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## Periodic Abstinence: Definition, Motivation and Research

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The term "periodic abstinence" is more popular than ever before, mainly because it has survived as a synonym and unique distinguishing characteristic<sup>1, 2, 3</sup> of the most promising fruit of the family planning field, natural family planning. "Rhythm," as a useful term, is being discarded not only because modern methods based on periodic abstinence rely very little, if at all, on calendar calculations, but also because such calculations did not usually indicate fertility precisely so that a couple could plan pregnancies as well as avoid them. In this respect NFP as practiced in the sympto-thermal and ovulation methods is revolutionary, the first family planning method to enable a couple to plan a pregnancy distinct from all other family planning methods which can, at best, prevent a pregnancy. Modern NFP, and the ovulation method in particular, have scored unique successes in applying periodic abstinence to the infertile days so that a couple having difficulty conceiving can better apply themselves to their fertile time and thereby produce a child.<sup>4</sup>

Another term sometimes used presumably to avoid a possible negative connotation of periodic abstinence is "periodic continence."<sup>5, 6, 7</sup> However, few have actually attempted to define what either of these terms means. A veteran sympto-thermal teaching couple, facing this issue directly, prefers the term "periodic continence" and identifies it as "refraining from coital relations" (Ref. 7, pp. 29-30). As for periodic continence, it can be said that continence is a virtue which, like chastity, should characterize human behavior all the time so that coital relations can hardly be considered unchaste or, even worse, incontinent in the proper circumstances. So, we are left

with periodic abstinence, in spite of the moral-theological connotation of abstinence with refraining from foods, as the most appropriate distinguishing characteristic of natural family planning.<sup>8</sup> With the provision that a couple not abstain from "expression of affection" while abstaining from "coital sexual intercourse," it would seem that we now have an adequate definition of periodic abstinence, i.e., refraining from coital relations.

Let us refer to a more specific formulation of what might then be called periodic abstinence or non-coital sex. According to a well-known marriage counselor, David Mace, writing on "The Uses of Non-Coital Sex," it includes all other forms of sexual arousal. The author adds later that "we are looking at sex, of course, as recreation."<sup>9</sup> Haven't we gotten far afield of natural family planning here, isolating and suppressing fertility or the procreative aspect of coitus in what can be called a contraceptive mentality? Let us return to some natural family planning writers to see if they can lead us out of this contraceptive behavior which includes genital arousal without coitus. Some NFP writers are both challenged by Cardinal Suenens' *Love and Control* to stop short of orgasm and consoled by him after indeliberate lapses which at least have avoided the misery of separate beds.<sup>10, 11</sup> A couple writing about how "abstinence makes the heart grow fonder" unabashedly declares that: "Half the pleasure of abstinence is that this is your chance to enjoy lust — a sensuous desire, bodily appetite, longing or eagerness to enjoy."<sup>12</sup>

Not satisfied with simple lust, they recommend a limited period of cuddling to satisfy sexual desire for a time, although they warn that such cuddling should be avoided if possible, leaving the couple suspended in their sensuous desire which is likely to lead to genital arousal. Another experienced NFP group approaches genital arousal in a more systematic, gradual manner, allowing more intimate modes of affection such as "penetration without ejaculation" only after the "couple is more proficient in the art of sexual mastery," rationalizing that it is far more important to express love and risk failure (i.e., presumably orgasm or a surprise pregnancy) than to suppress love and risk the marriage. While the minor modes of affection such as "words, kisses, embraces, touches" and to some extent, the intermediate modes, "petting, touches, caresses, and limited genital contact without penetration"<sup>13</sup> are legitimate forms of human expression of affection in themselves, when accompanied by genital arousal they immediately take on a procreative meaning which is appropriate only to the coital act in marriage.

All genital arousal is physiologically ordained toward facilitating the meeting of sperm and egg. The early tumescence of the penis complemented by the relaxation of the vulva enables easy penetration of the introitus by the penis. The arousal fluids secreted by both penis and

vagina allow a smooth and deep penetration aided by the fertile-type mucus when present. The orgasmic movements of both penis and vagina mix the semen with the mucus which will either provide channels for sperm migration through the cervix if of a fertile type, or will block the sperm at the cervix if of an infertile type. The woman's orgasm, while not usually necessary for fertilization, produces an enlargement of the inner vagina to accommodate the semen and a lowering of the cervix to reach into the seminal pool, thereby rendering greatest potential for sperm migration if the fertile woman is supine and reaching orgasm at or shortly after her husband's orgasmic ejaculation. This physical activity proceeds in a natural progression which has been separated into stages, the first one being that of arousal.<sup>14</sup>

If a couple is abstaining from coital relations while being aroused, their genital organs are prepared for nothing. They are left as two individuals holding their hands out to each other without clasping them in a handshake, let alone a caress. They are left wondering whether it would have been easier to stop before they became aroused than it is to stop once aroused. And even if it is easier to stop once aroused, what was the purpose of their physical preparation for coitus when they knew they were not going to complete the act? Are they being fair with their bodies, with each other, with their fertility? Are they not rather separating and destroying not only the procreative but also the unitive aspects of their sexual relationship in this abortive communication? And even if they do unite coitally but withdraw before ejaculation, isn't this union incomplete or, rather, only partial?

### Proposed NFP Definition

A proposed definition of natural family planning (WHO Task Force on methods for the determination of the fertile period) states that "the act of genital intercourse, when occurring is complete."<sup>15</sup> This might imply that the act of genital intercourse begins with genital arousal and ends with orgasmic coital relations. If, however, complete genital intercourse includes orgasmic release apart from coital relations, then there is really no need to practice natural family planning or any other method of family planning. The interest of the WHO in periodic abstinence has traditionally been focused on the development and availability of "an accurate, easy, and cheap test that could be used in the home for the prediction of ovulation some days in advance"<sup>16</sup> and this test may soon be realized in a "do-it-yourself" kit which would allow couples to use barrier methods, non-coital sex, and early abortifacients.<sup>17</sup> Among those who would welcome such a kit are those already combining barrier methods and non-coital forms of sexual gratification. While offering lip service to periodic abstinence, these new and increasing groups usually tend toward non-coital sex

and barrier methods as the easier course.<sup>18, 19, 20, 21, 22</sup> The Department of Health, Education and Welfare is sponsoring the development of such programs already in one region by paying a teacher trainer who advocates barrier methods to train other family planning staff to selectively use these methods during the fertile time as indicated by natural family planning,<sup>23</sup> or rather, by the signs of fertility.

All these groups provide sound practical cautionary advice for their clients, such as refraining from checking the mucus symptom when the woman is "turned on or ready to make love,"<sup>24</sup> refraining from "withdrawal or any direct contact between sexual organs . . . on a fertile day"<sup>25</sup> because, on the one hand, "you will produce mucus from right inside when you are turned on, and it is not the same as cervical mucus,"<sup>26</sup> and on the other hand "even if the man withdraws on time, . . . pre-ejaculatory sperm is very fertile, and the ovulation mucus is easily penetrable by sperm."<sup>27</sup> Women are advised "to use a diaphragm during fertile days . . . or . . . to abstain during the highly fertile days, and to use a diaphragm during the preceding and following relatively fertile days."<sup>28</sup> Men are told that "during some of her monthly cycle you will need to abstain from that which causes babies" which leaves a great deal of latitude for imaginative genital arousal behavior.<sup>29</sup> Some of these people eventually realize that arousal, by interfering with the mucus observation, also prevents a woman from knowing her infertile and relatively fertile and highly fertile days. Perhaps they will realize that inserting a diaphragm interferes with the natural flow of mucus and induces a woman to examine herself internally where she is always wet and will never appreciate the dry infertile days early in her cycle.<sup>31</sup> Those who rely mainly on the mucus symptoms have tended to appreciate these problems, to realize the need for abstinence from genital arousal and to see practical reasons for periodic abstinence interpreted as the refraining from genital arousal.<sup>32</sup> They are finding that their daytime working hours, at least early in the women's cycle, are for checking their fertility and attending to each other and the rest of the family in many ways, and coital relations can be planned for a quiet intimate time at night. Thereby they avoid the contraceptive's burden of being like an ever-ready flashlight battery, ready to be turned on, even at inappropriate times.

Some of the newer groups are non-Catholic and non-Christian and are not only avidly assimilating the knowledge gleaned from mainly Catholic researchers, but are arriving at an appreciation of the procreative potential they are allowing themselves to experience for the first time. They may join the many older groups, mainly Catholic and Christian, who also practice genital arousal and non-coital relations and who have been led along slowly by veteran NFP teachers.<sup>33</sup> In a discussion after the presentation of Marshall and Rowe's British

study<sup>34</sup> where there were "many instances of the occurrence of a sexual climax without intercourse," the presenter maintained that the fault lies with poorly trained teachers.<sup>35</sup> At the same conference sponsored by HEW and the Human Life Foundation, Dr. Evelyn Billings further commented on coitus interruptus being very prevalent among Mediterranean immigrants in Australia. Nevertheless, she speaks of the possibility of growth in this area with the help of the teacher.<sup>36</sup> An Australian study done by Maureen Ball on clients using the ovulation method asked the same questions Marshall and Rowe asked the basal body temperature method clients and revealed a similar problem with "love-making lead(ing) to a climax." However, there were slightly fewer OM couples who climaxed often and more OM couples who had "no love-making" during the supposed time of abstinence, presumably because more early infertile days were available for coitus among the OM users. Nevertheless, over 70% of the OM couples (both men and women) and 80% of the BBT couples (both men and women) engaged in genital arousal leading to orgasm.<sup>37</sup>

In a small survey I conducted last year among teachers of the ovulation method I asked, "How do couples abstain? a) by avoiding coital relations and seeking genital arousal in other ways? b) by avoiding genital arousal while maintaining physical contact? c) by avoiding physical contact?" All of the teachers agreed that at least some couples, especially young couples, sought genital arousal while avoiding coital relations. Most of the couples, however, avoided genital arousal and maintained physical contact. Moreover, these latter were cited as the most successful couples in regard to their marital harmony and success using the method. Those few who avoided physical contact tended to experience less marital harmony.<sup>38</sup> Teachers would, therefore, be well-advised to foster the practice of abstinence as defined by avoiding genital arousal while maintaining physical contact.

### Issue Is What Is Natural, Proper

The issue here is basically not what seems to make couples happy but what is natural and proper for couples to do in regard to their family planning which will produce happiness, always a byproduct of right action. Pope Paul in his encyclical, *Humanae Vitae*, stated that "each and every marriage act (*quilibet matrimonii usus*) must remain open (*destinatus*) to the transmission of life."<sup>39</sup> This reformulation of traditional Catholic teaching he bases on the inseparability between the unitive and procreative meanings of the coital act.<sup>40</sup> When he further states that "the direct interruption of the generative process already begun . . . (is to be absolutely excluded as licit means of regulating birth,"<sup>41</sup> he is presumably including genital arousal which is, by its very nature, a part of the "generative process," as anyone reflecting on the physiological processes involved and already mentioned



can attest. If arousal is allowed to proceed in a way “which jeopardizes the possibility of transmitting life — which God the Creator of all things has, according to particular laws imprinted therein, (it) goes against both the divine design of marriage, and the will of the first Author of human life.”<sup>42</sup> The many studies which focus on the difficulties of abstinence would be better re-evaluated in terms of dissatisfaction, not so much with abstinence itself but with a mistaken notion of abstinence which is presented euphemistically as “love-making,” a love which can never truly satisfy if it violates a man and woman’s nature and the nature of their sexual relationship.<sup>43</sup>

The doctrine which respects the procreative nature of genital activity has been maintained by Augustine, who claims any genital act without procreative intent is at least venially sinful;<sup>44</sup> Thomas Aquinas who claims that non-coital ejaculation is exceeded in sinfulness only by murder<sup>45</sup> but who is much more permissive than Augustine about coital relations,<sup>46</sup> and Sigmund Freud who considers as “perversion” all sexual activity which “departs from reproduction as its aim and pursues the attainment of gratification independently.”<sup>47</sup>

Not too long ago being a virgin meant that a young woman or man had engaged in any kind of genital arousal and climax except coital relations.<sup>48</sup> Today after the pill and Planned Parenthood and SIECUS have helped them break down their hypocritical virginity so they can go all the way,<sup>49</sup> they are returning to a secondary virginity<sup>50</sup> and their leaders are even embracing virginity from the outset.<sup>51</sup> Let us hope their virginity remains true, i.e., abstinence from genital arousal, so they can later practice natural family planning without the difficulties encountered by their parents who have been converted to the contraceptive mentality without, perhaps, realizing the diverse and perverse implications of their attitudes which are clearer to youth who have fewer social inhibitions than their elders. If their parents do not understand how their contraceptive views have opened Pandora’s box of sexual perversions, certain Catholic theologians have seen the implications of considering a non-procreative sex act as permitted within formal marriage, for in that case “nothing serious can be said against anal or oral intercourse.”<sup>52</sup> The full range of perversions consistent with the contraceptive mentality which violates “the natural law doctrine’s requirement of insemination in the vagina” is concisely drawn by Michael Valente who sees no difference between using a condom, anal intercourse, coitus interruptus, masturbation, homosexuality, and bestiality.<sup>53</sup> The NFP leader who repeatedly refers to this equivalence of all orgasmic or complete sexual acts and who criticizes Nofziger’s “corollary of natural birth control — oral love making — Try it, you’ll like it; and your husband will certainly appreciate it,” ascribes to the position that any genital stimulation within marriage is permissible short of climax.<sup>54</sup> Whereas Nofziger has backed off her unabashed

recommendation for oral-genital sexual activity leaving to the imagination what she<sup>55</sup> explicitly stated in her previous book quoted by this leader of Couple to Couple League, Mr. Kippley accepts and tacitly approves the fact that "sexually stimulating activity is engaged in by some who recognize their limits of self-control and who keep passion within bounds."<sup>56</sup>

After realizing the prevalence of various forms of genital activity and the interest of family planners in the occurrence of pregnancy, the question, "Was there intimate sexual contact or incomplete intercourse at other times?" makes good sense in a pregnancy investigation.<sup>57</sup> A large, recent multi-national retrospective study of 2,351 pregnancies to determine the length of the fertile time, highlights the need for taking into account the nature of the sexual acts attributed to producing the pregnancy, noting the greater possibility of a normal coitus being responsible for the pregnancy rather than a non-completed act which, by closer proximity to the supposedly fertile period, had nevertheless been considered responsible for the pregnancy.<sup>58</sup>

The experiential awareness of fertility is helping many improve their notions and behavior regarding sexuality. While not giving up non-coital genital arousal, some have noticed that "arousal may be difficult or take extra focusing when the body is not tuned into intercourse (and that) forcing that experience would lead to a direct split in feelings/emotion and physiology."<sup>59</sup> The issue of a woman's desire for arousal or coital relations at the fertile time has not been settled since studies up to now have been done on women who did not have experiential knowledge of their fertile period now afforded by the mucus symptom.<sup>60, 61, 62, 63, 64, 65</sup> Some say a woman's desire is heightened at the fertile time<sup>60, 63</sup> whereas others associate a greater increased desire before or after menses,<sup>61, 62, 64, 65</sup> which up to now has been a much more recognizable time for a woman than the contrasting elusive "midcycle" which may or may not be fertile.

The real issue is whether a man or woman can control their desire for arousal, whether it comes at a fertile time or not.<sup>66</sup> Whereas the man has his own hormonal cycles and is notably more arousable in the morning when the testosterone levels are high,<sup>67</sup> he has demonstrated his ability to control his erections, which Raymond Rosen of Harvard says is under the control of the will and is not an involuntary reflex like breathing, as Masters and Johnson maintain.<sup>68</sup> Although men are still accused of imposing themselves on women who have suppressed their fertility,<sup>69</sup> fertile women sometimes find it more difficult than men to truly abstain during the fertile time.<sup>70</sup> Their physiology is geared for social activity and reproductive action at the fertile time<sup>71</sup> and these women may have their own problems abstaining, especially when they have felt cheated of sexual pleasure in the past. Aquinas made allowances based not only on the lesser ability of



women to abstain but also on their disinclination to directly request or initiate coital relations.<sup>72</sup> Yet, both men and women are inclined to want to be held and cuddled, without intending arousal and perhaps even more so at the fertile time when a woman's body temperature is low, so that she may be warmed by the physical closeness of her mate. Furthermore, their attractive scent at the fertile time can alert their man that he will need to be more attentive to his woman and exercise more caring and discipline<sup>74, 75</sup> without intending genital arousal for either himself or his spouse.

### Further Considerations

The case for fertile coital relations could be developed further from both a physiological and psychological basis, so that coital relations might seem to make sense only during the fertile time. Periodic abstinence during the fertile time along with coital relations during the infertile time would then seem to approach the same contraceptive mentality demonstrated by those who practice genital arousal without coitus during the fertile time. Pope Paul saves us from both a desperate marital celibacy and a household overburdened by children by declaring emphatically that "these acts are still lawful"<sup>76</sup> but that there must be "serious motives to space out births."<sup>77</sup> Herein lies the crux of family planning, the motivation of a couple to avoid conceiving a child for the time being. As one lady involved in a study of behavioral components influencing use effectiveness of the ovulation method put it, "It all depends on how important it is not to start another child."<sup>78</sup> In a later presentation, analyzing not only effectiveness but satisfaction with the method, Dr. Hanna Klaus and her collaborators found that those women becoming pregnant by their own mistake nearly reached the high satisfaction levels of those who either did not become pregnant or were planning a pregnancy, suggesting they may have wanted to conceive a child in some unexpressed way.<sup>79</sup>

One recent book on the ovulation method includes a section on motivation, alerting women "who express a desire not to get pregnant" to the many reasons they may risk a pregnancy, including "the need to prove their fertility, the desire to save a relationship, loneliness . . ."<sup>80</sup> The authors recommend asking oneself questions such as "How many children did your parents have?" and "What exactly does the word abstinence mean to you?" In a study of American physicians to find predictors of how many children they wanted and expected, "The strongest predictor was the size of the physician's own family."<sup>81</sup> This conclusion is not derived from deep psychological analysis and one wonders why clear reasons for having children cannot be better elicited to explain why pregnancies occur when not expressly intended. The answer must lie within the family relationship which has not been adequately assessed up to now. Furthermore, to

date questionnaires have concerned themselves more with satisfaction than motivation. Now that there is no doubt from studies already done that periodic abstinence, or rather its attempted practice, meets the approval of most couples who practice it,<sup>82</sup> isn't it time to study a couple's motives not only for conceiving a child but also their motives for not conceiving? This has been effectively done in retrospect for motives for not continuing a pregnancy by a researcher interviewing women who aborted. Although most had used contraceptives in the past and had them still available, they had decided to take a chance on becoming pregnant because pregnancy was more attractive for various reasons than the use of contraception. The availability of abortion increased their chance-taking.<sup>83</sup> This astute sociologist, Kristin Luker, recently participated in the HEW-sponsored NFP positive action planning conference for Regions IX and X. Although her main research interest now lies in activists on the abortion issue, she favors NFP because she is convinced of the personal advantages for unimpeded fertility awareness and is concerned about the lack of serious consideration of the social implications of mass abortion.<sup>84</sup>

NFP clients can be helped to assess whether they also subscribe to this utilitarian view of pregnancy by some natural family planning teachers who routinely ask "What would you do if you became pregnant?"<sup>85</sup> If such a question is not intrusive or offensive, could other queries about the importance of not getting pregnant be any more intrusive? Such a question is covered in a forthcoming book to be published in New York called *No Pill, No Risk, Natural Birth Control* by Nona Aguilar. As usual, the questionnaire went out to each spouse to be completed separately. For all the claims that the practice of periodic abstinence increases communication between a couple,<sup>86</sup> none of the studies making such claims verified them by interviewing the couple together. Family planning research in general and natural family planning research in particular have studied the family as if it were two isolated individuals.

Large studies already well underway continue to obtain their information about motivation through separate interviews and separate forms which are crossmatched to check if each spouse says the same thing. It is conceivable that each spouse thinks he or she is deferring to the other in his or her responses which the interviewer interprets in order to answer the question, "Are patient and spouse still intent on avoiding the pregnancy during the remainder of the study?" The best way to check would be to listen to and clarify each other's responses to that question. An inquiry as to when the couple might want more children has been posed before. Over 20% said they were undecided and most of those who wanted more could not say for sure when.<sup>88</sup> Yet, the ongoing Los Angeles study does not allow for any expression of uncertainty after couples are involved in the study. The real problem, however, is that the actual family planning will involve an inter-

action between the couple and the only interaction being assessed in any of the above studies is that by the investigator comparing the individual responses of each spouse or, if only one partner is questioned, what the spouse says about the other.

### Psychologists Lack Conclusions

Even the most sophisticated psychologists applying themselves to family planning research have not been able to conclude much about what motivations are relevant for effective family planning, and thereby what reasons are sufficient at any given time for a couple to comfortably and effectively practice periodic abstinence during the fertile time.<sup>90</sup> A very knowledgeable student of women's family planning behavior, Judith Bardwick, at the NFP Research Conference in 1972, claimed that the woman's perception of her man's attitudes and values is what determines her behavior.<sup>91</sup> Perhaps the same could be said for a man, that his family planning behavior is largely determined by his woman partner's attitudes and behavior. But in the practice of periodic abstinence the interaction is all important. If both she and her partner answer the question, "What does the word abstinence mean to me?" by letting the other get aroused to a point or letting oneself be aroused to a certain point including non-coital orgasm, then there is a basic disrespect for each other's fertility and a pregnancy may seem to be the only way to correct the problem, i.e., to teach each other to respect their mutual fertility. Marshall's study indicates that any degree of love-making, which I interpret as intentional genital arousal in this context, significantly increased the pregnancy failure rate.<sup>92</sup> The finding of Tolor, Rice and Lanctot that greater tolerance for diverse sexual patterns is related to failure with the method by pregnancy, provides further corroboration.<sup>93</sup> Whether intending genital arousal for oneself, one's partner, or for both, there is a demeaning of the relationship since the proper progression of genital activity is not intended, but rather frustrated. A pregnancy may then allow a couple to engage in normal coitus, or at least alleviate the supposed need for non-coital genital arousal. With unintended genital arousal which a couple may foresee and help each other avoid or dispel, on the contrary, there is a respect for each other's fertility and the potential baby who could be conceived at that time.

How the woman feels about the relationship can alter her cycle so that she may seem to be fertile all the time, a way of keeping distance between her and her partner. She may, on the contrary, feel so comfortable and creative in the relationship that her fertile period can be advanced. Dr. James Brown, the endocrinologist who has worked with the Billings in Melbourne for 15 years, reported two such cases of happily married women who very much wanted a baby and shortened their cycles and became pregnant.<sup>94</sup> How did this couple accomplish

this unprecedented feat? It would help to compare their relationship with others who are having difficulty conceiving. What reasons for getting pregnant were so productive for them? What ways of practicing abstinence were so beneficial? Surely these couples might want to share their good news with others who might benefit thereby. I suspect they would want to share together their good news with others rather than answer an anonymous questionnaire separately. In this way they and other successful pregnancy planners could put planning a child back into the notion of family planning.

After spending two million dollars in a major study on "Personality and Attitude Factors in Birth Planning" and noting that the results of other extensive "studies were scanty nor have more recent inquiries been conspicuously more successful," Prof. Harrison Gough whose study spawned 17 papers and 3 doctoral theses concludes: "What appears to be needed is vigorous pursuit of new possibilities, both instrumental and methodological."<sup>95</sup> Studying college students in 3 different countries as to their attitudes toward future children expected, he concluded that the attitudes were so complex and so dependent on external circumstances that no prediction was possible from attitudes.<sup>96</sup> As to future work on motivation in family planning, he feels it should take into account the interaction of the couple and the various social forces present at the time.<sup>97</sup>

The Fairfield Study<sup>98</sup> shows that couples who state they merely want to delay another pregnancy are more than three times as likely to become pregnant by mistake as those not wanting another baby. Could effectiveness therefore be related to the former couples not having sufficient reason to avoid pregnancy, which practically means an insufficient reason to abstain? Had the couples who did not want another child learned better than the spacers to truly abstain by not intending genital arousal?

If we are to look at how a couple abstains, if we are to find out whether various ways of practicing abstention make a difference in effectiveness and satisfaction, we need to evaluate the couple together. This way their relationship is respected and we can also study their decision-making process which helps them justify the use of periodic abstinence. Since children already born have a bearing in the coming of future children they need to be included also in the evaluation. For difficulties with abstinence and for all problems developing in a heterosexual relationship the treatment of choice is seeing the couple together.<sup>99</sup> Family interviews using direct questions and projective tests have already been used effectively for other purposes.<sup>100</sup> Such questions and tests can be modified to elicit responses relevant to family planning.

If periodic abstinence is the family planning method of the future, departing radically from established methods, so can research

approaches in motivation for periodic abstinence depart from modes which have not proven fruitful and thereby open new horizons among which will be an understanding of the meaning of sexuality and of how and why each new human being is created. A family-centered approach may indicate how a couple can truly abstain during the fertile time out of respect not only for the other children who may already be in the family but also for the child who might otherwise have been conceived at this supposedly inopportune time.<sup>101</sup> Thereby the family could take its long overdue and rightful place in the field of family planning. And a new generation conceived in a creative coital act will learn how to live as virgins from their parents who practice periodic abstinence by refraining from intending genital arousal. And their future marital commitment which young and old are increasingly finding intolerable will not be a license for lust, perversion, and imposition but a true expression of the gift of oneself for life.

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