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Population, Rhythm, Contraception and Abortion Policy Questions

André E. Hellegers, M.D.

The recent Supreme Court abortion decision has caused a great deal of anguish in Catholic circles as well as in some others. It is too soon to judge the effects, but it may be confidently predicted that attempts to amend the Constitution will be made. Since that is a long process, and since it is likely to be tried again and again if it does not succeed at first, it is clear that for several years there will be much public bitterness in the entire area of human reproduction. Yet while the abortion debate will rage in all its bitterness, we cannot avoid other issues in human reproduction. In fact this may be the very best of times to reflect on what should be done and to recognize that many things should have been done long ago. Our past negligence comes out all the more clearly and our future needs seem all the more obvious.

We must recognize first of all that the world is presently undergoing an unprecedented rate of population growth. In a sense it is a gigantic medical success story, overwhelmingly due to a massive international reduction in infant death rates. We used to bury the problem by burying our children. Now we save them and they become the parents of further children. The very rate of the success is the problem. Death rates of 10 per 1000 and less are now widespread in the developing countries, excluding parts of Africa. Obvious-

ly if birth rates continue at levels of 40 per 1000, typical of countries where family planning is not yet in vogue, growth rates of 30 per 1000 or three percent will, and do, occur. This yields a doubling of populations in less than 25 years. Common sense tells us that this cannot long continue.

It may be argued that this is of no concern to the United States — that recent figures clearly show we have our reproduction under control.

Two points are to be stressed in this regard. The first is that average family size in the late 1920's and 30's was no greater than today, yet it was followed by the baby boom of the 1950's. What we are seeing today may simply be a delay in the having of a first child



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and a delay in marriage, just as in the 1950's we suddenly decided to marry and reproduce earlier.

The devastating population expanding effect of early marriage, or rather childbearing, is schematically presented in Table I. Here in both families A and B, a boy and girl are aged 20 in the year 1900. They are to have four children each, as do all of their descendants. All die at age 70. The only difference between them is that family A has its children at age 20 (quadruplets in the first year for mathematical simplicity's sake! In family B they have the quadruplets at age 30). Nothing more devastatingly shows the dire effects of early reproduction with close packing of generations. Any tendency to delay childbearing, if it occurs fairly suddenly, will yield data on average family size for a given year which are deceptively low until the children are ultimately had. One present possibility is that we are turning from Type A into Type B families, without it necessarily meaning that we will only have the mythical 2.11 children suggested by advocates of zero population growth. First then, we should not be blinded to the real possibility of marked growth in U.S. population on the basis of the trend during this decade. We did grow from the 1920's to the 1950's and surely it was not because we knew less about family planning in the 1950's than in the 1920's that we had more children in the 1950's.

The second point is that there is no reason for complacency among

Catholics when family sizes of two are reached. We know from many surveys that this is produced overwhelmingly by methods other than rhythm.

We must therefore acknowledge that four facts are to be of concern to the Catholic community:

1. There is, on a world-wide basis, an unprecedented rate of population growth;

2. The United States may well go back to the growth rates of the 1950's;

3. If the United States or the rest of the world were present to reach a family size of two children, it would be in spite of the teachings of *Humanae Vitae*;

4. Early marriage and reproduction have a devastating effect on population growth, as they are also shown to be associated with markedly higher divorce rates.

It would be my suggestion that in the middle of the abortion acromony we try to do what we should have done long ago, cooperate with all others of goodwill to diminish the magnitude of the abortion and other problems. This is all the more important since 1974 has been proclaimed "Population Year" to dramatize the world population problem. It could easily degenerate into an abortion debate and mask very positive steps that could be taken by the Catholic community and its leaders.

Action Needed

We should constantly keep in mind some simple biological facts. Conception occurs from bringing sperm and ovum together. Rhythm aims at keeping sperm and ovum

TABLE I
EFFECT OF AGE AT REPRODUCTION

	1900	1910	1920	1930	1940	1950	1960	1970	1980	1990	2000
Family A R = 20 4 children	2 + 1x4 = 6	6 + 6x4 = 22	22 + 22x4 = 86	86 + 86x4 = 342	342 + 342x4 = 1336	1336 + 1336x4 = 5462	5462 + 5462x4 = 21848	21848 + 21848x4 = 87392	87392 + 87392x4 = 349568	349568 + 349568x4 = 1398272	1398272 + 1398272x4 = 5593024
		6	22	86	342	1336	5462	21848	87392	349568	1398272
							2 die	4 die	16 die	64 die	256 die
Family B R = 30 4 children	2 + 1x4 = 6	6 + 6x4 = 22	22 + 22x4 = 86	86 + 86x4 = 342	342 + 342x4 = 1336	1336 + 1336x4 = 5462	5462 + 5462x4 = 21848	21848 + 21848x4 = 87392	87392 + 87392x4 = 349568	349568 + 349568x4 = 1398272	1398272 + 1398272x4 = 5593024
		6	22	86	342	1336	5462	21848	87392	349568	1398272
							2 die	4 die	16 die	64 die	256 die

Note: 1) R = age at reproduction

2) All deaths occur at age 70

3) Those who have died are only subtracted in the last column

4) All parents in 1900 are 20 years old

apart without drugs or appliances while maximizing the possibilities of intercourse. "Artificial" contraceptives are aimed at interposing a barrier between sperm and ovum or destroying either.

In order to bring any of these processes fully under human control, we need basic research in reproductive biology. Put more clearly: Those interested in curing sterility, in enhancing fertility, in perfecting rhythm or in producing contraceptives or abortifacients require the selfsame fundamental

knowledge of sperm, ovum and menstrual physiology. I include the cure of sterility since the steril invariably will pay the price for perfect fertility control whether by perfect rhythm, perfect contraception or perfect abortion, since there will be no children to adopt.

This research in reproductive biology is immensely expensive. No private or religious foundation can support such work by itself. It requires major federal funding.

Table II shows national ex-

penditures for family planning services and research by the U.S. government (excluding foreign aid programs). It will be immediately apparent that the family planning services have markedly increased. In other countries these services would never have been listed in a budget related to the population problem. They would be included under health insurance schemes. It needs little imagination to add U.S. abortion costs to these figures and see that we annually spend very large and increasing sums on the rendering of services of which official Catholic teaching hardly approves.

Compare these costs with the expenditures in reproductive biology, here called "contraceptive development." These are the funds used to study sperm, ovum and menstrual physiology. It is from these funds that the solution to rhythm must come.

Compare these figures also with the items listed as behavioral science. Ill-named, these funds are supposed to finance the study of the entire nature of the population problem — its sociological, demographic, psychological and economic antecedents, processes and consequences. The population research centers, and the training of experts in the area, obviously show in their funding that we are more interested in doing things than in analyzing whether we are doing the right things or whether we ought to be doing additional or different things. Moreover training programs have recently been ended, and the study centers will

be phased out.

In brief, it is clear that if the Catholic community means what it says in opposing abortion and artificial contraception, and if it is at all honest in its interest in perfecting the rhythm system, it has been derelict in its duty. Annually appropriation hearings are held in the Congress. Innumerable lobbies plead their respective causes. Representatives of the Catholic hierarchy have pled their many causes without hesitation.

Yet to the best of my knowledge there has never been a move on the part of the official Catholic Church to demand an increase in expenditure of funds in reproductive biology until the problem of rhythm is solved. No Catholic bishop, to my knowledge, has asked for the funds to study the demographic factors and non-biological solutions to perceived population problems.

If today suction bottles, curettes and saline are decried in Catholic circles, we must accept our share of the blame for not having lobbied for the alternatives.

We shall also have to recognize that we have done very little to counter the trend to early marriage and reproduction with its high attendant population growth and divorce rates. We have done little to spearhead the admission of women to colleges and jobs which can be effective in delaying childbearing. Indeed we have tended to oppose those trends which could have helped to alleviate the problems we now face.

It may be argued that support-

**TABLE II
FEDERAL SUPPORT OF FAMILY PLANNING SERVICES AND
POPULATION RESEARCH**

(U. S. in Millions of Dollars)

Family Planning Services	1967	1968	1969	1970	1971	1972	(est.) 1973
1. OEO Family Planning Project Grants	4.1	8.5	13.8	22.0	23.2	24.0	15.0
2. DHEW Family Planning Project Grants	--	--	12.0	22.8	33.6	98.9	140.0
3. DHEW Comprehensive Maternity and Infant Care Projects	2.5	2.5	2.5	3.0	--	--	--
4. DHEW Maternal and Child Health Program	2.5	3.5	3.5	3.5	17.0	17.0	17.0
5. Other	2.2	1.5	2.5	4.0	6.5	8.7	10.6
TOTAL	11.3	16.0	34.3	55.3	80.3	148.6	182.6
Research							
1. Reproductive Biology and Contraceptive Development							U
Basic Research	4.7	5.6	4.8	7.3	7.8	12.5	N
Directed Research	--	--	1.4	3.9	3.8	4.2	S
Product Development	--	--	--	--	2.2	3.5	P
2. Testing Medical Effects of Available Methods	1.2	0.7	1.3	1.6	3.2	4.4	E
3. Behavioral Sciences	--	0.2	1.0	2.1	6.1	7.1	C
4. Manpower Development (training)	2.0	2.1	2.4	2.7	3.0	2.9	I
5. Population Research Centers	--	--	--	--	0.3	1.5	E
6. Federal Agency Staffing	0.2	0.3	0.3	0.7	0.8	0.7	D
TOTAL	8.1	8.9	11.2	18.3	27.2	36.8	36.8

ing research in reproductive biology may lead to birth control methods the Church opposes, including early abortifacients. But ultimately we shall have to show that responsible parenthood as we understand it is a viable alternative to what presently reigns. Whether the knowledge required can also be used in ways of which we do not approve should not, under the principle of the double effect, restrain us from pushing for the knowledge which can be used properly. We do not oppose atomic research because it may produce better bombs when we know it may solve the energy crisis.

Recommendations

I would make several recommendations which I believe long overdue:

1. That the official Catholic Church strongly lobby for increased expenditures in reproductive biology research. Presently the administration spends less than one-third of the funds recommended by one study committee after the other. The President's personaly stated repugnance of abortion should be an indicator of his willingness to concur in such expenditures. Certainly more human lives will annually be lost through abortion than through cancer and heart disease combined, yet these are the major areas of research expansion today.

2. That demographic research which is at the heart of the nature of population and reproduction problems be strongly supported by the official Church.

3. That the Vatican representatives at the official international conferences of the United Nations, during the 1974 Population Year, take the lead in advocating programs to delay age at marriage. In so doing, all those interested in lowering population growth rates, divorce rates and in improving the opportunities for the education and development of women's talents could make common front.

4. That Catholic leaders, hierarchical and private, encourage Catholic foundations to foster the establishment at Catholic universities of major research centers in problems of population, reproduction and the family. Major Catholic lay organizations like the Knights of Columbus and the National Catholic Council of Women and Men should have taken the lead in this years ago instead of just opposing abortion retrospectively.

5. That while Catholics may have serious differences with non-Catholics on other issues, they recognize, as has been shown by polls and referenda, that there are many other sectors of the American public who consider abortion a less than desirable, if not repugnant, procedure, and that they should make common front with these sectors without recrimination about lesser issues.

6. That the Supreme Court's decision should be viewed not just as a disaster, but as an opportunity to reflect upon our own deficiencies in the solution of problems which we have for too long avoided and must now take the lead in correcting.