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Fundamentals of Natural Family Planning

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The fundamental reason behind a natural family planning program is the delivery of quality NFP services to those who desire them. To accomplish this purpose, a well-organized program will provide continuity in administration, training, outreach and follow-up, together with a medical component. These elements can be provided by a program consisting of one or two couples or by a large staff. Quality delivery of services is the measure of a good program.

“Program” may be loosely defined as a “formalization” of the delivery system so that quality services may be provided. If there is no quality control of the teaching and training component, misinformation may make its way into the instruction or supportive services may not be provided. The results may be poor evaluation, outreach, record-keeping and follow-up, or their lack altogether.

There are many types of NFP programs. Each program must be tailored to the people or culture being served — to a rural or urban setting (or a combination of both), and to the available resources in people, money and expertise — and must take these elements into consideration. Programs must be designed for particular situations.

Programs may be volunteer efforts completely or partially, or may

operate with a paid staff and volunteer teachers, or the teachers may be compensated for out-of-pocket expenses. What is important is that a system of responsibility for the delivery of services be established together with accountability for resources.

New types of NFP delivery systems or programs have evolved to meet the various combinations of needs in a given community. The Center for Life concept has been developed in a number of hospitals in the United States. These programs provide, in addition to natural family planning, maternity assistance as a valuable adjunct to Birth-right and pregnancy aid centers, help for shut-ins, assistance for the elderly, educational seminars to develop intra-family communication and understanding, classes for single mothers-to-be, natural childbirth, nutrition, legal services and family-oriented medical services.

Programs have been designed to work with minority groups and the disadvantaged. Other programs have been developed which are funded by state health and welfare departments. NFP programs have been developed on college campuses and military bases and for individual parishes.

The knowledge of natural family planning can be delivered in so many different ways that it would be impossible to have people speak in behalf of all of the possible examples.

Speakers at this meeting will present several examples of excellent delivery systems of NFP. These programs have been selected not only because of their quality, but also because they may serve as prime examples for those working to provide quality NFP services in their local areas.
