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# NATURAL FAMILY PLANNING

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## Psychological Aspects of Natural Family Planning

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Ronald Conway

**T**HERE ARE two ways in which human beings entering into mating are distinctive with respect to the rest of creation. First, instinct in humans is so subordinated to psychological and social factors that it does not form the sorts of seasonal appetites for sexual union that occur among other mammals. The second difference, which is connected with the first, is that man is the only creature that puts *value* upon his sexuality.

It is precisely because this value—whether it be Christian, humanistic, or merely pagan—is placed upon sexual activity that the whole network of impulses and beliefs about the expression of sexuality has grown up. Some of them are valid; others have little biological foundation. Studies by the Kinsey Institute, Masters and Johnson, and several others have shown us that many of the sexual needs and drives that we imagined were innate have turned out to be conditioned or learned. One of the most striking examples of this older view, which, surprisingly, still crops up even in some current family-planning literature, is the notion that the sex drive of the male is *innately* stronger than that of the female. I think we now know with reasonable certainty that the differences between the sexes regarding the appetite for sexual expression is largely a matter of expected cultural role-playing. In fact, the female physical *capacity* for coitus is considerably greater than that of the male.

Not only sexual drives but the felt need for their expression come from a subtle interplay of psychological conditioning, personal fantasy life, and physical provocation. This insight gives us considerable hope for teaching

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new and balanced forms of sexual expression to the coming generation, forms that not only will be consistent with Christian teaching but will assign an *equal* responsibility to the sexes in decision-making about sexual expression and family planning.

Literature about the psychological aspects of family planning, particularly in regard to the alleged stresses caused by sexual abstinence during the fertile phase, is quite scanty. Positive literature on psychological aspects is only just beginning to appear, and I fear that a lot of early references to the psychological attitudes or difficulties experienced by couples had a slightly sanctimonious, admonishing air that was anything but helpful. More recently there has arisen the opposite danger of being unduly rapturous about the alleged spiritual and psychological benefits of periodic abstinence, which certainly do not accrue to every couple. Ideally, each case should be studied by advisers situationally in order to draw the best out of NFP methods. That should discourage an almost mystical approach that skates over the whole psychological area by assuring couples that if they do *x*, *y*, and *z* and pray hard, all cannot be other than well. I shall try to steer a middle course between the extremes of rapture and censure and to look at people as they really are rather than deal with some notion of what they ideally should be.

As Paul Gross has pointed out, we know as yet so little about the complex effects of life events and life stress upon the health and welfare of the individual couple. This observation also applies to the effects of such stress, whether these be real or imagined, on their fertility. Gross questions whether the importance of *communication* between the couple has not been totally underestimated in all previous research into family planning. Also, Arthur and Connie Johnson of Toronto point out that the observations of temperature and mucus basic to the various methods are not methods *in themselves*:

Both are tools. They are mirrors reflecting the state of the fertility of the woman. The real method is periodic abstinence as guided by the available information. When people say that the method is not acceptable to a great number of people or that couples need to be specially motivated to follow this method with success, they mean that *periodic abstinence* is not acceptable.

One hardly needs to be much more motivated to observe mucus symptoms or take morning temperatures a few days per cycle than to use any other method of avoiding conception. I would support this statement by pointing out that those who claim that artificial methods make for a less obsessive and more relaxed attitude to family planning do so by conviction rather than by proof.

Obsession arises from *attitudes*, not merely from *practices*. To illustrate the point: Two large U.S. surveys recently inquiring into reasons for premarital pregnancy, particularly among teenage girls, showed that the reason outweighing all other reasons for unintended pregnancies was that any



method, including the taking of a pill or the use of a condom, was "unromantic"! If ever there has been a striking example of a purely socially conditioned attitude toward the uses of sexuality vis-a-vis procreation, then surely it is this. In the course of a couple of hundred years we have gone from the notion of marriage as primarily a sober union calculated to provide for the transfer of life, property, and mores to the notion of a marriage whose value depends on whether it caters to a kind of post-Hollywood romantic swoon.

It is inevitable that some of this pervasive attitude, even among Catholics, carries over from the courtship into the marriage itself. Growing up as they do in a society that conveys the new notion that conjugal sexuality always ought to have an unrestrained, unregulated, and ecstatic character, Catholic couples following NFP methods have to withstand social pressures of a type that would never have been dreamed of by their immediate forefathers. Such pressures toward the abandonment of restraint turn out to be far more obsessive in effect than any of the careful observations required of followers of the natural methods.

Here we have an obsession that insists that marriage and conjugal love must supply and gratify every conceivable facet of human desire. It must be not only a means of effectively transmitting life but an experience continually lively and stimulating; it must be economically satisfying and viable; it must not have any portion of staleness or ordinariness, or even natural moments of conflict. It must provide a whole array of human intimacies that our forefathers spread far more widely over a network of friendships that the modern nuclear-family home has largely ceased to foster. The strain on any modern couple attempting to live up to all these incredible requirements is enormous. It is little wonder that the mere notion of abstinence during the woman's fertile phase, or of systematic fertility-related observations, becomes regarded as a tiresome additional burden. Hence, the couple do not attribute this sense of discomfort and sacrifice to an overcomprehensive expectation of marriage. Rather, it is easier to complain of the effort of abstinence and the alleged stresses it imposes on both parties.

What I am saying is that the modern social context in which contemporary marriage is placed must be studied and weighed by family-planning instructors before they take even their first step in working on a program for a couple. Fairly clear, open-minded, and generous discussion as to what can and cannot really be expected from marriage in a modern developed society is a necessary preamble to any NFP counseling. The freedom supposedly enjoyed by couples using artificial methods must be shown to be in part illusory or to be so much less significant than the many other stresses the married couple have to endure throughout the child-bearing years that it is hurtful to give it undue weight in one's imagination and longings. I am not



saying this in a negative sense but merely showing that it is essential that married couples using natural methods consider the checks and balances operative in their entire married life before committing themselves to family planning. A tense, chaotic domestic situation is no fit setting for periodic abstinence.

So it is that to teach NFP methods without reference to the attitudes the couple hold about their own marriage is to accomplish only half of the task. An American authority, Dr. George E. Maloof, has pointed out that the NFP movement must pay increasing attention to young children's developing attitudes toward sexuality. That is true enough; but I do not agree with what Maloof has to say in many instances, because I feel his position and style are a little too fervid. He spends too much time on the ill effects of a libertarian style of conjugal and sexual example set by some parents when he might devote equal attention to a rather joylessly restrictive attitude transmitted by others.

Maloof remarks, "Parents preoccupied with their own genital pleasure may miss the opportunity to provide true sex education to their children, who then take to the schools or streets to learn by doing." However, it is not these hedonistic parents who are the likely clients for NFP. Parents who by their stiff, embarrassed attitudes and demeanor present an essentially asexual image to their children—with the father, in particular, projected as no more than a vocational functionary who presides over the home—can do just as much harm to the sexual response of growing children, harm that can bear fruit in sexual disorder in the teenage years. Such parents wrongly equate restraint with restriction. They harbor a covert suspicion that the capacity for full sexual pleasure somehow threatens the capacity for abstinence. This attitude in time can only have an increasingly adverse effect upon the personalities of the parents that is transferred by "atmosphere" to the identification and reaction patterns of the growing children.

At times Maloof goes into the realm of what one might even term biological mysticism. He remarks, "How the spiritual dynamics influence those practicing and teaching natural family planning may be best illustrated by the prominence of sacrifice previously derived from the biological phenomena of the natural death of the germ cells required to form a new life." Here there is a confusion that I find quite peculiar between the choice of whole persons and predetermined cellular processes. In what way can germ cells be said to practice "sacrifice"? I think this sort of literature is unhelpful for teachers and counselors.

There are not many large-study samples selected to examine psychological difficulties. However, in 1970 and 1972, Marshall and Rowe reported that in a survey with a 94 percent response from 502 highly motivated British

couples using NFP methods, 41 percent expressed some anxiety over possible pregnancy. Of this 41 percent, 27 percent of the men and 38 percent of the women believed that this anxiety had a negative effect on intercourse, and half of the couples found abstinence difficult "at times" while 31 percent found it difficult "frequently." This stress was reflected in a higher failure rate for couples in which the husband experienced great difficulty (17 percent) than for couples in which the husband rarely found abstinence difficult (8 percent).

A report by Tolor, Rice, and Lanctot presented in 1973 to the American Psychological Association assessed the psychological characteristics of 92 American couples using the BBT method for an average of 4 years, 9 months. No detrimental effects on these couples' sexual satisfaction and marital happiness were noted, but couples who were more conservative sexually were certainly more comfortable using the method than those who were more liberal. Unfortunately, I do not know on what criteria the designations "conservative" and "liberal" were based. However, the report confirmed Marshall's findings that significantly more men than women claimed to find sexual abstinence "relatively difficult."

Such few studies as we have seem to show that speculations about males' finding things more difficult were based on a masculine "direct discharge" orientation toward sexual satisfaction. This orientation, I suggest, has a very flimsy basis in biological causes when we take the recent findings of Masters and Johnson and the Kinsey Institute into consideration. That men are *naturally* more impetuous and less able to practice sexual restraint is a notion that dies very hard—not surprisingly, since it has been with us since biblical times. Coping with erroneous male fantasies and beliefs is not the least of our tasks.

I propose now to get down to cases, as it were, dealing first of all with partners as separate persons and discussing certain types of male and female partners who might reasonably be expected to have difficulty with abstinence, with some indication as to the reasons for this difficulty.

#### Men Experiencing Difficulty

I have referred briefly to the effect of social conditioning in transmitting the belief that men are more needful of sexual satisfaction than their partners and hence are entitled to become more distressed when they do not receive it. At the personal level I would say that the men who have the most difficulty are those in whom a rich emotional life is either missing or deficient. This comment has particular application to Australian men, whom I have long considered to be more affectively restricted as a national group than either their English or their American counterparts.

Tender affection and the raw expression of sexuality can be considered



two linked sides of a scale kept in balance. The greater the impoverishment of emotion, the more the reliance upon raw sexuality or physical discharge to remedy the deficiency. Put simply, men lacking in the capacity to both give and receive tenderness tend to feel that they need more, rather than less, sexual outlet. They are quite unaware that their inhibitions about other forms of tactile contact, inhibitions about overt expressions or gestures of warm affection toward members of *both* sexes, are likely to be at the back of their immoderate hunger for sexual release on demand.

Boys in whom gestures of affection toward parents, siblings, and peers tend to be throttled off after puberty tend to become those men for whom sexual continence is most difficult. Their mode of approach to life consists of two polarities, the intellectual and the physical, with the middle emotional aspect usually missing or stunted. It is not astonishing that such men tend to emphasize those parts of sexual love that are directed toward orgasm as against a loving or even playful exploration of their own and their wife's reactions. From puberty onward they always seem to be engaged in some kind of competitive contest, if not with others then with their own expectations of themselves. The pleasure of the present moment can never be savored for itself. Their eyes are always fixed tensely upon one goal or another.

This anxious, goal-directed behavior is in fact what is classically at the root of many problems of premature ejaculation or periodic impotence in the male. Orgasm becomes a kind of obsessively defined point of arrival on which most anxieties are focused. Husbands who feel this way cannot prolong love-making and give full satisfaction to their wives. Thus do many men who seem otherwise to be functioning normally feel pressured toward intercourse in season and out, regardless of any consideration of the wife's fertile phase.

Then we come to the male who is basically insecure about his masculine identity. There are very many such young men in our society. They have suffered relatively poor identification with their fathers and have found it very difficult to assert the characteristics regarded by their peers as masculine against the well-meaning but pervasive influence of their mothers. As a result, sex becomes a means of overcompensating for other deficiencies in the sense of being manly. Any check or constraint upon sexual drive or sexual expression is seen as intolerable, because the regular and almost obsessive pursuit of orgasm is in fact the disguised pursuit of social and domestic manliness. Their actual goal must be tactfully exposed to men before they can see that their appetites are partly triggered by factors other than physical—by sex as an "ego trip" rather than an act of love.

As far as I am able to determine, there is no necessary relationship be-



tween a man's attitude to periodic abstinence and the *amount* of sexual experience he had before or immediately after marriage. The prenuptially virginal man is probably no better or worse off in terms of his capacity for abstinence than the man who had frequent experience of intercourse before marriage. Licit coitus could become an obsessional goal to men who had never had it, whereas a man who has had intercourse before marriage—as distinct from having been promiscuous—is not necessarily likely to regard periodic abstinence as difficult. Indeed, what information we have about the premarital years suggests that long periods of abstinence are still not uncommon among young males with no particular religious scruples about random sexual intercourse. Lack of readily available females, fear of venereal disease, natural fastidiousness in choice of sex partners—these are only a few of the variables involved. Before marriage most normal men do not invariably seek sexual intercourse upon the basis of real or imagined need: they are drawn to it more by opportunity, excitation, or peer-group propaganda.

The question of quick arousal of a man's sexual desire by his wife cannot be considered apart from the image a man has of himself and his needs. If a man perceives himself as aggressive and virile in a stereotyped way, he will be more readily excited by random sexual opportunity or provocation than a man with a more diversified and complex view of his own personality. Thus, men who fear passivity in love-making, who think they must always play the dominant role, are more likely to feel the need to constantly assert their sexuality and to feel some tension or resentment about abstinence. Such men still believe that a man is entitled to his "conjugal rights," a view with undertones of the old understanding of a wife as chattel who was expected to subordinate all her needs and desires to those of her husband. Society probably gained as many very large families from this attitude of the husband as it did from the wife's joyous and loving desire to have many children. Indeed, even today I hear from some Catholic males, who ought to know better, the joking comment that women are better off regularly pregnant than bothering their heads about social issues and functions—some splendid ammunition for Women's Lib! As an attitude conspicuously lacking in respect and loaded heavily on the side of male self-righteousness, it needs vigorous challenge.

Nowadays we more often encounter the passive voluptuous young male. He is often gentle, shy, unassuming, and prone to seek out a wife who is seemingly strong and confident with well-developed maternal attitudes. After marriage he proves sensitive and affectionate but most anxious that his wife constantly show her love for him. He stands at the opposite polarity from the husband with the cold, discharge-oriented attitude to love-making, but



he, too, finds the fertile phase difficult. He experiences it almost as a rejection by his wife, and it is he, rather than she, who is the provocative partner in the union. It is harder to get him to use love-making techniques that fall short of coitus, because he tends to slide from making love to seeking orgasm as much from helplessness as from desire. His wish for closeness and penetration seems to override everything else. He is indeed something of a mollusc in this respect. Behind the much-besieged wife in his personal history stands the mother whose attitudes of unconditional love he still seeks in his spouse.

Such a husband has many virtues, but his lack of conjugal self-control usually accompanies an insufficient social involvement. He has few real friends or interests outside sport and his domestic life. I might also say that the sexual orientation of some young males of this type is ambiguous. Their unreasonable demands for marital sex may conceal a homosexual element that they are obliged to deny by having frequent coitus.

#### Women Experiencing Difficulty

Despite the recent revelations of women's magazines and sex researchers, most *wives* are not yet disposed to consider themselves as much in need of coitus as their husbands. It is they, after all, who have to handle the main responsibility for pregnancy and who pay the higher price for not abstaining during the fertile period. The husband must bear the secondary consequence of unexpected pregnancy, but the wife must bear the child itself. This consideration alone acts as a check to the uninhibited expression of libido in many women. That is why Masters and Johnson have pointed to the greater interest in sexual activity shown by many middle-class women who have passed through their child-bearing years, ironically at a time when their husbands, often socially overtaxed, are on the wane with regard to coital interest and capacity.

There is, of course, a striking exception—what is often called the “pumpkin eater” syndrome. I refer to a dwindling but appreciable minority of wives who pay verbal homage to abstinence but seductively invite impregnation because they feel complete or secure as persons only when conceiving or carrying babies.

Such women were more common in previous generations, when husbands often were less alert than today's younger husbands to the necessity to be physically tender, considerate, and lovable. Denied the fullness of conjugal love, wives often sought consolation in a steadfast craving for child-bearing. The “pumpkin eater” syndrome still appears from time to time, its origin more likely to be traceable to an unhappy relationship between the wife's parents. More particularly, it stems from mothers who exalted their maternal functions over their wifely roles.

Quite apart from these compulsive pregnancies, there is the lonely wife

who sees her husband so seldom or fears to lose him so much that she is obliged to use regular pregnancy as a way of binding or compelling him to responsibilities he would not otherwise accept. Many ordinary working women in lower-income groups suffer from this sort of conjugal loneliness. Numerous children are not only an unwise answer to the evident lopsidedness of such a marriage but also an inadequate substitute for conjugal sharing and support. What a wife gains in mechanical fidelity she loses in terms of children born from the wrong motivation.

At the other end of the spectrum we have the young wife who avoids or dislikes displeasing her husband for fear of compromising his love for her. She may desire and need to observe restraint during the fertile period, whereas her husband keeps smoozing about for loving gestures, caresses, titillation, and full-body contact, which can lead—because he allegedly cannot help himself—to coitus and ejaculation. Such a wife is in a genuine dilemma, because her husband often *intends* well but lacks sufficient self-appraisal to come to terms with the nature of his own unconscious intentions. If she repulses him she risks affronting him as well. Thus, NFP turns into a kind of roulette dependent on the decidedly chancy possibility of the husband's playing *his* full part in the control of love-play.

As an American marriage counselor, Jack Quesnell, points out, some NFP counselors lean too much to the view that talking to wives about abstinence is more profitable than talking to husbands. Rightly he rejects it as the old notion of the brave little wife's somehow trying to contain her husband's libido when he should be doing his own part. Quesnell's article in the 1979 *Natural Family Planning Reader* is a most helpful piece for counselors, who must recognize and deal with couples who have a tremendous intensity of desire to succeed in family planning—a desire that often becomes self-defeating simply because it *is* so intense.

One more problem plaguing the wife is an insecurity of the more personal kind. She fears that abstinence during the fertile period will somehow make her less desirable to her husband. She fears that because of his merely dutiful cooperation he may tire of her and become attracted to other women—in fantasy if not in fact. This episodic type of incipient mental infidelity is common in men, and sensitive wives, not especially confident of their erotic assets, are quick to detect its presence and give it more weight than it properly merits. The result is a questioning, tense kind of relationship that offends the husband. His reactions then become doubly upsetting to the wife. The resulting vicious circle can be very damaging to the relationship.

#### Mutual Aspects

There are, of course, many problems peculiar to the *interaction* of the couple and not primarily due to their separate personalities. To cite one



difficult example, many men suffer from the problem of premature ejaculation, which, it is alleged, a period of abstinence aggravates. The wife responds with mingled feelings of guilt and resentment that eventually outweigh her initial sympathy. In such a situation she rarely achieves orgasm herself and does not know whether that is due to reserving intercourse for the infertile phase or to her husband's inadequacy. Such couples usually require reassurance that periodic abstinence *may* indeed aggravate problems that could be eased by the availability of coitus at any time. But such problems are not *caused* by abstinence but by the antecedent problems in the husband to which the wife may be responding in the wrong way. The treatment is to eliminate the anxious focusing on intercourse and to concentrate on prolonging other forms of love-play. In many cases the man may need help in his own right.

Other interaction problems, covered well by Quesnell, are:

1. Overestimation of the power of the sex drive leads couples to wear themselves out in substitute pursuits instead of relaxing together enjoyably.

2. Some couples try to gear all activities to the fertile period—so that everything can be “got out of the way” when the infertile period arrives. Then its pleasure, because of overanticipation, turns out to be less than expected. A couple who arrive spick, span, and breathless from everything but rebuilding their whole house are not likely to be very relaxed or spontaneous in their love-making.

3. Then, of course, we have the very common case of the couple who practice abstinence on sufferance. They will give rationalizations such as, “We don't want to be bad Catholics, but we are not happy about the restrictions,” or, “It's better than the Pill, which could cause complications, anyway.” Here the positive approach is lacking, and the couple adopt the miserable air of a pair of weight-watchers who loathe dieting but don't want to be fat. Instead of concentrating on the many other tactile and physical pleasures they can enjoy together, they mourn persistently for what they have grudgingly denied themselves.

4. Not uncommon are the couple who avoid each other during the fertile phase as if one of them had the measles. Again, there is such an overvaluation of the power of the sex drive that it is not astonishing that the “forbidden fruit” syndrome comes into fullest play. In such cases the lack of physical tenderness or intimacy only aggravates the craving for intercourse. To use the weight-watchers' analogy again, it is as if the overweight person, being denied sugars and fats, thinks he must avoid chicken, crayfish, and vegetables as well. The parties persuade themselves that they each have a “short fuse” that they should keep constantly damp. There are, of course, cases where one partner—usually the husband—is so convinced of his passion that the fuse indeed does become shorter by fact of sheer auto-suggestion.



Many of the problems in family planning can be reduced at the outset by sound premarital sex education, particularly in relation to the psychological aspects of sexuality, which are not always treated as fully as they should be. Getting rid of fallacies is the first step. Let me list a few typical fallacies that need to be disposed of during the engagement period at the latest and preferably during the teenage years.

1. That the male's sex drive is *innately* stronger than the female's. I have already discussed this fallacy.
2. That the wife acquires a certain health by virtue of frequent intercourse because of the invigorating nature of male sperm. Semen is not a vehicle for hormones, nor does it contain vitamins! The known fact is that celibate women on the average live longer and enjoy better health than their married sisters. (If occasionally they become cranky it has little or nothing to do with raw sexual deprivation as such!)
3. That the man is more impetuous when making love and cannot restrain himself. There is some truth in this statement. The male, once aroused, does appear to have a shorter time of self-constraint before ejaculation. But we must be clear as to what sort of arousal we are talking about. I know many men who receive the keenest tactile, sensual pleasure from their wives but have so schooled themselves as not to get a full erection. It is the short period between full penile tumescence and orgasm that offers the most strain and risk for the male. Otherwise he is capable of just as much restraint as the female.
4. That periods of abstinence are "unnatural," causing everything from nervous tension to high blood pressure. (All I can say to the gentlemen, in particular, is that if they have a diastolic blood pressure in excess of 120 they might be wise to embrace only abstinence until it comes down.)

Many married couples abstain for long periods for a variety of reasons: poor health, preoccupation with some demanding external commitment, and so on. The *mental* accommodation to abstinence in such cases is rarely difficult, and whenever there is mental accommodation the gonads accommodate themselves also. There is no sexual drive without initial triggering in the brain centers. Even the formation of hormonal secretions is a result of a presiding mental stimulus. Hence, couples have to be tactfully guided away from a purely penile and ovarian concept of sexuality. All human sex has its stimulus from the mind. If the mind is content, so usually is the reproductive system. It is well known from surveys that couples with intellectual and social interests have coitus less frequently than less well-endowed couples with few of these outlets. Counselors should take note of this fact and realize that there are intellectual and socioeconomic differences that bear upon what is undertaken during the fertile period. Ordinary working people sometimes need more resourceful, extended counseling than those



with cultural advantages.

Finally, there is abundant proof that frequency of coitus has no relationship to the success of a marriage. Even back in the thirties, Pearl found that couples on the point of divorce had intercourse more frequently than those who reported contented marriages. Again we return to the view endorsed by sex and marriage counselors of many different ideological persuasions—that it is the *quality* rather than the quantity and type of sexual activity that really counts and really satisfies. For example, I have encountered many men who have a neurotic incapacity to abandon themselves emotionally to coitus. The experience seems to stop short of full consummation and satisfaction. Their orgasm is mechanically efficient but emotionally unfulfilling. Hence they feel obliged, both physically and psychologically, to keep trying. They rarely look to psychological factors for the cause but forge ahead physically, seeking an unattainable gratification and accordingly ignoring the significance of the fertile phase. They do not realize that the best coitus is not always the most frequent coitus.

What can I recommend to teachers and counselors to help them understand the psychological aspects of NFP? Let me sum up by listing a few suggestions:

1. Adequate examination of or preparation for the whole marriage in all its facets should precede the teaching of methods. Methods may fail when sex is used as a regular anodyne to relieve stresses that come from work, social life, family ties, or physical tension. Family planning arises from overall marital planning and commitment—not a rigid, obsessive timetable of activities but the couple's deliberate provision of a right balance between work and recreation. That leaves them plenty of time for love, but not so much time that they start being fidgety about what they have contracted to give up.

2. Help each party see that marriage as a relationship is not the basket into which *all* emotional eggs must be placed. A good marriage that stays fresh emotionally and sexually is a marriage warmly embedded in *other* friendships. A couple who have both mutual and separate friends will feel less dependent upon each other as the sole source of satisfaction. The "monastic" marriage not only is out of step with the greater emphasis on community in the modern Church but is one in which periods of abstinence are apt to be most difficult.

3. Help the couple realize that there is no peril in close contact—in kissing, cuddling, caressing—unless their own belief in such peril sends stimulating signals to the bodily organism. Avoidance of and anxiety about contact not only increase short-term frustration but carry a very real risk that a natural sexual life between the couple will fade away altogether by the time they have reached middle age. This is what I call the "traffic light" attitude to



sexuality—all stop or all go and no caution. Couples must be encouraged to have confidence that they have the power to succeed with periodic abstinence—that the goal is not only achievable but rewarding.

4. Try as far as possible to expose couples to NFP counselors of both sexes. That cuts down a tendency toward gender chauvinism and exposes both wife and husband to the same point of view mediated through two quite different personalities.

5. This suggestion may be obvious enough: Avoid preaching in “Holy Joe” terms to Catholic couples. Most of them are seeking instruction because they believe in the Church’s teachings. It is only the doubtful or resentful ones who need full spiritual counseling on the matter. Always endeavor to be practical, gentle, and, if possible, humorous. Sex is both pleasurable and funny as well as conjugally sacred. A couple who can laugh over their botched moments are more likely to be at ease with abstinence.

6. With teenagers it is necessary to spend a lot of time discussing the *rewards* of *restraint*, not only in sexual matters but in many other areas as well. The building of character and identity is a point of great interest to the intelligent young. If they can view restraint as promoting character and personal charisma amid the usual supine peer-group yea-saying, then the ground for demonstrating the particular merits of sexual restraint in marriage is already laid. We must avoid the contemporary danger of speaking about sexuality in isolation from other youthful concerns. If we sound or look obsessed, teenagers are likely to become obsessed, too, or else decide that what is being proposed is just too forbidding to accept. For example, how can one logically defend restraint in sexuality without emphasizing restraint in, say, driving a car or drinking beer? (Incidentally, too much alcohol and sexual restraint don’t mix, and the young need to learn this lesson very early.)

7. Finally, in using the Holy Family as an ideal, show it as a model of happiness and love that we might aspire to. Otherwise avoid the analogy. The Blessed Virgin was both morally immaculate and innocent of sexual experience at the time of conceiving the Christ Jesus. Our Lord was a celibate in the grandest imaginable way. To attempt to present the Holy Family, therefore, in psychosexual terms is incongruous, serving neither the Christian couple nor the Holy Family. What I think we need to emphasize more is Christ’s enormous compassion and love toward all people who want to find noble and tender ways of expressing their sexuality. His closest female friend after Martha and Mary of Bethany was a former prostitute, and he dined more happily with confessed sinners than with Pharisees. The couple embracing family planning therefore enter into a contract more of caring love than of sacrifice. They are not coerced but invited to test for themselves the rewards and blessings of a sexual life that is rendered the more precious for being savored discriminately and carefully, as something too valuable to



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squander in the service of anything less than mutual love and respect, to say nothing of responsible parenthood.

One parting word of final reminder: *Attitudes* to family planning are the most important part of teaching natural methods. The extremes of either a half-hearted or a "triumphal" approach cannot promote the attitudes we need.