unimportant. Physiological and psychological findings show that human sexuality is not, like that of the animals, merely determined by cyclical and seasonal changes; it is not merely instinctive but is the product of learned and meaningful human behaviour. The total human and unique person and not merely the biological mechanism must be taken into consideration. When this psycho-social and spiritual element is overlooked, our people will become humanly and morally decadent.

The modern physician is false to his calling if he attempts to solve the problem of family planning from a purely biological point of view. The vocation of the modern physician is to place scientific knowledge and skill at the service of the human person and not merely of the reproductive organism and function. By all means the doctor of today must respect the freedom and conscience of the human couple, but he must also help the poor and uneducated to form a responsible conscience. I think that we can honestly say that the members of the me-

dical profession in the Philippines still have a fundamental respect for the value of human life and the dignity of the human person. This is a glowing tribute that we must keep untarnished.

It is impossible to think clearly about this problem of family planning unless we first clear our climate of its sexual overtones. The Philippine medical associations can contribute significantly to this if they rise in loud and clear protest against the indiscriminate propaganda and sale of contraceptives and the unscrupulous distribution of IUD's, as four hundred of the more eminent gynecologists and medical professors of West Germany did last April, 1965. The indiscriminate airing in public (aside from professional groups like this) of contraceptive methods as was done in a newspaper and by one hospital in Quezon City, is debilitating to the moral and spiritual fibre of this country.

What can be done? The Mohammedans in Mauritius Island can show us. They have rejected the "cafeteria" approach as repugnant to their sense of human dignity and have embarked upon a scientific program of birth regulation with the use of human control, that is, rhythm by the thermal-calendar method. The result has been a remarkable awakening of the human "creative spirit". Couples who cannot afford a child strive to bring it about that they will be able to afford a child. This spiritual element in human behaviour is basic to the progress of any country. Many of those who advocate contraceptives for the poor and uneducated say it is impossible to educate illiterates in rhythm. The Mauritians are illiterates. We must reject the false assumption that our so-called "bakia" crowd is incapable of moral education.

THE CHURCH AND RESPONSIBLE PARENTHOOD

That "Responsible Parenthood" is part of the total Christian approach to sexuality, marriage, and the family is clear from the Church's latest pronouncement in the Second Vatican Council's Constitution on the Church in the Modern World (Part II, Chapter I). With regard to means of birth regulation permitted by the Church, the question still being asked is: May a couple use the pill to limit the size of their family or to exercise responsible parenthood? As of June 23, 1964 Pope Paul VI issued a decree upholding the norms given by Pius XII that the pill may not be used for a contraceptive purpose, that is, precisely to inhibit ovulation and thus avoid pregnancy. When the first generation pills first appeared on the market, the literature stressed the fact that they were anovulants but growing evidence showed that they were abortifacients. Hence we can see the prudence and wisdom of the Church in not immediately endorsing the pills since their harmful side effects are not yet too well known.

How about the morality of the IUD which seems to be gaining fast acceptance among the poor and underprivileged? According to the latest available knowledge, as long as the IUD is even probably abortive, it can never be approved by the Church. On November 16, 1965 the Vatican Council approved an interim decree banning all artificial birth control methods unless and until it is modified by the Pope. Some advocates of the pill and the IUD claim that today, in view of the birth control controversy among foremost Catholic Bishops and theologians, the Church has no longer norms to guide the faithful. This is simply not true. At the conclusion of the Second Vatican Council last year, these words were embodied in one of her documents on Marriage and the Family: "The moral aspect of any procedure does not depend solely on sincere intentions or on an evaluation of motives, but must be determined by objective standards...based on the nature of the human person and his acts."

The same Constitution on the Church in the Modern World states that the faithful "may not undertake methods of regulating procreation which are found blameworthy by the teaching authority of the Church in its unfolding of the divine law." Commenting on this section of the conciliar text, Fr. Donald R. Campion, S.J. believes that its significance lies in what it does not state. While it is clear that the Council Fathers did not intend to settle any concrete issues, e.g. the pill, in the Catholic debate over birth control, at the same time nothing they state forecloses any further development of the Church's teaching in this matter. On the problem of population growth, "the Council urges everyone to guard against solutions, whether publicly or privately supported, or at times even imposed, which are contrary to the moral law". The Church does not rest content with merely warning against immoral efforts to combat the population problem. The Council Fathers recommend that "men should discreetly be informed, furthermore, of scientific advances in exploring methods whereby spouses can be helped in regulating the number of their children and whose safeness has been well proven and whose harmony with the moral order has been ascertained." In *practice* then and until the Church modifies its present position, a Catholic couple may not use the pill for the purpose of family limitation or exercising responsible parenthood. In *theory* theologians are free to experiment and express their personal opinions but it is up to the Church to make the final decision.

The Church is fully aware that the birth control problem today is of special urgency and that it demands a solution which cannot be further postponed without great spiritual harm to modern man. That is why at present the Papal Commission on problems of population, the family, and fertility have reconvened in Rome precisely to help the Pope arrive at a decision. To settle the birth control controversy is not enough. As Fr. John Thomas, S.J. points out, the major task that faces the Church today involves the careful re-examination and re-formulation

of an authentic total Christian view of human sexuality under contemporary conditions of cultural development.

NEED OF A POSITIVE CATHOLIC PROGRAM IN THE PHILIPPINE SITUATION

The Church in the Philippines must come to grips with the serious population problem in this country in a realistic way and must come up with a positive Catholic program as a practical Christian alternative to the objectionable family planning programs of Southeast and East Asia. Her chief concern must be to aid the poor and indigent families which comprise 75% of our people. This is a formidable task and the Church cannot do it alone; the leadership of the laity, the cooperation of Catholic schools, and especially of the medical profession, is essential. At the outset, it is very important to note that socio-economic reform and development and fertility control by morally permissible means are not alternative but complementary processes in any Catholic program of family planning. Above all, the success of any program depends on the cultivation of the proper Christian attitudes and motivation in the people concerned.

MORAL EDUCATION

First of all, the moral education of our people from "instinctive" to "responsible" parenthood is needed and is basic to a positive Catholic program. This is the heart of the problem. Education towards Christian maturity and responsible parenthood applies especially to the Filipino male and husband. As one prominent doctor put it: "Mawa kayo naman sa inyong asawa; huwag kayong gawang gawa. Think also of your wife who is to bear the child for nine months. There is no mother who is not scared for her life everytime she delivers a baby." Filipino husbands must learn to be unselfish and thoughtful of the "other" as a person and not merely an object of self-gratification. This training in unselfishness must begin at home, in school and in the community, and continue throughout life.

We must get at the root of the problem. In a seminar on Psychiatry and Religion held in Manila, one study revealed that the sex attitudes of Filipinos are characterized by ambivalence. On the one hand, there exists a prejudice against sex as something dirty and never to be talked about in the open, while on the other, there is a preoccupation with sex as a result of "sex bombardment" from films, books, and advertisements. The result is a confused generation of young men and women who are developing unhealthy attitudes towards sex. If we do nothing about this "sex fallout" which makes of sex a plaything to be exploited for money or pleasure, are we surprised that the Filipino male today is oversexed? If our society and culture continues to accept the "double-standard morality" (which by the way is condoned

by our civil laws on marriage), do we wonder why the Filipina wife often complains: "If I say 'No' to my husband, he will just go to another woman". It is high time that we explode the *myth* of Filipino manliness and expose the hypocrisy of marital infidelity and the cult of external unity and respectability in the Filipino family.

What is badly needed is a re-education towards a positive sexual morality. In this matter, the home and the school, both private and public, can do a lot. The time has come to re-examine the traditional moral education in our Catholic schools or the lack of it in our public schools. In this age of Church renewal following the close of the Second Vatican Council, should not the marriage instructions in our parishes and the marriage courses in our Catholic schools now be re-oriented towards the new theology of love in Christian marriage? To make these courses relevant to the concrete realities of married life, we can no longer afford to have these marriage courses continue to be the monopoly of celibate priests or nuns. Perhaps physicians, married couples, e.g. CFM'ers, and social scientists can be invited to conduct part of the course on marriage and the family.

THE CHALLENGE OF RHYTHM

Although rhythm is the cheapest and most natural method of birth regulation, it has had a very bad press. Due to lack of proper instruction and motivation complicated by many other practical difficulties peculiar to this country, rhythm will remain to be a challenge in the Philippines. Let us not begin with the defeatist attitude that a nationwide program of education in the rhythm method will never succeed here. For the time being, if this is the only morally permissible method open to us Catholics, then we must and can make it work. What can be done?

First, it is not enough to condemn government health centers in Manila and suburbs which are freely dispensing contraceptives and IUD's to poor and indigent mothers. Under the inspiration and perhaps with the financial assistance of the Hierarchy, Catholic Family Clinics where couples may get much needed advice and help in the practice of rhythm must be set up in places where the need is most serious and urgent. Such Clinics can become centers of study and research to make rhythm more effective and acceptable. Actually a beginning has already been made in this direction. Besides the Asian Social Institute's Family Center and Our Lady of Peace Guidance Center where couples can get advice to solve their family problems in a Christian way, there is a rhythm clinic directed by Dr. Vicente J. A. Rosales at U.S.T. Hospital. Another clinic is run by Dr. Jesus de la Paz in Davao City. But these clinics are only a drop in the bucket. The goal is to establish Catholic Family Clinics all over the country where scientific surveys show their

need. It is encouraging to know that Catholic Rhythm Clinics in both Europe and North America have met with remarkable success. Dr. John Marshall and other doctors of the Catholic Marriage Advisory Council in Britain claim a high rate of success with the temperature method and there is telling evidence elsewhere to show the effectiveness of rhythm when proper instruction and motivation is present.

Secondly, Filipino physicians should be in the best position to encourage and promote rhythm as a method of birth regulation. In this matter, according to some doctors, a few Filipina wives and mothers often confide to their family doctor what they would hesitate to reveal to their own husbands or confessors. It is regrettable that although the overwhelming majority of doctors here in the Philippines are Catholics, 80% of the medical profession are not capable of imparting correct information on the practice of rhythm. Why? Either these doctors are not interested in it, or sometimes because they have no confidence in it, but more commonly because the time involved in instructing couples is a deterrent and for most doctors it is not financially rewarding. A radical change of attitude and a program of re-education must begin with the medical profession. The heroic example of some responsible and conscientious Catholic doctors who have placed service and love of the poor before material gain and success, is worth emulating. It is a challenge to the Philippine medical profession to do scientific research to make rhythm more effective. It is our hope and prayer that science may soon find something to make rhythm 100% effective and would not we take national pride were that discovery made possible through the pioneering effort of a Filipino doctor running a Family Clinic and Rhythm Research center.

Thirdly, what can our Catholic schools do? It has been suggested by Fr. James Madigan, S.J. of Xavier University, Cagayan de Oro City, that the thermal-rhythm method be taught as part of the marriage course to seniors (both boys and girls separately by sex of course) in high school and college. Fr. Madigan gives convincing reasons for his proposal which is worthy of serious thought. Perhaps the best qualified teaching personnel would be married couples themselves who have practiced rhythm and made it work. A Catholic physician could give proper instructions to future husbands so that they will be able to cooperate intelligently and understandingly with their wives in the practice of rhythm. I do not see any reason why our Catholic universities and colleges cannot be centers of instruction and assistance for married couples as well as training grounds for future community leaders who will help the poor and uneducated in their own communities solve their family problems in a Christian way. The teaching of rhythm in our schools may be put to bad use by some but the good of the vast majority will make up for any such evil effects. There is no better place where our young men and women can be motivated by Christian values and attitudes than in the Catholic school.

THE IMPORTANCE OF CHRISTIAN MOTIVATION

Let me conclude, by emphasizing once again the importance of Christian attitudes and motivation for the success of any positive Catholic program of responsible parenthood. This is not to minimize the necessity of structured social changes required to change the attitudes and motivations of individuals. One cannot solve the human problem of reckless driving simply by wider roads and more traffic signs and lights; responsible driving is the result of a fundamental respect for human life, other's as well as one's own.

The future of responsible parenthood in the Philippines depends on how well our society and culture has succeeded in developing in our young men and women the total Christian approach to sex, marriage, and the family. The practice of rhythm demands unselfishness and requires a discipline and order in married life which is much more difficult to acquire when one must first unlearn long habits of selfish self-indulgence. If one has come to regard sex from a purely biological point of view instead of a truthful communication of love or total-self-giving; in short, unless one has learned "to know how to love another as a person", then rhythm will be considered an "ineffective, exasperating, and sophisticated" method of family planning.

The national discipline and sacrifice required to solve our population problem through socio-economic development and fertility control must ultimately come from the moral reservoir and spiritual resources of our people. The problem of family planning is one which no single individual or any one group of individuals can solve alone; we must all work together to find the *human and Christian* solution to one of our more serious and urgent national problems. It is our grave individual and social responsibility, that is, if we take our Christianity seriously.

VITALIANO R. GOROSPE, S.J.

The Church in China, a Church Being Strangled

This expression, recently used by Pope Paul VI to describe the situation of the Churches of Silence, is perfectly applicable to the Church of China.

Some, perhaps, will shrink from using the word which pontifical authority did not hesitate to employ. Why? We do not want to paint the picture darkly. Or we fear, as one excellent religious told me, to