

Diocesan Activity Report-NFP

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DDP CERTIFICATION COMMITTEE

On Jan. 12, 1988 the DDP Certification Committee met in Newark, N.J. for the first time. In attendance were Bishop McHugh, Fr. Phil Kraus, DDP's staff, and Stephen Burke (Diocese of Providence, RI); Carmela Caverio (Fresno, CA); Donna Dausman (Springfield, IL); Rose Fuller (Northwest NFP Services, OR); Robert Kambic (Johns Hopkins Univ., MD); Jay Paulukonis (Sioux Falls, SD); Mary Ann Stanton (Cleveland, OH); James Statt (Phoenix, AZ); and Mary Pat Van Epps (Memphis, TN).

The Certification project was recommended by the diocesan coordinators during the National meeting at Seton Hall, N.J. in July 1987. The purpose of the Committee is to establish criteria for NFP teacher training and certification at the Diocesan level. This will enable the bishops to recognize qualified NFP teachers, and will give validation to the diocesan teachers.

Presently, the Committee is collecting information in three areas; 1) NFP methodology, 2) Church teachings on marriage, the family, human sexuality, and responsible parenthood, and 3) Pertinent info. on the psychological, and sociological aspects of marriage and the family. From these areas standards will be drawn according to content needs. Attention will be paid to the incorporation of the needs of the Hispanic community.

The next meeting will be in May.

AIDS AND PREGNANCY

A fast growing casualty of the AIDS epidemic is the pregnant woman. Understandably, natural childbirth is under attack. The recommendations of the Centers for Disease Control are clear: "Most HIV-positive women are asymptomatic and are healthy looking, so it must be assumed that any obstetrics patient might be infected." [cf. *Ob. Gyn. News*, 23 (Jan. 15-31, 1988): 1]. Consequently, it may not be unusual to see the future enforcement of infection control procedures for all patients. Furthermore, breast feeding may also be discouraged in all women whose HIV status is unknown.

The seriousness of prenatal screening must not be undersold. Dr. Keith Krasinski, of N. Y. U. School of Medicine, believes that if "more aggressive prenatal HIV screening programs are not undertaken, a significant number of infants and children will miss out on the potential benefits of antiviral treatment . . ." [cf. *Ob. Gyn. News*, (Dec. 15-31, 1987): 1]. This becomes especially urgent when current statistics are viewed. The Centers for Disease Control in Atlanta, estimate that 78% of infants and children with AIDS acquired it from their mothers; and, according to the National Commission to Prevent Infant Mortality, an "estimated 10,000 - 20,000 American children will be sick or die from AIDS by 1991" [cf. *Ob. Gyn. News*, 23 (Jan. 15 - 31, 1988): 24].

ENDOMETRIOSIS

Endometriosis is a disease which escapes complete understanding. By definition it is the abnormal growth of the endometrium tissue (which lines the uterus) on other internal parts of the body. Most often it develops in the pelvic area on the ovaries, exterior of the uterus, and fallopian tubes. Because the disease involves endometrium tissue, it responds to the hormonal changes of the body. Consequently, the tissue builds up and bleeds at the time of menses. This accounts for the severe pain which some women feel.

Because of the prevalence of endometriosis in infertile women, (estimated at 20-50%, compared with 2.5 - 5.0% in fertile women), the disease has long been associated with infertility. There are those in the medical field who challenge the data [cf. Ob.Gyn. News, 23 (Oct. 15-31, 1987):13], stating that this does not necessarily mean that the disease causes the infertility. In a study done in England, researchers have found that the "rate of conception among the women whose endometriosis was eliminated (by surgery or hormonal therapy) was significantly less than the rate in a control group of normal women after 6 to 12 months. . ." (p. 13).

Regardless of this challenge, current research presented at two different conferences [N.J. Medical School; and Georgetown U. School of Medicine, Wash., D.C., cf. Ob. Gyn. News, 23 (Oct. 15 - 31, 1987)] assumes the relationship between the disease and infertility and concentrates upon the methods of therapy. Conservative and individualistic treatment is accented. Care must be taken to consider all factors. For those older patients with potentially fewer childbearing years and for those with a severe condition, surgery may be in order. However, "for women younger than age 30 with limited pelvic disease and no ovarian involvement, hormonal treatment should continue for 6-9

months." (p. 33). In some cases surgery may be needed for those who do not respond to hormonal therapy.

The medical community is debating the treatment of the disease. There are those doctors who recommend an aggressive approach --in-vitro fertilization-- supposedly "circumscribing" the disease. Others believe that "aggressive high-tech" approaches should only be used as the last of resorts. (p.32) For the afflicted woman seeking pregnancy, these studies on methods of therapy are important to help her choose an effective therapy.

NEWS BRIEFS

INTERNATIONAL FEDERATION FOR FAMILY LIFE PROMOTION

A book of abstracts of all papers presented at the 4th Congress of the International Federation for Family Life Promotion, Ottawa, Canada (June 29, 30 & July 1, 1986) is now available.

The book is divided into three parts which follow the Congress programme: 1) "Families in a Changing World"; 2) NFP; and 3) "Family Life Education". Readers will be able to review topics of interest quickly, and contact IFFLP if the full text is needed. Selected scientific papers will be published in the International Journal of Fertility. Reprints of these will also be available from IFFLP (in June '88).

Copies may be obtained from: International Federation for Family Life Promotion, 1511 K St., N. W., Suite 700, Washington, D.C. 20005

(NEWS BRIEFS continued on p. 4)

FERTILITY AWARENESS/NFP FOR
ADOLESCENTS - A REPORT

The following is an abstract of a study done by the NFP Center of Washington, D.C., Inc.*

The acceptability and effect of teaching fertility awareness on teen sexual activity and decision making was tested in a multisite pilot program which taught fertility awareness via the prospective marker of the cervical mucus (ovulation method of natural family planning). Two hundred U.S. and thirty-five Guatemalan volunteer women aged 15-17 years in a structured one year curriculum, monitored cycle charting and explored the implications of experiencing one's signs of fertility. Control subjects were recruited from general population and from family planning clinics.

Nine percent of the U.S. study group were sexually active prior to entry. By cycle 12, half had discontinued activity. Conception rate was 0.0044. The continuation rate dropped from 90% at cycle 7 to 71% at cycle 8 due to scheduling constraints for 2 classes and to 57% at cycle 12. Post-program followup of the early leavers showed only one third the expected rate of onset of sexual activity and pregnancy.

Parent involvement correlated positively with postponement and/or discontinuation of sexual activity. Reported movement away from peer group pressure appeared three months after entry.

Reprints and supplementary data are available from: Hanna Klaus, M.D., Executive Director, Natural Family Planning Center of Washington D.C., Inc., 8514 Bradmoor Dr., Bethesda, MD 20817.

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Feeding and Hydrating the
Permanently Unconscious and Other
Vulnerable Persons

Thousands of patients in these United States are among the permanently unconscious ("persistent vegetative state" or "irreversibly comatose" but non-terminal patients.). Some state courts, notably New Jersey's in the Jobes case, have made it legally permissible to withhold or withdraw nutrition and hydration provided by artificial means from this class of patients.

Some ethicists, "Catholic theologians" among them, see no moral problem in such a procedure affecting removal of life-sustaining care from the gravely disabled and helpless of this category, i.e., the permanently unconscious non-terminal patients.

A coalition of prominent ethicists, doctors and attorneys has issued a strong and persuasive statement that contradicts such permissive theologizing and argues for a strong moral presumption for the use of food and fluids, subject to exception in only those few exceptional cases when their provision is completely useless or excessively burdensome for the patient. This case-specific demand, with its accompanying ethical reasoning, was drafted by ten experts (Bishop James T. McHugh among them) and signed by dozens more concerned professionals.

The statement "Feeding and Hydrating the Permanently Unconscious and Other Vulnerable Persons" is available from DDP for NFP (postage will be charged). Or, "Issues in Law and Medicine", P.O. Box 1586, Terre Haute, IN 47808-1586. Costs are 1-4 copies (\$1.00 each), 5-10 (.90), 11 or more (.80), postage included. We strongly recommend acquiring, reading and sharing the document.

(NEWS BRIEFS cont.)

Diocese of Albuquerque;

ST. Joseph Hospital NFP Teacher Education Center announces Summer teacher training programs; "NFP Practitioner" and "NFP Instructor", August 19-27, 1988 in Albuquerque, N. M. The program is accredited by the American Academy of NFP. For further information contact Shirely Hoefler, CNFPE, 400 Walter NE, Albuquerque, N. M. 87102.

Diocese of Memphis;

A Mother/Daughter Program for 9-12 year old girls will be held on April 17, 1988 at the St. Francis Hospital Longinotti Auditorium. For information please contact Mary Pat Van Epps, NFP Center, St. Francis Hospital, 5959 Park Ave., Memphis, TN 38119.

Diocese of Tucson;

The St. Joseph's Hospital NFP Center has recently produced a public service announcement on NFP in both English and Spanish which has been run on all of Tucson's TV stations. The Center is also sharing office space with REACHOUT, a pro-life pregnancy counseling service.

American Academy of NFP;

The American Academy of NFP will be holding its 7th annual meeting in Albuquerque, N. M. June 23-26, 1988. The theme is "The Age of Enlightenment, Faith and Science". It will explore the underlying principles in philosophy, ethics, and theology which serve as the foundation of NFP teaching and promotion. The Keynote Address will be given by DDP's Fr. Phil Kraus. Further info. can be obtained from Sr. Julianna Jervis, CNFPP, St. Mary's Regional Medical Center, 235 W. 6th St., Reno, N. V. 89520.

Families of Australia Foundation;

An international conference entitled "The Christian Family-Towards 2000" will be held in Sydney, Australia July 19 - 24, 1988. Among the speakers will be, Mother Teresa of Calcutta, Edouard Cardinal Gagnon, Msgr. Carlo Caffara and Drs. John and Evelyn Billings. Info. can be obtained from P. O. Box 174, St. Paul's, Randwick, N. S. W. 2031, Australia.

Human Life International;

A world conference on "Love, Life and Family" will be held in Irvine, CA April 27 - May 1, 1988. Send all inquiries to HLI, 7845-E Airpark Road, Gaithersburg, Maryland 20879.

National Coalition of NFP;

NCNFP will hold its 5th national and international symposium on NFP August 14-18, 1988 in Los Angeles, CA. The National Coalition is an association of private and public institutions and individuals whose purpose is to facilitate NFP information. For further information contact Diane Vogelsang, c/o Los Angeles Regional Family Planning Council, Inc., 3600 Wilshire Blvd., Suite 600, Los Angeles, CA 90010.

Northwest Natural Family Planning Services;

A teacher training and certification program in the "Sympto-Thermal Method" will be held Oct. 16 - 21, 1988 in Portland, Oregon. For further information please contact; Rose Fuller, NWNFPS, Providence Medical Center, 4805 N. E. Glisan St., Portland, Oregon 97213.