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The Catholic Physician and Premarital Education

VERY REVEREND FRANCIS W. CARNEY

THE TOPIC of premarital education for young men and women is of almost universal interest in the United States today among those who are concerned with the present status of marriage and family life in our country. The adequate preparation of our present generation of youth for marriage is considered to be an indispensable aspect of all current programs directed to the improvement of marriage and family life. In this effort toward better premarital education, thoughtful people in family life work find the greatest hope for the future. Adequate preparation of men and women for marriage is, however, a labor demanding the assistance of many hands. It involves parents, educators, clergymen, physicians and the community at large through the services that others can provide in a greater or lesser degree.

Interest is being shown today by parents in regard to their obligation in the matter and many are preparing themselves to better undertake their responsibilities in preparing the young for marriage. Educators on all levels of formal schooling are deeply aware of the

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role they must assume and already indicate a responsiveness to the situation through the introduction of marriage and family life courses in the educational curriculum at various stages of formal education. Clergymen of all denominations are gravely concerned with the work of premarital education and are currently occupied with the development of better programs of guidance and instruction. Sociologists, psychologists and psychiatrists personally, and through community sponsored programs, are now making a very practical and worthy contribution.

In view of the intense interest in premarital education today, one might well ask, therefore, what physicians are currently doing in this matter? Again, more pertinently, what are Catholic physicians contributing to the growing effort of the Catholic Church to prepare the young for marriage? Or further, and even more to the point, what can Catholic physicians do to better assist youth to prepare for marriage and family life?

In the absence of definite statistics which could lead to more absolute conclusions, one might generalize that physicians as a whole have not been too concerned with premarital education in medi-

cal practice. One would have to admit, however, that many physicians have been interested and contributed immensely through personal service and in programs sponsored by others outside the medical profession. It would perhaps be quite reasonable to assert that the physician ordinarily proves quite cooperative in the matter of premarital education when his assistance is requested by a school, church or community agency, but takes less interest in the matter when it is a question of his own personal office practice.

One might generalize with a bit more surety in the case of Catholic physicians. With the Catholic Church being very seriously engaged in the work of premarital education here in the United States in the past decade, many Catholic physicians have evidenced interest in this phase of medical practice. There is also ample evidence that many Catholic physicians are doing much more than their predecessors in their own private practice, since most frequently requests are received from them for pertinent printed material on the subject.

It is to be expected in the future that all physicians will be called upon to take a more active part in premarital education both in private practice and in cooperative efforts. This is due to two factors. First, more and more young people will be seeing the physician in private practice as they realize he can contribute toward the making of a successful marriage. Second, the agencies of society directly concerned with programs of pre-

marital education consider the physician an essential person in every solid and effective program.

An article in the *Journal of the American Medical Association* November 1, 1958, by Paul Scholten, M.D., in view of the aforementioned developments, might profitably be read by Catholic physicians. The basic thought expressed is quite in conformity with the role of the Catholic physician in the matter of premarital education, though one might disagree with some specific recommendations of the author in view of the demands of a Catholic conscience.

Doctor Scholten indicates quite properly why premarital education should be a concern of the contemporary physician. The increase in divorce and marital unhappiness constitutes a social problem of some magnitude and the socially conscious physician must have an interest beyond commenting about these things. Marital difficulties frequently manifest themselves in physical and psychic disorders and thus enter into the province of the physician. Sexual problems do occur in marriage and the physician is the logical person with whom to discuss them prior to marriage. The physician in assisting in premarital education is practicing preventive medicine of a very important type. Finally, the physician is usually in a life situation where he is capable of a more personal approach than most others involved in the giving of premarital advice. These are all good and legitimate reasons and constitute adequate motives for the physician to interest himself in the

work of preparing the young for marriage.

Catholic physicians can be confronted, however, with additional motives. One cannot assume that our Catholic young people do not need the assistance which can be rendered by the physician. Our Catholic marriages are not immune to the difficulties and problems which are associated with marriage generally today. There is no conspicuous absence, for example, of sexual problems in Catholic marriages; Catholics cannot sublimate all marital discord. Catholics are not divinely endowed with a special gift of adequate sexual knowledge or blessed with a special facility for sexual adjustment. The Catholic physician can, therefore, assist those of the household of his own faith who are about to embrace the vocation of marriage toward a more successful life within it. Moreover, as Pope Pius XII has pointed out in his instruction, *Moral Problems Affecting Married Life*, of October 29, 1951, this is a definite phase of the lay apostolate of the Catholic physician. His words merit repetition and meditation for the Catholic doctor:

In the performance of your duties, oppose, as much as you can, the impetus of this refined hedonism which is empty of all spiritual worth and unworthy of Christian couples. Show how nature has given the instinctive desire for enjoyment and approves of it in lawful wedlock but not as an end in itself; that it is something that serves life. Banish from your minds the cult of pleasure and do your best to stop the diffusion of literature that thinks it a duty to describe in full detail the intimacy of conjugal life under the pretext of instructing, directing and reassuring. To calm the timid consciences of couples, common sense, natural in-

stinct, and a brief instruction on the clear and simple maxims of Christian morality are usually sufficient. If under special circumstances a girl who is engaged or a young wife needs further explanations on some particular point, you must instruct her with delicacy and in conformity with the natural law and the healthy conscience of a Christian.

This our teaching has nothing to do with Manicheism or Jansenism as some try to make out in justification of themselves. It is simply a defense of the honor of Christian marriage and of the personal dignity of husband and wife.

Doctor Scholten, in the article cited, indicates that the physician's instruction of those about to be married should follow a formal pattern and should be initiated on the occasion of the premarital examination, and, if necessary, be extended over other visits to his office. The physician's assistance should include a serologic test, general medical history of the man and woman, an evaluation of their sexual knowledge, a physical examination of both and a pelvic examination of the woman. He suggests that the physician's discussion with the couple to be married include the following topics: sex differences and attitudes in men and women; nature and frequency of intercourse with stress on gradualness of adjustment techniques of intercourse without too much emphasis on this point: the breaking of the hymen; privacy in personal functions; the procedure of personal hygiene and douching; pregnancy before marriage when it exists, and other personal items that contribute to the enrichment of the couple's knowledge of married life.

The Catholic physician surely ought to include in his premarital instruction the items recommended

by Doctor Scholten and should present them in some formal framework for his patient. His Catholic Faith, however, encourages him to go much beyond what has been previously recommended and give attention to the many specifics singled out by Pope Pius XII in his allocution on moral problems in married life. The Catholic additions to the content of premarital education as given by the Catholic physician ought to include the following definite ideas:

a. The natural and supernatural sacredness of marriage, that is, its Divine origin and its elevation by Christ to the status of a sacrament. This is the basic and fundamental Catholic conviction in the matter of marriage: it is an affair of God and not just a human relationship.

b. Marriage should be presented as a vocation, that is, one of the three states of life in which a person must attain sanctity and salvation. Marriage should be positively portrayed as a holy state of life, in which the married pair, with the assistance of God's grace, strives to attain eternal happiness. Marriage, it must be made clear, is not an end in itself, but merely a means to achieve eternal happiness.

c. Marriage, it should be explained, is child centered and not sex centered and the constructive and destructive aspects of sexual activity in marriage ought to be pointed out. Lust and chastity should be presented in terms of their impact upon general health and upon the marriage relationship itself.

d. Love in marriage should be discussed in the Christian context of self-sacrifice and self-surrender in terms of the total welfare of the other spouse. The giving of self in the marriage act and in total community living in the home must be depicted as a consequence of love that is mutual and physicians ought to resist restricting themselves to explanations that highlight only rights and duties of the partners. While it is true that marriage is a relationship of justice founded in a contract, it is much more than this in the Catholic perspective of charity or supernatural love.

e. The physical and moral aspects of birth regulation ought to be fully explained. The Catholic ideal is rational fertility, since the primary purpose of marriage embraces education of offspring as well as generation. The obligation to have children in marriage ought to be made definitely clear. The health and moral advantages of having them early should be explained. Respect for the great dignity of motherhood and fatherhood should be a positive characteristic of the Catholic physician's treatment of marriage and its many relationships. The physician is not a counselor of infertility, except where medical or other indications make it imperative. When instructing on the matter of periodic continence great tact must be exercised, therefore, to explain the method in all its technical aspects, as well as to indicate that serious reasons which right conscience approves are necessary for its use in marriage.

f. Couples ought to be impressed with the necessity of bringing their sexual problems into the area of discussion and to avoid suffering through their problems in silence. They might well be advised to seek counsel from a physician or priest in the more simple problems of adjustment and to even consult with a psychiatrist where his assistance is necessary.

g. The language of the Catholic physician ought to have a reserve, reverence and decorum that is indicative of his own moral virtue and of his personal respect for marriage as a sacred institution. Vulgar terms employed by the physician do not enrich his prestige or manliness in the eyes of the young; rather they detract from the idealism of the medical profession and indicate his own lack of good taste and modesty.

One might add to these basic contents of the premarital instruction many other items, depending upon the time factor and the physician's personal competency. Some Catholic physicians generously include the handling of miscarriage, emergency baptism, religious life in the home, the value of retreats for the married, Christian attitude toward money, the role of the Mass and the Eucharist and prayer in achieving marital success and holiness.

Participation in the premarital education of the youth of today for family life tomorrow is indeed a necessary and engaging phase of the lay apostolate for the contemporary Catholic physician. It allows for a very direct impact of

the Catholic physician upon his nation and the Mystical Body of Christ. The public relations value of premarital education given by the physician is quite likely to do much to restore the desired patient-physician relationship, which professional public relations organizations are trying so desperately to give back to the medical profession. The physician who is attentive to this aspect of present day medicine is quite likely to emerge in the eyes of the public as a socially conscious individual and accordingly, merit higher esteem. The Catholic physician devoted to this apostolate is likely to win the accolade of Catholics generally as a man vitally interested in his religion and possessed with a zeal for the welfare of his brothers in Christ.

The Catholic physician who undertakes in seriousness this labor of premarital education ought to recognize the necessity of preparing for it. The experience of his own marriage does not automatically equip him for this function and may even handicap him. His experience with others can be of assistance, if it is not restricted to what he has learned from unhappy marriages. His pre-medical and medical education have contributed very little to the full understanding of Catholic marriage though it may be rich in biological and psychological information. It would appear, therefore, that the contemporary Catholic physician must undertake a program of personal or group study to effectively discharge his role in premarital education and fortunately today

this can be done with relatively little effort on the part of the physician. Our Catholic libraries provide an abundance of material relative to marriage in all its aspects and Catholic agencies throughout the country are willing to work with physicians to give them additional competence.

It might well be that, in the

very near future, this could become a very practical project for every Catholic Physicians' Guild in the United States, namely, to assist and form in the spirit of the lay apostolate Catholic physicians to assume their responsibility in preparing the young Catholic men and women of our country for marriage.

OFFICE RULES 100 YEARS AGO

■ THE FOLLOWING EMPLOYEE office rules actually existed in some business offices throughout the country approximately 100 years ago.

1. Office employes will daily sweep the floors, dust the furniture, shelves and showcases.
2. Each day fill lamps, clean chimneys and trim wicks. Wash the windows once a week.
3. Each clerk will bring in a bucket of water and scuttle of coal for the day's business.
4. Make your pens carefully. You may whittle nibs to your individual taste.
5. The office will be open at 7 a.m. and close at 8 p.m. daily, except on the Sabbath, on which day it will remain closed.
6. Men employes will be given an evening off each week for courting purposes, or two evenings a week if they go regularly to church.
7. Every employe should lay aside from each pay a goodly sum of his earnings for his benefits during his declining years, so that he will not become a burden upon the charity of his betters.
8. Any employe who smokes Spanish cigars, uses liquor in any form, gets shaved at a barber shop, or frequents pool or public halls, will give good reason to suspect his worth, intentions, integrity and honesty.
9. The employe who has performed his labors faithfully and without faults for a period of five years of service and who has been thrifty and attentive to his religious duties and is looked upon by his fellowmen as a substantial and lawabiding citizen, will be given an increase of five cents per day in his pay, providing a just return in profits from the business permits it.

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