Toward the Development of Roman Catholic Teaching About Contraception in Light of the Experience of South Korean Catholic Women

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In recent decades, the morality of artificial contraception has been hotly debated in the Roman Catholic Church. Many theologians and ethicists have challenged the hierarchical church teachings in the last fifty years. The opening chapter of the dissertation reviews Catholic Church teachings on birth control throughout history, and in Chapter Two I explore the theo-ethical reflections on artificial contraception from two different approaches (traditionalist and revisionist) and support the revisionists’ perspectives, findings, and arguments. Then, in order to lay the context for my interpretations of my ethnographic interviews with ten participants, in Chapter Three I explore South Korean sexual culture and heterosexual, married South Korean Catholic lay people’s sexuality in particular. In Chapter Four I present ten personal stories from South Korean Catholic heterosexual married women drawn from my ethnographic interviews.

In Conclusion I argue that the Church’s condemnation of artificial contraception is impractical, morally irresponsible and pastorally hurtful, and argue that the theological and ethical perspectives of the revisionists are stronger and more adequate as guides for Catholic sexual ethical teaching precisely because the revisionists take seriously the lived experiences and particular challenges that Catholic married lay people face today. Accordingly, I suggest that the Roman Catholic Church teaching on contraception should be reshaped in conversation with the lived experiences of South Korean heterosexual
Catholic married lay people as well as the Catholic laity in other societies across the globe many of whom report similar experiences, struggles, and needs.
INTRODUCTION

The Roman Catholic Church is a global community whose membership numbers roughly one billion people. Throughout history, it has played a prominent role as a religious and moral institution in many, diverse societies, cultures, and nations. Given this reality, its theological and moral reasoning should be deeply enriched by attending carefully to the lived experiences and deep challenges faced by its diverse membership around the globe.

This dissertation focuses on Catholic moral teaching about human sexuality and contraception, and seeks to examine important theological and ethical issues and debates in light of the concrete marital challenges that Catholic couples face in South Korea. I aim to show my theological and ethical agreement with a wide number of Catholic theologians and ethicists who have articulated strong critiques of the reasoning behind the magisterium’s continuing condemnation of artificial birth control.

In this dissertation, I argue that Catholic sexual ethics must engage deeply the experiences and circumstances of Catholic lay people in their lived marital and familial relationships. In addition, I join many Catholic theologians and ethicists who argue that the Roman Catholic magisterium’s teachings on contraception as well as the more traditionalist theologians’ arguments who support those teachings simply do not sufficiently engage human experience, especially the lived experiences of heterosexual
married Catholic lay people. In this project, I believe that I help illuminate some of the real harm caused by the Church’s continued condemnation of contraception.

Specifically, I put the history of official Catholic teaching and Catholic revisionist’s perspectives on contraception into conversation with the experiences of select heterosexual, married, South Korean Catholic lay women by conducting qualitative interviews with ten such women. I do this in order to show that the current official Church teaching on contraception does not respond to my ten interviewees’ struggles and needs. Therefore, I argue that Catholic sexual ethics, and in particular the teaching on birth control, needs to take seriously the struggles and needs of lay people. Further, I argue that the Church teaching on contraception should be reconsidered and reshaped in order to give a concrete and practical ethical teaching to South Korean Catholic heterosexual married women including my participants. While I focus on the experiences of South Korean Catholic women, I believe their experiences and challenges may resonate with those of Catholic women in other societies across the globe.

In regard to this specific study of South Korea, I draw on quantitative studies of South Korean heterosexual Catholic married couples in order to help provide a frame of general data that will help enrich my interpretation and understanding of my ethnographic interviews of ten South Korean Catholic heterosexual married women. In my project, I explore in some detail both through qualitative interviews and by analysis of quantitative survey data the experiences of South Korean Catholic heterosexual married women to show their struggles, challenges, needs and often failures in trying to follow the Church’s condemnation of artificial birth control. Therefore, my ethnographic interviews and
quantitative data will offer contemporary practical situations, needs, and challenges regarding marital sexuality of South Korea Catholic married lay people.

In relation to the issues of fertility and birth control, contemporary South Korean society faces severe challenges, namely a relatively low fertility rate due to various societal and economic effects, and changing public opinions and personal attitudes. In addition, South Korea has a relatively high abortion rate due to unintended or unwanted pregnancies and the widespread use of ineffective contraception such as *coitus interruptus* or Natural Family Planning in spite of the high contraception prevalence rate. In particular, today South Korean society faces increasing numbers of infertile married couples. Moreover, my interviews with ten married Catholic Korean women reveal that many of these couples, in trying to conform to the Church’s teaching on birth control do, in fact, get pregnant and then terminate the pregnancy through abortion.

In focusing on one community, namely, my ten participants, my goals are to understand their struggles, fear, pain, and guilt to criticize the idealistic and impractical Church teaching on contraception, and to lend support to those who argue for a change of the Church teaching on contraception as an needed response to the struggles and needs of other Catholic married couples. Although my participants’ struggles and needs are different in some ways from the struggles and needs of women in other parts of the world, still, as I mentioned above, I hold that there may well exist many common dimensions of concern and challenge that are shared with many women of other societies across the globe. In this way I hope to make a contribution to the general international theological
and ethical discussions about the importance of taking seriously human experience in the shaping of Catholic sexual ethics, specifically the moral teaching on contraception.

This dissertation aims to show four arguments in particular through my constructive theo-ethical arguments with revisionist’s perspectives in conversation with my ethnographic interviews and quantitative data. First, I argue that there is “a gap” between official Church teaching on birth control and practical situations of South Korean Catholic heterosexual married women on birth control. Second, while the Church allows Natural Family Planning (here after NFP) as a permissible method of avoiding conception, my interviews highlight how ineffective this method proves to be in the real lives of Catholic heterosexual married people. Among my interviewees, seven out of ten experienced unplanned/unwanted pregnancy or had an abortion subsequent to the failed NFP. Third, I criticize the Church’s “idealistic teaching” on the meaning and purpose of the conjugal act, which is that the unitive and procreative purposes are equal and should be always open to each other. However, unity and procreation do not go together for my participants in most cases. Their fear of procreation, when they do not use contraception, blocks their feelings of unity and sexual intimacy. Namely, the message from the Church teaching is too idealistic and it blocks sexual intimacy between spouses and sometimes, the failure of NFP leads the couple to commit a sin like abortion. A number of my interviewees speak powerfully of their fear of an unexpected/unwanted pregnancy and their pain and guilt from their experiences with an abortion in the past. Last, I argue that the current Roman Catholic official teaching about contraception should listen and respond to South Korean (and other nationalities) Catholic heterosexual married women’s
struggles and needs in their particular contexts. Accordingly, it should be reconsidered and reshaped in light of the lived experiences of Catholic heterosexual married lay people.

**Overview of Contemporary Birth Control and Reproductive Realities in South Korea**

Artificial contraception is used widely today in many societies across the globe. South Korea is no exception. Public health officials refer to the rates of use of contraceptives in a given population as the Contraceptive Prevalence Rate (CPR). It gives a rough measure of the level of contraceptive use in a given society. Because I have studied my project regarding a South Korean issue in the U.S. and the first readers of this dissertation would be people who live in the U.S., a brief comparison between U.S. and South Korean CPR data is helpful, I believe, for a nuanced understanding of today’s South Korean context of CPR and their attitudes toward contraception.

The use of contraception across U.S. society and across South Korean society is almost the same. Between 2006 and 2010, according to UN data, the CPR in the United States was 79 percent while in South Korea it was slightly higher at 80 percent.¹ While the most used contraceptive method by women in the U.S. was oral pills, in South Korea male condoms were the most common form of contraception used by couples (unmarried and married).² According to the data of World Health Organization (WHO) in 2002,

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¹ UNdata, “Contraceptive Prevalence Rate,” assessed on May 13, 2013, http://data.un.org/Data.aspx?d=SOWC&f=inID%3A3A34. This data comes from the website of UNdata, which is a data access system to UN databases. According to the website, “the United Nations Statistics Division (UNSD) of the Department of Economic and Social Affairs (DESA) launched a new internet based data service for the global user community. It brings UN statistical databases within easy reach of users through a single entry point (http://data.un.org/).”

² See the table 8 in Chapter Three in this dissertation, “Data regarding Contraceptive Use in the United States.”
among the U.S. women who were married or in a stable union between the ages of 15 and 49, 30 percent used female sterilization.\textsuperscript{3} This was the most used form of contraception. 26 percent of U.S. women used oral pills. 14 percent relied on sterilizations of their male partners. 18 percent relied on condoms, 6 percent on IUDs, and 6 percent on injectables or implants.

By comparison among South Korean married women aged between 15 and 44, the most used contraceptive was a condom at 25.0 percent. And in descending order of use came a reliance on vasectomy at 21.0 percent, on IUDs at 16.1 percent, on female sterilization at 7.3 percent, and on oral pills at just 2.7 percent.\textsuperscript{4} According to these comparative statistics between the U.S. and South Korea, while the majority of U.S. women use contraceptives that primarily impact their own bodies such as female sterilization or oral pills, South Korean couples tend to favor contraception that is applied to or alters men’s bodies such as condoms and vasectomies respectively. As stated above, even among South Korean unmarried couples, the most common contraception is a condom and the next is \textit{coitus interruptus}.

In general, contraception is still treated as a taboo subject in conversations in South Korean society. As one aspect of the atmosphere, it is still illegal to advertise contraceptives such as birth control pills on television. Ironically, while a prescription is required to get birth control pills in the U.S., in South Korea the pills can be purchased


easily without any prescription at a pharmacy. Nevertheless, as stated above, only 2.7 percent of South Korean married women aged between 15 and 44 used oral pills.

While the South Korean CPR is slightly higher at 80 percent, South Korean society has a relatively high rate of abortion. According to the research *The 2009 National Survey on Fertility, Family Health and Welfare in Korea*, 26 percent of the married women aged between 15 and 44 have had at least one abortion. In other words, even though South Korea has a high rate of CPR, South Korean society is struggling with a high rate of abortion due to unplanned/unwanted pregnancies and ineffective contraceptive uses, and the struggling pertains not only to unmarried people and teenagers, but also to married couples. If South Korean married couples were to use more effective and secure birth control methods and have more practical information about birth control, I think it could help to reduce the rate of abortion.

As a relevant context of birth control, South Korea is faced with low fertility rate. South Korea’s experience is more similar to that of industrialized countries than the developing world. Since the 1990’s, the population of South Korea has been decreasing. Many South Korean married couples tend to use birth control to delay childbirth or after having one or two children, to avoid the birth of another child. Many South Korean couples speak of their financial constraints as limiting their ability to raise more children. Likewise, many professional women speak of career pressures as mandating a limit to the number of children they can provide for.

In relation to the South Korean society’s low fertility rate, due to the delay of reproduction and women tending to marry at an older age (due to their professional

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5 Seung-Kwon Kim, 194.
careers or for other personal reasons), some married couples struggle with infertility. So today, many infertile Korean couples are using reproductive technologies such as in vitro fertilization (IVF) or artificial insemination. Recently, as a response to the problem of the decreasing population, the South Korean government decided to support financially the cost of Assisted Reproductive Technologies (hereafter ARTs) for infertile married couples. In addition, various ways have been encouraged to spur population growth, such as support for reproductive technologies, policies that encourage adoption, or the practice of giving tax breaks to families having children. As a matter of fact, since 2005, the South Korean Government has provided financial incentives to encourage childbirth and the education of children. It supports families with children by offering the monthly cost of bringing up children such as sending a check monthly to cover child support expenses, education expenses, childbirth costs, offering a one-time congratulatory money offering for childbirth, and by making available a financial discount for a pre-school and kindergarten programs.

The differing, but inherently inter-related goals of avoiding unwanted pregnancies and yet being able to have children when desired are problems not only at the level of personal decisions of a married couple, but also at national and international levels of concern. Indeed, these issues related to human reproduction have brought about socio-economic and ethical problems in South Korean society, such as high rates of abortion and the abandonment of children and subsequent problem of adoption in overseas and domestic adoptions.6

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6 According to the news article, “152 infants were abandoned in the first seven months of 2013 alone, more than the 139 abandoned in all of 2012. In recent years, a large number of infants have been
In addition, these issues impact heavily on economic and psychological family struggles due to the failure of birth control. They impact heavily on women’s career difficulties due to pregnancy and delivery and they are connected to the significant financial costs being borne by infertile couples who opt to use A.R.T. These issues also directly engage ethical debates about the sale of embryos, sex-selection, the disposal of extra embryos, surrogate motherhood, reproductive cloning, and a wide range of other issues. These societal issues seem not to be unique to South Korea—they are confronted in many other countries in the twenty-first century. In other words, for instance, in South Korea, some married couples have an abortion due to financial burden for rearing children whereas other couples make an effort and spend a lot of money and energy to have a baby through ARTs. As in many other countries, South Korean society faces a broad range of fertility concerns.

**Key Debates on Contraceptive Practices in the Roman Catholic Church**

Throughout its long history, the Catholic Church has condemned the use of artificial contraception as an intrinsically evil act. But during the 1950s and 60s changes in theological and ethical views held out promise to many that the Church was quite possibly ready to end its condemnation. Increasing attention, for example, to dynamic...
changes occurring in human history and in the development of societies was increasingly being noted as an important element in the shaping of Papal social encyclicals. Prominent Catholic theologians and ethicists also were emphasizing the importance of the human “subject,” human relationships, and freedom and the growing prominence of these themes in Catholic theology and ethics suggested the possibility that the Church might embrace new thinking on the moral status of contraception.

Hopes for change were raised when Pope John XXIII called the Papal Birth Control Commission (1966) to study the question of the moral status of birth control. That made the jolt across the Church the greater when Pope Paul VI in 1968 promulgated *Humanae vitae*, in which he strongly sustained the traditional condemnation of contraception. This encyclical caused great controversy and prompted a hotly engaged and sustained debate between Catholic theologians and ethicists who wrote and spoke in favor of the Papal reasoning in the encyclical and those who voiced sharp criticism of the Pope’s reasoning and moral conclusion. Catholic laypeople across the globe had a strong stake in these debates requiring them either to side with the Pope or to examine their consciences and, perhaps for the first time in their life, to knowingly decide to break with Papal teaching on a moral matter.

paradigm in moral teaching was Bernard Häring whose three volume work *The Law of Christ* was published in German in 1954 and translated into English in 1961. In it he called for a responsibility model of moral theology that centered on God’s call and humans’ response. This powerful work encouraged many to call for reform and renewal in the area of moral theology and especially in the Church’s teaching on sexual ethics. Indeed, his works and views encouraged many to believe that the Church was nearing a relaxing of the condemnation of birth control. He was an active participant and theological consultant at the Vatican Council. Indeed, he was elected secretary of the committee for *Gaudium et Spes* (*The Pastoral Constitution on the Church in the Modern World*), one of the Council most important documents. He later became a strong critic of *Humanae vitae* critiquing both its condemnation of birth control and its moral reasoning backing up that sustained condemnation. See Haring, *The Law of Christ* 3 vols., trans. Edwin C. Kaiser (Westminster, MD: Newman Press, 1961).
In this dissertation I survey and analyze the core theological and moral perspectives voiced by those who supported the Papal condemnation—those who are often referred to as the “traditionalists”—and compare and contrast their views with the core theological and moral arguments of those revisionist theologians and ethicists who criticized the Papal condemnation.

The “traditionalist” camp has agreed with the Pope holding to the traditional condemnation. The “revisionist” camp has sought to argue for a revision of the Church teaching. I draw upon many of the main points developed by the “revisionist” camp and find that their arguments best engage my understanding of the concrete experience of South Korean women drawn from my qualitative interview research.

In relation to the stress of the experience of the laity as an important theological ethical datum, a revisionist Catholic moral theologian, Charles E. Curran argues that the meaning of the word “magisterium” has often been sadly narrowed in the debates following Vatican II and *Humanae vitae*. The traditionalists stress that the Catholic Church’s “magisterium” means the authoritative teaching role of the pope and bishops. Many revisionists like Curran emphasize a broader view of the “magisterium” that includes the voice of the laity. Curran supports Daniel Maguire’s insistence on the true historical meaning of the word magisterium as:

> the word “magisterium” has a plural. There are many magisteria in the Church: papal and episcopal magisteria, the authentic magisterium of the laity, and the magisterium of theologians. Each of these provides a creative service and contributes to the search for the understanding of faith in the life of the community of Jesus. As the years after Vatican II and *Humanae vitae* passed, Catholic theologians in the United States came to
an awareness that the hierarchical magisterium does not involve the total teaching activity of the Church. Curran, Maguire, and other revisionists hold in addition to the magisterium of the Papacy, there exists a significant teaching office of the laity. This serves to support the revisionist camp’s emphasis that the lived experience of the Catholic laity is an important theological and ethical datum that must inform Catholic moral reflection.

In regard to the morality of birth control, traditionalists stress the papal condemnation on artificial contraception based on an interpretation of the natural law regarding licit and illicit modes of birth limitation. Namely, NFP is held to be licit because it does not impede a natural process whereas a condom is held to be illicit because it does impede a natural process. However, revisionists challenge this moral mode because it does not seriously engage the lived experience of the lay people.

In my project, I draw on a number of revisionists’ arguments and perspectives and seek to engage them through my ethnographic interviews with ten South Korean Catholic heterosexual married women. I explore South Korean heterosexual married Catholics’ experiences to provide a concrete illustration of the challenges facing Catholic laypeople as they attempt to follow Church teaching in their married lives.

**Ethnographic Methodology and Its Theological and Ethical Contribution**

In all, my dissertation aims to engage the wide ranging theological ethical debates about birth control that have been sustained in the Catholic Church for five decades in light of the analysis of the qualitative structured interviews of ten South Korean Catholic

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heterosexual married women. A key point of divergence between the traditionalists and the revisionists lies in how they understand the theological and moral significance of human experience. Accordingly I have sought to correlate the debates for and against birth control (discussed in Chapter Two) with ethnographic research (found in Chapter Four) to help shed light on the personal and profound ranges of experience that South Korean married Catholic women bear as they try to live in conformity to the papal condemnation of birth control.

The goal of the ethnographic interviews I conducted in South Korea has been to learn from a select number of South Korean heterosexual married Catholic women’s experiences regarding their actual conditions and practices of contraception, family planning, and marital sexuality and to explore their views and attitudes of the Church teachings and their own understanding of their religious faith and beliefs. However in order to contextualize the experiences and perspectives of South Korean heterosexual married Catholic women, I explore quantitative data (in Chapter Three) regarding South Korean sexual culture in general and sexual and reproductive practices of South Korean heterosexual general people and Catholic lay people in particular. I then supplement this data with qualitative data drawn from my in-depth ethnographic interviews of ten South Korean heterosexual married Catholic women. Accordingly, I offer general information regarding South Korean sexual culture and its contemporary challenges in order to help lay the context for my analysis and interpretation of my ethnographic interviews in the specific challenges, concerns, and tensions faced by South Korean heterosexual married Catholic lays’ experiences of birth control, their sexuality, and faith.
For the chapters three and four, I use sociological sources and data such as news articles, statistical data, quantitative survey data, and in-depth and open-ended ethnographic interviews conducted by myself in South Korea. I employ a sociological method because it is my goal to reflect Catholics’ lived realities and experiences through their views, practices, and voices as theological ethical data. Chapters three and four engage these primary sources and data.

According to a theologian, Mary McClintock Fulkerson, theology should be shaped by empirical studies, and the practical theological task “has to do with the way Christian faith occurs as a contemporary situation.”9 She argues that even though qualitative method has a limitation of generalization, a case study in the way of qualitative method “can provide important contextualization of belief in the instance of Christian faith” and it is open to view important questions regarding biblical, theological, and ethical themes.10 I support her argument. Indeed, theological and ethical task needs to engage contemporary and practical situations and human experience. In my qualitative interviews, it is revealed that the current Church teaching on birth control is excessively theoretical, abstract, and idealistic, and does not sufficiently engage human experiences, struggles, and challenges.

Regarding the layout of the qualitative interviews, I recruited interviewees from a non-governmental organization formed by South Korean Catholic women and two local

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10 Ibid., 129-130.
Catholic parishes in South Korea. Interviewees were from different age groups, have been married different lengths of time, and have different socioeconomic backgrounds and religious histories. Some are cradle Catholics and some converted as a result of marriage. I asked open ended questions and conducted in-depth interviews regarding their experiences with marriage, family, birth control, and sexuality in order to understand their real stories, actual circumstances, struggles and concerns in their sexual lives and how closely or distantly they believe they must follow Vatican teachings on sexuality. I conducted the interviews in Seoul, South Korea from August to November in 2010 with Institutional Review Board (hereafter IRB) approval. The details are dealt with in Chapter Four.

In regard to the contribution of my work, many American and European Catholic theologians and ethicists have emphasized the importance of the lived experience of the married laity in informing Catholic social and sexual ethics. Previous research in the area of Catholic social and sexual ethics has shown mostly European-Americans' experiences, their stories, and their contexts. While limiting the focus of this study in order to explore the influence of religious, specifically Roman Catholic beliefs and practices on the lives of South Korean Catholic heterosexual married women, my study builds on research done in other areas.

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11 See, for example, the powerful work of Julie Hanlon Rubio, _A Christian Theology of Marriage And Family_ where she talks about her own experience as a wife, mother, and theologian in contemporary western society. She explores the Catholic marriage liturgy along with the New Testament, Christian tradition, the dual vocation of Christian parents, Christian parenting for children, and the mission of the Christian family. See Julie Hanlon Rubio, _A Christian Theology of Marriage And Family_ (New York and Mahwah, N.J.: Paulist Press, 2003).
In the U.S. today, there is little research available on South Korean religious ethical subject matters regarding contemporary South Korean socio-cultural and sexual cultural contexts, especially in the field of Catholic sexual ethics. Even in the researches in the realm of Christian sexual ethics done after 2000s, there have been very few works that examine South Korean people’s experience, voices, and stories.\textsuperscript{12} As a native South Korean, I accessed psycho-sociological studies of the marital culture, sexuality, and fertility of South Korean society in general and South Korean Catholics in particular as a literature review prior to the development of my qualitative structured interviews.

Therefore, my study asked South Korean Catholic heterosexual married women how they deal with these sexual and reproductive issues in their daily lives and religious faith and practices as well as I take seriously their experiences and voices from the specific South Korean contexts. Thus, my study add a distinctive engagement with the experience of married Asian Catholics, specifically South Korean Catholic married women.

\textsuperscript{12} One example of a recent study of South Korean sexual ethics from the perspective of Christian feminist ethics is found in the work of Keun-joo Christine Pae. Pae studied the prostitution trade at U.S. military bases in South Korea. See her essay, “Western Princesses-A Missing Story: A Christian Feminist Ethical Analysis of U.S. Military Prostitution in South Korea,” \textit{Journal of the Society of Christian Ethics} 29, no. 2 (2009). In her essay, Pae criticizes the oppressive and unjust structure of the prostitution sustained around U.S. military bases in South Korea and argues that the military prostitution itself should be considered and accepted as “a human reality” in the realm of international politics: the U.S. empire building at the expenses of women’s bodies. In her study, Pae gives an historical and political analysis regarding the relationship between U.S. and South Korea, and she reports her interviews with former military prostitutes. However, while her work contributes to our understanding of one aspect of sexual culture in South Korea, it does not address many other important dimensions of South Korean sexual culture. Indeed some of her critique is now outdated because, since 2004, any kind of brothels in cities or at U.S. military bases have been outlawed by the South Korean government. Her study makes an important contribution, but it sheds little light on issues of the sexual culture across the breadth of South Korean society.
Overview of Chapters

In Chapter One, through examining the historical encyclicals and papal texts, I explore the broad contours of historic theological and moral debates and controversies regarding birth control. I examine how the Church has changed its teachings on birth control practically throughout the Church history, and I explore the possibility of how the Church can change its teaching on contraception by dealing with historical examples of practical changes in the encyclicals and papal texts per se and by examining the history of the Papal Birth Control Commission.

In Chapter Two, I survey the heated theological and moral debates and reflections from two different approaches (traditionalist and revisionist) and support the revisionists’ perspectives, findings, and arguments. I present my own constructive arguments that are in basic agreement with revisionist methodology in ethical reasoning. I show why the revisionist arguments are more persuasive than traditionalists’ arguments. The traditionalist camp tends to portray the Church’s condemnation of birth control as a permanent core moral teaching is so basic that it can never be changed. However, the revisionist camp notes that over its history the Church has changed its views on a number of its moral teaching. Indeed, John T. Noonan argues that the Catholic Church in recent centuries has changed its views without abandoning its foundational commitment to the Gospel of Jesus Christ, which the Church cannot change.\(^\text{13}\) He discusses about the possibility of change in the Church’s moral teaching with offering specific facts and events have occurred over the centuries in Catholic moral teaching such as usury, slavery,

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and freedom of conscience. I agree with those revisionists who note these important precedents for the Church’s moral teaching being open to change when needed.

In Chapter Three, in order to lay the context for my interpretations of my ethnographic interviews with ten participants in Chapter four, I explore South Korean sexual culture and heterosexual, married South Korean Catholic lay people’s sexuality in particular. Chapter three thus is aimed to offer general information and background about South Korean sexual culture and a nuanced understanding about South Korean society to the readers. First, I present a range of surveys that shed light on the general sexual culture of South Korea, specifically focused on today’s situations of South Korean sexual issues such as sex education, sexual violence, the prevalence of premarital sex, abortion rates, and the attitude and use of birth control. Second, this chapter presents quantitative data regarding South Korean Catholic heterosexual married people’s sexual culture such as the attitude and use of contraception, abortion, family, marital sexuality, fertility, and religious faith in order to develop a better understanding of South Korean Catholic lay people and their sexuality. This data will allow me to compare and contrast the experiences of my ten South Korean Catholic heterosexual married women with a more general sense of South Korean married experience. In this way, I use quantitative data regarding South Korean Catholic married lay people in order to contextualize the ethnographic interview data.

In Chapter Four, I present ten personal reports from South Korean Catholic heterosexual married women drawn from my ethnographic interviews. For the ethnographic interviews, I examine the experiences, struggles, and challenges of
participants to pay sustained attention to their stories regarding their own married life understood in light of their attempts to respect official Catholic teachings on birth control. Through the lived experiences of my interviewees, I develop my constructive arguments about the existence of a huge gap between official Church teaching on birth control and my participant's experiences on birth control. These interviews demonstrate the ineffectiveness of NFP in their marital sexual lives and the severe problems that arise from their attempts to avoid the use of artificial birth control. These interviews, I believe, make clear these women's levels of fear, pain, and guilt caused by their struggling with their religious faith due to the Church’s idealistic and impractical teaching on birth control. Their experience makes clear to me the need for an end to the Catholic Church’s condemnation of artificial birth control. I and the many other theologians and ethicists of the revisionist camp argue that the magisterium must listen and respond to the experience of the many Catholic women across the globe who, like my ten South Korean women, struggle so hard with this teaching and experience such pain as a result. Through the social science data - the quantitative and qualitative data in chapters thee and four - I support my arguments about the need for change in Catholic sexual ethics regarding birth control in conversation with the lived experiences of South Korean Catholic married lay people.

In a brief concluding summary, by drawing on main themes of the revisionists’ moral and theological arguments and integrating them with my own qualitative research, I argue that the Church’s condemnation of artificial contraception is impractical, morally irresponsible and pastorally hurtful. I discuss why the Church teachings on contraception
should be reconsidered and reshaped. I argue that the theological and ethical perspectives of the revisionists are stronger and more adequate as guides for Catholic sexual ethical teaching precisely because the revisionists take seriously the lived experiences and particular challenges that Catholic married lay people face today. I argue that the Church teaching on contraception should be reshaped in conversation with the lived experiences of South Korean heterosexual Catholic married lay people as well as the Catholic laity in other societies across the globe many of whom report similar experiences, struggles, and needs.
CHAPTER ONE

THE ROMAN CATHOLIC OFFICIAL TEACHINGS ON CONTRACEPTION

Today, the Roman Catholic Church teaching on contraception follows the teaching in *Humanae vitae* (1968), and it condemns artificial contraception as an intrinsically evil act. Although the Church condemns artificial contraception, 55 percent of South Korean Catholics use artificial contraception other than Natural Family Planning, which is a method approved by the Church.\(^1\) In a critique, the condemnation of artificial contraception in *Humanae vitae* (1968) seems to show two facts: one is that it rejected the official Majority Report of the Papal Birth Control Commission (1966) (a special commission established to study a birth control issue) which suggested that artificial contraception was permissible morally, and the other is that it overlooked the strong hopes of many at the time of the Second Vatican Council that the Church was engaging the modern world with new theological insight and openness to new views in the realm of

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\(^1\) In regard of the South Korean Catholics, *The Survey on Life and Family* was compiled in the *Pastoral Letter to Families* in the 2004 Fall General Assembly of the Catholic Bishops Conference of South Korea. The national South Korea Research Center was charged with the survey. The research center surveyed 1000 Catholics and 1000 general people nationwide and selected subjects aged fifteen and above from November 18\(^{th}\) to December 19\(^{th}\) in 2003. See the chapter four in this dissertation for details; In regard of the U.S. Catholic women, the Guttmacher Institute analyzed the data from federal government’s the 2006-2008 National Survey of Family Growth, which relied on in-person interviews with 7,356 females from the ages of 15 to 44. According to the survey, among women who were currently at risk of unintended pregnancy, 87 percent Catholic women were currently using contraceptives. The Guttmacher Institute, “Guttmacher Statistic on Catholic Women’s Contraceptive Use,” February 15, 2012, accessed October 28, 2012, [http://www.guttmacher.org/media/inthenews/2012/02/15/index.html](http://www.guttmacher.org/media/inthenews/2012/02/15/index.html).
sexual ethics and the importance of the Catholics’ lived realities and experiences as theological ethical data.

In fact, the moral teachings of the Roman Catholic Church such as doctrinal changes or developments have changed and continue to change throughout Christian history by examining specific issues such as slavery, usury, religious freedom, and divorce (in progress).\(^2\) In this first chapter, I will show the changes and developments of the Roman Catholic Church teaching throughout history on the meaning and ends of marriage and the conjugal act and the morality of birth control with exploring the historical encyclicals and papal texts which deal with marriage, the conjugal act, and birth control between 1880 and 1965. Then, I will explore the historical facts and backgrounds around the Papal Birth Control Commission as the artificial contraception was suggested as a morally permissible method in the Majority Report of the Papal Birth Control Commission, but after *Humanae vitae* was promulgated by Pope Paul VI, the mentality and the central message of the official Report was buried in history. Finally, I will present Pope Paul VI’s *Humanae vitae* and Pope John Paul II’s approach to contraception and his theology of the body as the contemporary Church teaching and practice on the conjugal act and contraception.

Ecclesial/Papal Texts on Contraception (1880-1951)

In the nineteenth century and into twentieth, the Catholic Church was challenged by modernism in its various forms, such as rationalism, liberalism, feminism, materialism, and socialism. As the Vatican’s response to modern ideas seen as threatening Catholicism,

the First Vatican Council (1869-70) was convoked by Pope Pius IX to deal with the contemporary modern problems and to declare an assertion of papal infallibility. At that time, one of the greatest challenges to Vatican authority was women’s movement in the church and the Papacy condemned woman’s emancipation “as undermining the divinely founded obedience of the wife to her husband.”  

Women’s nature and sexuality were treated as “intuitive, altruistic, maternal, and nonsexual,” and the Catholic Church continued to uphold Mary as “the model of the true feminine womanhood.”

In the issue of woman’s reproductive rights in the feminist movements, the Catholic Church opposed birth control because of the traditional view that held that the only purpose of human sexual intercourse was for procreation. This “anticontraceptive tradition was shared with Protestantism” at that time. On August 15th 1930, however, one of the mainstream Protestantism, the Anglican churches approved of the use of contraception “in particular circumstances” at the Lambeth Conference, the Anglican Communion meeting. In fact, in 1908 and 1920, the Lambeth Conferences rejected

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4 Ibid., 25.

5 Ibid., 27.

6 Adrian Thatcher, *Marriage after Modernity: Christian Marriage in Postmodern Times* (New York: New York University Press, 1999), 178-179, According to the Adrian Thatcher’s book, the particular circumstances are follows: “first, couples must be married…Secondly, couples must be under an obligation to limit or avoid parenthood. It was not enough merely to wish to have few or no children or to postpone their arrival… Thirdly the Conference uses strong language to exclude motives of selfishness, luxury, or mere convenience…Fourthly, couples acting under an obligation to limit births and considering contraception have the choice between abstinence from sexual intercourse and other methods…Fifthly, couples should first attempt to limit births by not having sex… Sixthly, there must be a morally sound reason why complete abstinence is impossible”; “Lambeth Conference, any of the periodic gatherings of bishops of the Anglican Communion held initially (1867–1968) at Lambeth Palace (the London house of the archbishop of Canterbury) and, since 1978, at Canterbury, England. They are important as a means of expressing united Anglican opinion, but the Anglican Communion has no central authoritative government.
artificial contraception, but in 1930, it conceded contraception within marriage and when there was great need. On December 31st 1930, Pope Pius XI promulgated *On Chaste Marriage* (Latin: *Casti Connubii*) and he condemned not only reproductive rights for birth control as a response to the Lambeth Conference, but also woman’s emancipation, and asserted the prohibition of contraception as an intrinsic evil act under the Church’s historical tradition.

But a significant change occurred in the Catholic Church teaching during the twentieth century. About twenty five years after the scientific discovery of the accurate time of ovulation by the Ogino-Knaus method in 1924, “the use of rhythm was referred to by Roman authority… as a method of birth control open to all Christian couples” in the address of the Pope Pius XII to the Italian Catholic Society of Midwives (*Address to Midwives on the Nature of Their Profession*) on October 29th 1951. Until then, there had been controversial arguments on the issue of the sterile period due to an uncertainty of the sterile period’s existence and to the temptation it posed to engage in illicit behavior contrary to the primary end of marriage.

Since 1951, the Church has approved the practice of periodic abstinence as a method of birth control under certain circumstances where acceptable reasons have been present. Initially the Church approved it only for serious reasons or motives such as

The bishops meet and deliberate as equals, with the archbishop of Canterbury as host, chairman, and ‘first among equals.’ The time between conferences has varied, but the normal interval is 10 years,” accessed November 01, 2012, http://www.britannica.com/EBchecked/topic/328583/Lambeth-Conference.


8 Ibid., 438-447.
“medical, eugenic, economic, and social reasons.”⁹ Later Church teaching expanded and detailed the list of acceptable reasons for the periodic abstinence (so-called “Natural Family Planning,” hereafter NFP). According to the Vatican, NFP is permissible morally. Spouses may, the Vatican argues, control birth naturally in their conjugal act and the intention not to bear children is permissible morally because the sex act is still open to the possibility of procreation.

This change in teaching about NFP corresponded with changes in teaching about coitus. There was, between 1850 and 1964, significant development in the Church’s teachings about the meaning of the conjugal act. “The process partly reflected the environmental changes, partly reflected the new voices speaking in the Church, partly represented a work of self-criticism by the theologians.”¹⁰ Even though there were various and new voices expressing new understanding about the personal meaning and value of coitus among the moral theologians in the Catholic Church, since 1850 all the popes prior to Pius XII sustained the traditional church teaching regarding marital intercourse. This held that the primary purpose of intercourse was for procreation. According to Odile M. Liebard, “actually the richness of the theme of human sexuality was never adequately addressed in these two encyclicals [Leo XIII and Pius XI]. It is because of this absence of thematic development that marriage and sexuality became

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⁹ Pius XI, *Casti Connubii* 63: “… Some wish it to be allowed and left to the will of the father or the mother; others say it is unlawful unless there are weighty reasons which they call by the name of medical, social, or eugenic “indication.” Because this matter falls under the penal laws of the state by which the destruction of the offspring begotten but unborn is forbidden, these people demand that the “indication,” which in one form or another they defend, be recognized as such by the public law and in no way penalized. There are those, moreover, who ask that the public authorities provide aid for these death-dealing operations, a thing, which, sad to say, everyone knows is of very frequent occurrence in some places.”

¹⁰ Noonan, *Contraception*, 491.
almost synonymous, with the resultant impoverishment of both. Catholic thought in this area was not prepared to cope with the rapid social changes of the 1940’s, 1950’s and 1960’s. With each decade, the Catholic viewpoint moved further away from dialogue with the contemporary world.”\textsuperscript{11}

However, from Pope Pius XII, the meaning of the conjugal act itself was developed as “the expression of the reciprocal gift, which effects the union in one flesh” and husband and wife should experience pleasure and happiness in body and spirit, and in seeking and enjoying this pleasure, therefore, couples do nothing wrong.\textsuperscript{12} In other words, Pius XII added “pleasure and happiness” to the traditional meanings of coitus which were conjugal fidelity, unity, chastity, mutual love, and obedience. In addition, Pope Pius XII emphasized the personal value of intercourse as “the self-donation of the spouses.”\textsuperscript{13} Adding of “pleasure and happiness” in the meaning of the conjugal act was a big change in the Roman Catholic Church history and tradition regarding marital sexuality. For the first time, Pius XII addressed that sexual pleasure between spouses was good and valuable.

Regarding the issue of birth control, Pope Pius XII condemned artificial contraception and allowed only the use of the rhythm method, and then, only for the gravest of reasons. After Pius XII, Pope John XXIII in his encyclical Mother and Teacher


\textsuperscript{12} Pius XII, Address to Midwives on the Nature of Their Profession, October 29, 1951.

\textsuperscript{13} Noonan, Contraception, 500.
(Latin *Mater et magistra*) condemned artificial contraceptives strongly, despite the growing societal awareness of population problems at that time.¹⁴

In the “Pastoral Constitution on the Church in the Modern World” (1965) (Latin *Gaudium et spes*), which is one of the documents of the Second Vatican Council, the Church, under the Pope Paul VI, had made much mention of the concepts of married love (conjugal love) as friendship, mutual self-giving, and the good of the children. In *Gaudium et spes*, for the first time, two ends of marriage, procreation and the unity of spouses are not hierarchical, but they become equal. Then, in *Humanae vitae* Paul VI developed and clarified the meaning and ends of the conjugal act as the unitive purpose (mutual love union between a husband and a wife) and the procreative purpose (procreation and education of children) are equally meaningful and at the same time are absolutely inseparable in each and every marital act.

In the followings, I will explore the details of changes and developments of the Roman Catholic Church teachings on the meaning and ends of marriage and the conjugal act and the morality of birth control with exploring the historical encyclicals and papal texts.

**Pope Leo XIII: The Mystery of Divine Wisdom (Arcanum divinae Sapientiae) 1880**

Pope Leo XIII (1878-1903) developed Catholic social teachings (social inequality and social justice issues with Papal authority) and civilization with his encyclical, *On the New Things* (Latin: *Rerum Novarum*) and in the encyclical, he “set forth with profound erudition the Christian principles bearing on the relations between capital and labor, and

¹⁴ Ibid., 508-511.
it gave a vigorous impulse to the social movement along Christian lines.”

He maintained his predecessor, Pope Pius IX’s attitude of protest regarding the Kingdom of Italy and desired complete independence for the Holy See, and consequently its restoration as a real sovereignty.

In 1880, Leo XIII wrote the encyclical, *The Mystery of Divine Wisdom*, (Latin *Arcanum divinae sapientiae*), in response to the problems of the society of his time such as “the moral breakdown of a society, infidelity between husbands and wives, or insufficient dedication to the celibate life of chastity necessarily colors their handling of the theme of human sexuality.” In addition, even though *Arcanum divinae sapientiae* offered many positive insights into the Christian marriage, “it laid the foundations for a structure that is predominantly legalistic and negative,” because Leo XIII had to respond to the problems of the society of his time such as marital breakdowns and attempts from the civil authorities to legislate regarding marriage.

In the encyclical, Leo XIII affirms unity and indissolubility of marriage confirmed by Christ himself. He says:

> the dignity of the sacrament must be considered, for through addition of the sacrament the marriages of Christians have become far the noblest of all matrimonial unions. But to decree and ordain concerning the sacrament is, by the will of Christ Himself. . . (no.20)

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16 Ibid.

17 Liebard, xvii.

18 Ibid., 17-19.

Leo XIII confirms the traditional ends of marriage as “the propagation of the human race” and “mutual love” between spouses. But, the terminology of ends or purposes of marriage is not used in the encyclical. Instead, he speaks of the duties and rights of marriage as follows:

First, there has been vouchsafed to the marriage union a higher and nobler purpose than was ever previously given to it. By the command of Christ, it not only looks to the propagation of the human race, but to the bringing forth of children for the Church... Secondly, the mutual duties of husband and wife have been defined, and their several rights accurately established. (no. 10-11)

In the encyclical, the duties and rights of marriage are defined as follows:

the mutual duties of husband and wife have been defined, and their several rights accurately established. They are bound, namely, to have such feelings for one another as to cherish always very great mutual love, to be ever faithful to their marriage vow, and to give one another an unfailing and unselfish help. (no.11) . . . the rights of husbands and wives were made equal . . . “with us that which is unlawful for women is unlawful for men also, and the same restraint is imposed on equal conditions.” . . . The self-same rights also were firmly established for reciprocal affection and for the interchange of duties. . . (no.14)

As the goods of marriage, following the Church tradition, the pope emphasizes not only procreation and mutual love, but also the sacramental and mystical dimensions of marriage. Leo XIII says:

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20 Ibid., no. 10-11.

21 Ibid., no. 11 and 14.

22 In the Roman Catholic Church tradition, the notion of the goods of marriage goes all the way back to St. Augustine of Hippo, especially one of his treatises, On the Good of Marriage. Augustine (354–430 C.E.) was a North African bishop, a philosopher and theologian of the Roman Catholic Church. He is generally considered as one of the greatest Christian thinkers of all times and his writings were very influential in the development of Western Christianity and philosophy. In his treatise, On the Good of Marriage, Augustine says the goods of marriage as procreation, chaste fidelity, and the holiness of the sacrament, which makes the marriage entirely indissoluble, accessed November 05, 2012, http://www.newadvent.org/fathers/1309.htm.
marriage instituted for the propagation of the human race, but also that the lives of husbands and wives might be made better and happier. This comes about in many ways: by their lightening each other's burdens through mutual help; by constant and faithful love; by having all their possessions in common; and by the heavenly grace which flows from the sacrament. (no.26)\textsuperscript{23}

In addition, what is noteworthy is that the dignity of women is underlined in the encyclical as follows:

When the licentiousness of a husband thus showed itself, nothing could be more piteous than the wife, sunk so low as to be all but reckoned as a means for the gratification of passion, or for the production of offspring. (no.7). . . the dignity of womanhood is lessened and brought low, and women run the risk of being deserted after having ministered to the pleasures of men. Since, then, nothing has such power to lay waste families and destroy the mainstay of kingdoms as the corruption of morals, it is easily seen that divorces are in the highest degree hostile to the prosperity of families and States, springing as they do from the depraved morals of the people. . . (no.29)\textsuperscript{24}

The pope urges that marriage be respected as a divine mystery in opposition to a perceived rising secular understanding. Therefore, as those quotations show, Leo XIII stresses the marriage as an inseparable bond by the will of God and as a sacrament by the divine Church authority, and following the Church tradition he affirms the goods of marriage into as procreation, mutual love, and sacrament.

Odile Liebard describes the view of Leo’s \textit{Arcanum divinae Sapientiae}, that “after reviewing the primary and secondary purposes of marriage, the pontiff reminds husband/father, wife/mother, and children of their respective rights and duties. Thus,

\textsuperscript{23}“The Mystery of Divine Wisdom (Arcanum divinae Sapientiae),” no.26.

\textsuperscript{24}Ibid., no.7 and 29.
coupled with the tension between the civil and ecclesial orders, fosters a terminology that is legal, minimal, and negative in tone.”

**Pope Pius XI: On Chaste Marriage (Casti connubii) 1930**

Pope, Pius XI (1922-1939) supported human dignity, human rights, and freedom of families with protesting against Communism and National Socialism, which were spread out at his time. He supported scientific studies in the church by establishing the Pontifical Academy for the Sciences and was interested in the internal church affairs and ecumenism, and he also encouraged the participation of lay people in the church, especially in the Catholic Action movement, which he defined as “the participation of the laity in the apostolate of the Church’s hierarchy.”

Pius XI wrote *On Chaste Marriage* (Latin: *Casti Connubii*) on the fiftieth anniversary of Leo XIII’s encyclical, *Arcanum divinae Sapientiae*. Between Leo’s encyclical of 1880 and Pius XI’s *Casti Connubii* of 1930, “the world experienced its greatest and most violent upheaval to date, the First World War.” Endorsing and confirming of Leo XIII’s teaching, in *Casti Connubii* Pius XI “attacks the errors and sins contrary to matrimony.” As mentioned before, Pius XI condemned artificial contraception as a response to the Lambeth Conference’s conceding of allowing the use of artificial contraception. He describes vices opposed to Christian marriage such as the use of power of generation outside of wedlock, temporary marriage, experimental

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25 Liebard, xviii


27 Liebard, xix.

28 Ibid.
marriage, companionate marriage, divorce, adultery, false liberty, secularization, mixed
marriage, contraception, abortion, and sterilization.29

Following the Church tradition, Pius XI also confirms that the primary end of
marriage is the procreation and the education of children, and the secondary end of it is
“the blessing of conjugal honor which consists in the mutual fidelity of the spouses in
fulfilling the marriage contract.”30 He says:

First consideration is due to the offspring, which many have the boldness
to call the disagreeable burden of matrimony and which they say is to be
carefully avoided by married people not through virtuous continence . . .
but by frustrating the marriage act. (no. 53) … Since, therefore, the conjugal
act is destined primarily by nature for the begetting of children, those who
in exercising it deliberately frustrate its natural power and purpose sin
against nature and commit a deed which is shameful and intrinsically
vicious. (no. 54) . . . For in matrimony as well as in the use of the
matrimonial rights there are also secondary ends, such as mutual aid, the
cultivating of mutual love, and the quieting of concupiscence which
husband and wife are not forbidden to consider so long as they are
subordinated to the primary end and so long as the intrinsic nature of the
act is preserved. (no. 59)31

In comparison with later encyclicals, the hierarchical ends of marriage as the
primary (procreation) and the secondary (conjugal fidelity) are changed to the equal ends
in Gaudium et spes and then developed in the concrete in Humanae vitae as those two
ends of marriage and the conjugal act are equally valuable and at the same time,
inseparable in each and every conjugal act.

29 Ibid.

30 Pius XI’s Casti Connubii, no.19.

31 Ibid., no. 53-59.
The significant difference from previous encyclicals is that Pius XI mentions that sexual intercourse during infertile periods is not wrong morally even if it would not bring a new life. Pius XI says:

Nor are those considered as acting against nature who in the married state use their right in the proper manner although on account of natural reasons either of time or of certain defects, new life cannot be brought forth. For in matrimony as well as in the use of the matrimonial rights there are also secondary ends, such as mutual aid, the cultivating of mutual love, and the quieting of concupiscence which husband and wife are not forbidden to consider so long as they are subordinated to the primary end and so long as the intrinsic nature of the act is preserved. (n.59)\(^{32}\)

Later, his successor, Pius XII clarifies the affirmation of coitus in infertile periods, especially to avoid procreation (as the rhythm method), and develops the goodness of coitus between spouses as pleasure and happiness. In regard to the artificial contraception, Pius XI strongly condemns contraception as an intrinsically indecent and vicious act against nature. He expresses it as follows:

No difficulty can arise that justifies the putting aside of the law of God which forbids all acts intrinsically evil. There is no possible circumstance in which husband and wife cannot, strengthened by the grace of God. (no.61)\(^{33}\)

Even though the term, “contraception” and a discussion of particular forms of contraceptives are not used in *Casti Connubii*, artificial contraception is condemned as a very serious crime and as an intrinsically evil act categorized as onanism.\(^{34}\)

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\(^{32}\) Ibid., no. 59.

\(^{33}\) Ibid., no. 61.

\(^{34}\) Pius XI states regarding contraception (*Casti Connubii* no. 53-62). In the book, Vincent J. Genovesi, *In Pursuit of Love: Catholic Morality and Human Sexuality* (Collegeville, Minnesota: A Michael Glazier Book The Liturgical Press, 1996), 186, Genovesi says “…in the realm of theological discourse preceding the appearance of CC [*Casti connubii*] the term ‘onanism’ came to have an expanded meaning. Included under the sin of onanism was not just withdrawal followed by ejaculation but also every exercise of the
Liebard points out negative perspectives of *Casti Connubii* on the subjects of human sexuality and the modern emancipation of woman. In *Casti Connubii*, the modern emancipation of women is rejected as false liberty. In addition, concerning human sexuality, “a person either is married or is not married. Only the married person has any right to a sex life… The sole option for the single person is chastity which, given the narrowness of the framework, becomes basically a negative virtue, the avoidance of unlawful sexual activity.”

In a commentary of *Casti Connubii*, Walter J. Handren agrees with the Pope’s logic and condemns artificial contraception. As he puts it: “an act which artificially prevents the conception of a child is an act which is intrinsically evil because it interferes with the natural and proper course of procreation. It is an act which is contrary to the divine plan of marriage and the natural law of conjugal love.”

35 Pius XI states regarding the false emancipation of women in *Casti Connubii* (no.74-78): “This emancipation in their ideas must be threefold, in the ruling of the domestic society, in the administration of family affairs and in the rearing of the children. It must be social, economic, physiological: - physiological, that is to say, the woman is to be freed at her own good pleasure from the burdensome duties properly belonging to a wife as companion and mother (We have already said that this is not an emancipation but a crime); social, inasmuch as the wife being freed from the cares of children and family, should, to the neglect of these, be able to follow her own bent and devote herself to business and even public affairs; finally economic, whereby the woman even without the knowledge and against the wish of her husband may be at liberty to conduct and administer her own affairs, giving her attention chiefly to these rather than to children, husband and family. (Casti Connubii, no.74) This, however, is not the true emancipation of woman, nor that rational and exalted liberty which belongs to the noble office of a Christian woman and wife; it is rather the debasing of the womanly character and the dignity of motherhood, and indeed of the whole family, as a result of which the husband suffers the loss of his wife, the children of their mother, and the home and the whole family of an ever watchful guardian. More than this, this false liberty and unnatural equality with the husband is to the detriment of the woman herself, for if the woman descends from her truly regal throne to which she has been raised within the walls of the home by means of the Gospel, she will soon be reduced to the old state of slavery (if not in appearance, certainly in reality) and become as amongst the pagans the mere instrument of man.” (Casti Connubii, no.75)

36 Liebard, xx.
with the functioning of a natural faculty. As such, therefore, it may not be done under any circumstances.”

Regarding the problem of over-population, Handren explains Pius XI’s encyclical as even though the ends and intentions to prevent over-population are good, “the end can never justify the means” and good cannot come from evil. In other words, according to the teaching of Pius XI, to use contraception for solving the problem of population cannot be justified because the contraception as a mean is already intrinsically evil in the Catholic traditional view.

**Pope Pius XII: Address to Midwives on the Nature of Their Profession (Allocation to the Italian Midwives) 1951**

After Pope Pius XI died in February 1939, and Pope Pius XII was elected as a pope in March 1939, World War II began on September 1st 1939. During the war (1939-1945), Pope Pius XII organized an information office in the Vatican to help prisoners of war and refugees. After the war, Pius XII advocated peace and reconciliation and focused on material aid nationwide. Regarding his social teachings and theology, he supported medical professionals and researchers and developed theology of family and human sexuality such as family roles, sharing of household duties, education of children, conflict resolution, financial dilemmas, psychological problems, illness, taking care of older generations, unemployment, marital holiness and virtue, common prayer, religious discussions.

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38 Ibid., 105.  
In *Casti Connubii*, even though Pius XI “suggested the possibility that the deliberate limitation of intercourse to infertile periods might also be right,” the terminology or concept of the periodic continence (called the rhythm method) was not mentioned clearly in his encyclical. However, “Pius XII ended the confusion on October 29, 1951, in his speech to a group of Italian midwives and in another talk a month later that added some further clarifying remarks, by explicitly permitting the deliberate limitation of conjugal intercourse to infertile periods as long as there was a serious reason for postponing or avoiding children.” In other words, in 1951, for the first time in history of the Catholic Church, the Pope, Pius XII gave “public, explicit, and official approval for the practice of periodic abstinence.” Pius XII presents reasons as ones that would permit a couple to practice the rhythm method as “serious motives, such as those which not rarely arise from medical, eugenic, economic and social so-called ‘indications,’ may exempt husband and wife from the obligatory, positive debt for a long period or even for the entire period of matrimonial life... it follows that the observance of the natural sterile periods may be lawful, from the moral viewpoint: and it is lawful in the conditions mentioned.”

Regarding the ends of marriage, in his speech, Pius XII confirms the traditional official teaching of the previous popes as procreation for the primary end and the

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41 Ibid.


43 Pius XII, *Address to Midwives on the Nature of Their Profession*, October 29, 1951.
conjugal love for the secondary end of marriage. He condemns the opposite opinions as follows:

It could not admit the opinion of some recent authors who denied that the primary end of marriage is the procreation and education of the offspring, or teach that the secondary ends are not essentially subordinated to the primary end, but are on an equal footing and independent of it.\(^{44}\)

Regarding human sexuality, especially the meaning of the conjugal act, following the teaching of Pius XI, Pius XII also describes the conjugal act as positive and a blessing in an experience of pleasure and happiness of body and spirit. He says:

… for the preservation and propagation of the human race, has also decreed that in this function the parties should experience pleasure and happiness of body and spirit. Husband and wife…by seeking and enjoying this pleasure do no wrong whatever…The right rule is this: the use of the natural procreative disposition is morally lawful in matrimony only… For the pleasure is subordinate to the law of the action whence it derives, and not vice versa—the action to the law of pleasure.\(^{45}\)

Pius XII addresses that husband and wife should experience pleasure and happiness in body and spirit, and in seeking and enjoying this pleasure, therefore, couples do nothing wrong. Also, he emphasizes the personal values of intercourse, and “the self-donation of the spouses had been championed by him as a value of coitus.”\(^{46}\)

With regard to the development of the meaning of the conjugal act in the Church official teachings, David Kelly says that since Pius XI “conjugal intercourse is seen as good, as a way to increase love as well as to propagate the species” for all popes.\(^{47}\) In

\(^{44}\) Ibid.

\(^{45}\) Ibid.

\(^{46}\) Noonan, *Contraception*, 500.

\(^{47}\) Kelly, 102.
addition, Pope Pius XII describes the goodness of sexual intercourse as the expression of the reciprocal gift, which effects the union in one flesh alone, and since him, the coitus is linked to pleasure and happiness. This is an important change on the meaning of the conjugal act itself in the Roman Catholic tradition since Augustine.

Therefore, in the teaching of Pius XII, although sexual intercourse for the unity of spouses is the secondary end for marriage and it is subordinated to the primary end (the generation and education of children), since him, “pleasure and happiness” is linked to the goodness of coitus for the first time in the Roman Catholic Church tradition, and he approves “the observance of the natural sterile periods” to avoid procreation (the rhythm method) as a lawful act.


**Pope John XXIII: Opening the Prospects of Change: Exploring the Signs of the Times**

After Pope Pius XII died in October 9th 1958, Pope John XXIII (1958-1963) was elected as a pope in October 28th 1958 and became one of the most respected popes not only in the Church, but also throughout the world.\(^{48}\) John XXIII wanted to respond to the rising global population problem and to the specific concerns relating to the birth control controversy in the Church because there had been doubts and dissents about the unchangeable infallibility of traditional Catholic teaching on the morality of artificial contraception inside the Church.\(^{49}\)

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\(^{49}\) Ruether, 43.
In March 1962, six months before the Vatican Council II was opened, Cardinal Leo Joseph Suenens of Brussels contacted to Pope John XXIII and strongly recommended the Pope “to form a small commission to study the birth control issue in depth.” Suenens and John XXIII found out the Council would not deal with the birth control issue with “the newer personalist approaches” or “any recognition of the ferment occurring in the Church over birth control.” They assumed, rather, the Council would follow and reaffirm the traditional Church teachings ignoring the signs of the times. So, John XXIII agreed with Suenens of the need to form a commission separated from the Council to deal with the birth control issue and population problem in the Church, and the Pope wanted to study the subject of questions about the traditional official teaching against artificial contraception. Suenens “handpicked the first six members of the commission, which included a demographer, a sociologist, and economist, and two medical doctors.”

Therefore, the first Birth Control Commission meeting was held on October 12-13 in 1963 sadly four months after Pope John XXIII died in June 1963. Pope John XXIII was a historic and much loved Pope because he convoked the Second Vatican Council in

50 Ibid.
52 Ibid.
53 Ruether, 43.
54 McClory, 41.
1962 to have a dialogue between the Church and the modern world.\textsuperscript{55} He intended to reform the Roman Catholic Church with opening “the door of the Catholic Church to other religions and also to the world.”\textsuperscript{56} His vision was toward the “world peace in the universal family of humanity.”\textsuperscript{57} Sadly John passed away in the middle of the Council.

The Second Vatican Council was the twenty-first Ecumenical Council of the Roman Catholic Church and it was organized with four sessions. The Council was a watershed in modern Catholic history. It engaged a new vision of the role of the Church in modern life, a radical focus on ecumenism, refinement of the Catholic ecclesiology, the renewed role of the Bishopric, a reinterpretation of the liturgy with a focus on encouraging lay participation, and a modern approach to Scripture and divine revelation with a new interpretation.\textsuperscript{58}

**Pope Paul VI: The Council and *Gaudium et spes***

After Pope John XXIII died in the middle of the Second Vatican Council and just before the Birth Control Commission’s first meeting, Pope Paul VI (1963-1978) re-opened the Council and completed in 1965. Pope Paul VI followed the request of the

\textsuperscript{55} The Second Vatican Council was opened “under Pope John XXIII in 1962 and closed under Pope Paul VI in 1965. Four future pontiffs took part in the Council’s opening session: Cardinal Giovanni Battista Montini, who on succeeding Pope John XXIII took the name of Paul VI; Bishop Albino Luciani, the future Pope John Paul I; Bishop Karol Wojtyła, who became Pope John Paul II; and 35-year-old Father Joseph Ratzinger, present as a theological consultant, who more than 40 years later became Pope Benedict XVI,” accessed November 02, 2012, http://www.newworldencyclopedia.org/entry/Vatican_II.


\textsuperscript{57} Ibid.

predecessor, Pope John XXIII for ecumenical orientation, fostering dialogue with the world, especially with non-Christians, and implementation of Church reform.  

Pope Paul VI continued the Birth Control Commission and expanded its members including more laity and married couples such as from six male members at the first to fifty-eight members at the end from all parts of the world including thirty-four laypersons, five women, and three married couples.  

In the middle of the Papal Birth Control Commission, specifically, after nine months from the fourth Commission meeting in March 1965, the Pastoral Constitution on the Church in the Modern World (Latin: *Gaudium et spes*), was promulgated on December 7th 1965, the day the Council ended. It was one of the four Apostolic Constitutions resulting from the Second Vatican Council. The document, *Gaudium et spes* takes a view of the Catholic Church's teachings about humanity's relationship to society, especially in reference to economics, poverty, social justice, culture, marriage and family, science, technology, ecumenism, politics, and international peace.

Regarding the chapter on marriage in *Gaudium et spes*, there were long disputes in the Council’s Mixed Commission, which was composed of bishops and experts from several other commissions. One of the representative experts was Bernard Häring, who was a German Roman Catholic theologian, Redemptorist priest, and the best known Catholic moral theologian in the world. Also, Häring was appointed personally by Pope

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60 Sidney Callahan, “Foreword,” in McClory, viii.

61 McClory, 78.
Paul VI himself as a member of the Papal Birth Control Commission from the second meeting in 1964. After the fourth meeting of the Papal Birth Control Commission in March 1965, on November 1965 before Gaudium et spes was promulgated, there were long controversies on the progression and discussion regarding a text of marriage in the Gaudium et spes such as the ends of marriage as primary and secondary and the text implicitly denied the intrinsic evil of contraception.

On the delicate issue of artificial contraception, the Council’s Mixed Commission handed over it to the Birth Control Commission. However, there were claims and arguments from the conservatives such as John Ford and Cardinal Alfredo Ottaviani, who was the head of Holy office and the chair of the Council’s Mixed Commission, and they defended the faith regarding the ends and meaning of marriage and denied contraception as an intrinsic evil act. Nevertheless, the Second Vatican Council assembly approved the latest draft on marriage, which described that there was no hierarchy as the primary and secondary ends of marriage. Since then, the conservative minorities, specifically, Ford and Ottaviani tried to persuade Pope Paul VI by their “fervor and arguments.”

Thus, secret and private communication between Paul VI and the minorities of the Birth Control Commission and the Pope’s struggles already started at the Council and during the Commission.

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63 Ibid., 80-85.
64 Ibid., 77-85.
65 Ibid.
In regard to the detailed text on marriage in the document of the Council, *Gaudium et spes* mentions the concept of “married love” (conjugal love) as friendship, mutual self-giving, and the good of the children. In other words, these are the goods of the conjugal act. While prior to Pius XII, marriage and the conjugal act became almost synonymous, Pius XII clarifies the meaning of the conjugal act itself as “the expression of the reciprocal gift,” and he connects the conjugal act to pleasure and happiness with emphasizing its subordination to the primary end, procreation. In *Gaudium et spes*, the meaning of conjugal love is clarified and specified from marriage, for instance, “the actions within marriage” or “ends of marriage and conjugal love,” thus marriage and conjugal love are not mentioned synonymously any more. The document expresses:

This love…the expressions of body and mind with a unique dignity, ennobling these expressions as special ingredients and signs of the friendship distinctive of marriage. This love God has judged worthy of special gifts, healing, perfecting and exalting gifts of grace and of charity. . . This love is uniquely expressed and perfected through the appropriate enterprise of matrimony. The actions within marriage by which the couple are united intimately and chastely are noble and worthy ones . . . (*GS* n.49) Marriage and conjugal love are by their nature ordained toward the begetting and educating of children. . . (*GS* n.50)

In fact, prior to *Gaudium et spes*, Church documents had ranked the purposes of marriage as primary (procreation) and secondary (mutual love). However, in *Gaudium et spes*, two purposes of marriage and the conjugal act were not mentioned hierarchically; rather the two ends were expressed equally valuable and always related to each other. It describes:

As a mutual gift of two persons, this intimate union and the good of the children impose total fidelity on the spouses and argue for an unbreakable oneness between them. (*GS* n. 48) . . . Marriage to be sure is not instituted

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66 *Gaudium et spes*, no. 49-50.
solely for procreation; rather, its very nature as an unbreakable compact
between persons, and the welfare of the children, both demand that the
mutual love of the spouses be embodied in a rightly ordered manner, that
it grow and ripen. Therefore, marriage persists as a whole manner and
communion of life, and maintains its value and indissolubility, even when
despite the often intense desire of the couple, offspring are lacking. (GS,
n.50)

Regarding the subject of birth control, Gaudium et spes indicates the necessity of
the regulation of birth for harmonizing between conjugal love and the responsible
transmission of life, and with realizing various circumstances of the family in the modern
world. It says:

Parents should regard as their proper mission the task of transmitting
human life and educating those to whom it has been transmitted… Let
them thoughtfully take into account both their own welfare and that of
their children, those already born and those which the future may bring.
For this accounting they need to reckon with both the material and the
spiritual conditions of the times as well as of their state in life.(GS, n.50)

With recognizing the necessity of the regulation of birth in marriage, the
encyclical warns married couples to avoid actions that are “blameworthy by the teaching
authority of the Church.”67 It says:

Hence when there is question of harmonizing conjugal love with the
responsible transmission of life, the moral aspects of any procedure does
not depend solely on sincere intentions or on an evaluation of motives, but
must be determined by objective standards. These, based on the nature of
the human person and his acts, preserve the full sense of mutual self-
giving and human procreation in the context of true love… Relying on
these principles, sons of the Church may not undertake methods of birth
control which are found blameworthy by the teaching authority of the
Church in its unfolding of the divine law. (GS, n. 51)

Although Gaudium et spes mentioned the regulation of birth, it was silent on birth
control morality such as distinguishing between acceptable and unacceptable forms of

67 Ibid., no.51.
birth control. The reason lay in how during the Second Vatican Council, the Papal Birth
Control Commission was studying for the subjects, population, family, and births.
Therefore, the document of the Council had to hand over the answer to the Commission
and did not intend to “propose immediately concrete solutions.”

The Documents of the Papal Birth Control Commission (1966)

An important book written by Robert McClory, Turning Point: The Inside Story
of the Papal Birth Control Commission, and How Humanae Vitae Changed the Life of
Patty Crowley and the Future of the Church, tells about the complex history of the
Commission and its role in what became a highly controversial ratification by Pope Paul
VI of the Church’s historic condemnation of artificial birth control.

Between 1963 and 1966, there were six meetings of the Papal Birth Control
Commission during and after the Second Vatican Council. After the Second Vatican
Council finished in December 1965, in May 1966 the three most important papers in the
Commission were written and submitted to Pope Paul VI: “Schema for a Document on
Responsible Parenthood” (conventionally, it is called now “the Majority Report”),
“Summary Document on the Morality of Birth Control” (it is called now “the Majority
Rebuttal”), and “The State of Question: The Doctrine of the Church and Its Authority” (it
is called now conventionally “the Minority Report”). Hereafter, I will continue to refer
to the three documents with the conventional terms: the Majority Report, the Majority
Rebuttal, and the Minority Report.

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68 Genovesi, 190.
69 McClory, 109-110.
The official report, “the Majority Report” was not agreed to unanimously in the Commission. Three days before the Majority Report was submitted, on May 23\textsuperscript{rd} 1966 the Minority Report was handed unofficially to Henri de Riedmatten\textsuperscript{70} (who was the Commission group’s executive secretary from the beginning). It was written by John Ford (who was a member of the Birth Control Commission) with Germain Grisez (who was a friend of Ford, but not a member of the Commission) and signed by Ford, Visser, Zalba, and de Lestapis (they were members of the Commission) and supported by Cardinal Ottaviani (who was a president of the Holy Office, Rome, Italy in 1966 and the Commission’s president at the final session). The Minority Report represented the opposing view to the official report, the Majority Report, and it called for the Church’s continued condemnation of birth control.

On May 26\textsuperscript{th} 1966 the official report, the Majority Report was submitted to de Riedmatten. After the Minority Report was turned, five days later, on May 28\textsuperscript{th}, the Majority Rebuttal was turned as a responding to the Minority Report.\textsuperscript{71}

After that, on June 28\textsuperscript{th} 1966, three days after the Commission disbanded, Cardinal Julius Doepfner (who was the Commission’s vice president during the final session) and de Riedmatten personally presented the results of the work of the Commission to Pope Paul VI, which were the two documents representing the

\textsuperscript{70} Henri de Riedmatten was a Swiss Dominican priest, “a kind of roving ambassador and observer on behalf of the Holy See in variety of venues including the United Nations headquarters in Geneva.” McClory, 39.

\textsuperscript{71} McClory, 109-115.
Commission’s official legacy: “the Majority Report” written by the theologians with the “Pastoral Introduction” written by Bishop Dupuy.\textsuperscript{72}

Through the Majority Report, the Birth Control Commission recommended that “the received tradition be changed. Contraception should not be considered an intrinsically evil act. If married couples had the kind of serious reasons that Pope Pius XII had said were enough to allow deliberate periodic abstinence, then these reasons ought to be enough to allow other methods as well.”\textsuperscript{73} Despite the official Majority Report, the unofficial report (the Minority Report) “convinced the pope [Paul VI] that the church could not have erred for centuries and that when the good of procreation is blocked by contraception, the integrity of the sexual act is violated.”\textsuperscript{74}

According to Julie Hanlon Rubio, Robert McClory describes “the crucial roles played by Pat and Patty Crowley, leaders of the Christian Family Movement, whose testimony was influential in pushing the majority of the commission toward acceptance of artificial birth control.”\textsuperscript{75} Pat and Patty Crowley brought three thousand letters to the meetings of the Commission, which were solicited from Catholic married couples from eighteen countries through the international network of the Christian Family Movement.\textsuperscript{76} According to the surveys of Catholic married couples by Christian Family

\textsuperscript{72} Ibid., 129.

\textsuperscript{73} Kelly, 103-104.


\textsuperscript{75} Ibid.

\textsuperscript{76} McClory, ix.
Movement in 1965-66, “only 28 percent claimed it [rhythm] was helpful in absolutely no way...some 78 percent (including therefore a great number who had found rhythm at least somewhat helpful) claimed it had also harmed their relationship due to tension, loss of spontaneity, fear of pregnancy, etc… only 22 percent could cite no harmful effects.”  

In the end of the vote in the Commission, “the vote was reported to be 52 to 4 for reform; the majority’s report recommending change was sent to Pope Paul VI.”  

However, conservative Vatican officials such as Cardinal Ottaviani and his four supporters on the Commission opposed the change from the Majority Report, and contacted Pope Paul VI secretly by submitting their views in an unofficial document, later dubbed the Minority Report.  

In short, Pope Paul VI accepted the three year long efforts and wisdom of the Papal Birth Control Commission’s finding endorsed by an overwhelming majority of its members—fifty eight-- calling the church to end its condemnation of artificial birth control, but he opted rather to embrace the reasoning held forth in the unofficial document written and signed by four minorities which was an end run around the official Commission procedures and was submitted secretly and privately. He sided with the traditionalists and soon promulgated *Humanae vitae* ratifying the Church’s continued condemnation of artificial birth control. One can only suspect that had Pope John XXIII...
been alive he might well have honored the finding of his commission and accepted the call of the Majority Report to end the Church’s condemnation of birth control. That would have allowed the Church to move on with history. However, Pope Paul VI went with the secret back-door communication. The reason could be suspected that he just felt the Church would lose too much credibility in the eyes of the parishioners if it was seen as changing its mind. So it dug in deeply into tradition and triggered a huge controversy.

According to the McClory’s book, when *Humanae vitae* was promulgated, there was a huge controversy—widespread protests, shocks, disappointments, and dissents among theologians, bishops, Catholic organizations, and outcries from individuals. 80 McClory reports Bernard Häring’s statement, about how even though Pope Paul VI was impressed with the Majority Report and attracted by its conclusions, after two meetings with Ottaviani and Lio (who were supporters for the Minority Report), the Pope rejected the official document, the Majority Report. 81

According to Sidney Callahan, Pope Paul’s reaffirmation of the Church’s long-standing condemnation of birth control triggered widespread dissent from this strong and dramatic exertion of papal moral teaching. As Callahan puts it: “since many priests and bishops do not assent to *Humanae Vitae* but yet fear to voice their convictions in public, a veil of hypocrisy covers the issue. The married laity, with the backing of theologians and their parish priests, simply accept and practice contraception. Don’t ask, don’t tell, is the

80 Ibid.

81 Ibid., 130.
order of the day.”

Regarding the event of the Papal Birth Control Commission, Rosemary Radford Ruether, a noted feminist Catholic theologian, argues that “they failed to consider that confidence in the church’s teaching authority might be restored if the official church acknowledged its teaching could adapt to new information and social conditions.”

In regard of the vision of Pope Paul VI’s two tasks on the Vatican Council II and the Birth Control Commission as succeeding Pope John XXIII, Paul VI seemed to follow John XXIII’s request and intention mostly for the Council. However, his work for the Commission seemed to go against the will of John XXIII by reaffirming the traditional Church teaching with condemnation of contraception.

**Schema for a Document on Responsible Parenthood - The Majority Report.**

The authors of the Majority Report were “the Rev. Joseph Fuchs, a German Jesuit teaching at the Gregorian University in Rome; the Rev. Raymond Sigmond, a Hungarian Dominican, president of the Institute of Social Science of the Pontifical University of St. Thomas Aquinas; the Rev. Paul Anciaux, a professor at the major seminary of Malines-Brussels, Belgium; the Rev. A. Auer, a specialist in sexual questions, Wurzburg Germany; the Rev. Michel Labourdette, O.P., theologian from Toulouse, France, and the Rev. Pierre do Locht of the National Family Pastoral Center, Brussels. Thirteen other theologians and several experts from other fields also signed the document.”

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82 Callahan, x.
83 Ruether, 46.
84 McClory, 171.
The Majority Report responded to the question of responsible parenthood, an issue that, as we saw, the Pastoral Constitution on the Church in the Modern World (Gaudium et spes) did not directly take on or clarify. The Majority Report indicated “the facts of social changes” in marriage, family, the role of woman, new scientific knowledge in biology, psychology, sexuality, and demography, the meaning of human sexuality, and the meaning of conjugal relations. In addition, the Report emphasized the totality of married life as the frame for understanding and evaluating the morality of marital sexuality, responsible parenthood, and birth control as follows:

*Responsible parenthood* - that is, generous and prudent parenthood- is a fundamental requirement of a married couple's true mission... To save, protect and promote the good of the offspring, and thus of the family community and of human society, the married couple will take care to consider all values and seek to realize them harmoniously in the best way they can... In today's situation both because of new difficulties and because of new possibilities for the education of children, couples are hardly able to meet such demands unless with generosity and sincere deliberation... They need the help of all in order that they can fulfill their responsibilities with full liberty and in the most favorable material, psychological, cultural and spiritual conditions. (Part I, ch.II, n.1)

With regard of the regulation of conception, the Report argues that in considering social changes in matrimony and the family and in the totality of married life “toward the realization of the authentic values of a fruitful matrimonial community,” the regulation of conception “by using decent and human means” and “artificial intervention” are permissible morally. It describes as “for it is natural to man to use his skill in order to put under human control what is given by physical nature.” It says:

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86 Ibid.
The regulation of conception appears necessary for many couples who wish to achieve a responsible, open and reasonable parenthood in today's circumstances. If they are to observe and cultivate all the essential values of marriage, married people need decent and human means for the regulation of conception... It is proper to man, created to the image of God, to use what is given in physical nature in a way that he may develop it to its full significance with a view to the good of the whole person... (Part I, ch.II, n.2)... ordered to favoring fecundity in the totality of married life and toward the realization of the authentic values of a fruitful matrimonial community... social changes in matrimony and the family, especially in the role of the woman; lowering of the infant mortality rate; new bodies of knowledge in biology, psychology, sexuality and demography; a changed estimation of the value and meaning of human sexuality and of conjugal relations... (Part I, ch III)

The document suggested the objective criteria of morality that “a couple ought to follow if they decide to limit offspring: the method should not cause a loss of physical or psychic health, should be conducive to the personal dignity of the couple, and should not be carried out in an ‘egoistic or hedonistic’ manner.” It describes:

let couples form a judgment which is objectively founded, with all the criteria considered... They should, however, to the extent possible, be instructed about the criteria by competent persons and be educated as to the right application of the criteria... they will prudently and serenely decide what is truly for the good of the couple and of the children, and does not neglect their own personal Christian perfection... (Part I, ch.IV, n.2)

By following the teaching of the fundamental principles from Gaudium et spes and having a similar view and attitude toward the modern world with Gaudium et spes, the Majority Report explains and develops what Gaudium et spes missed and clarifies its ambiguous points. Also in summary, the report insists that artificial intervention for the regulation of birth is needed for married people in the understanding of responsible parenthood in today’s circumstances.

87 McClory, 114.
The State of the Question: The Doctrine of the Church and Its Authority – The

Minority Report. The authors of the Minority Report were Rev. John Ford, S.J., theologian, Washington, D.C. and Germain Grisez, a professor of philosophy at Georgetown University. Grisez was not a Commission member. The Report was signed by four Commission members; Ford, Rev. Jan Visser, C.SS.R., theologian, Rome, Italy; Rev. Marcelino Zalba, S.J., theologian, Rome, Italy; and Rev., Stanislas de Lestapis, S.J., sociologist Paris, France. The four signers took part in the final session of the Papal Birth Control Commission with the views of the conservative minority among the theologians.

At the beginning of the Minority Report, the authors cite papal statements by Popes Pius XI, Pius XII and John XXIII. Then, they present and explain why the Church cannot change her answers on moral matters throughout history. According to the Report, the Church could not have erred and the Church teaching is irreformable and infallible, especially in sexual matters. It says:

…the answer of the Church has always and everywhere been the same, from the beginning up to the present decade. One can find no period of history, no document of the church, no theological school, scarcely one Catholic theologian, who ever denied that contraception was always seriously evil. The teaching of the Church in this matter is absolutely constant… (Minority Report, B. n.3)

McClory criticizes the Minority Report and holds that “Ford’s offensive was not based essentially on proofs from the natural law because, he admitted, such proofs do not exist.”\(^88\) As Ford puts it in the Minority Report:

If we could bring forward arguments which are clear and cogent based on reason alone, it would not be necessary for our commission to exist, nor

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\(^88\) Ibid., 111.
would the present state of affairs exist in the Church as it is. (Minority Report, D)

The authors of the Minority Report held they were trying to synthesize and express the Catholic philosophy and theology which has undergirded the Church’s perennial teaching. It says:

For if an act is rarely generative, then one must exert care that it might produce its effect, while the expression of union which is constantly present could be more easily omitted in particular cases (for example, to procure fecundation artificially if it could not otherwise be obtained)… There can be no contradiction between what Catholic teaching wished to signify through the term ‘procreation-education' and which from the 16th century was commonly designated as a primary end of marriage, and the biology and physiology of the sexual act freely exercised… Indeed, that good can be obtained in another way-this is something which the contraceptive theory is always silent about-for conjugal love is above all spiritual (if the love is genuine)… (Minority Report, Philosophical Foundations and Arguments of Others and Critique, B, n.5)

The Minority Report presented the reasons why the Church cannot change her previous traditional answers, and it emphasized the irreformability of the Church’s teaching and the Magisterium’s authority. The report also worried about how a change in this teaching might lead to changes in sexual morality of a wider nature as the change proposed by the majority might well open the door to other deviations including extramarital and premarital sex, homosexuality, masturbation, and sterilization. The Minority Report did not treat the issues and questions which the Commission raised, but

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90 Kelly, 103-104.
“it simply asserted the church’s static, unchangeable teaching authority.” Rosemary Radford Ruether criticizes the authors of the Minority Report as “they failed to consider that confidence in the church’s teaching authority might be restored if the official church acknowledged its teaching could adapt to new information and social conditions.”

The two main factors of the Majority Report, the significance of “the social changes” and “the principle of totality” in matrimony were treated in the Minority Report as uncompelling in the face of the Church teaching’s authority and hierarchical magisterium’s established authority and role.

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91 Ruether, 45.

92 Ibid., 46.

93 With regard to the principle of totality, in the general notion, because parts are ordered for the good of the whole, they may be disposed of for the good of the whole. In the application to human person, destroying an organ or interfering with its capacity to function prevents the organ from achieving its natural purpose. With combining his Roman Catholic faith and the philosophy of Aristotle, St. Thomas Aquinas developed the principle as one of his moral principles. According to Aquinas, “since a member is part of the whole human body, it is for the sake of the whole, as the imperfect for the perfect. Hence a member of human body is to be disposed of according as it is expedient for the body... as the whole of man is directed as to his end to the whole of the community of which he is a part, ... it may happen that although the removal of a member may be detrimental to the whole body, it may nevertheless be directed to the good of the community... (Summa Theologica IIa-IIae Q.65 Art.1). Later, in September 14, 1952 Pope Pius XII gave an address to the First International Congress on the Histopathology of the Nervous System regarding “the moral limits of medical research and treatment.” In the address, Pius XII discussed the principle of totality at length and the principle of totality has become a part of medical ethics. According to his address, “by virtue of the principle of totality, by virtue of his right to use the services of his organism as a whole, the patient can allow individual parts to be destroyed or mutilated when and to the extent necessary for the good of his being as a whole. He may do so to ensure his being's existence and to avoid or, naturally, to repair serious and lasting damage which cannot otherwise be avoided or repaired.” Accessed November 09, 2012, http://www.ewtn.com/library/PAPALDOC/P12PSYCH.htm. Since then, the principle of totality has been used in the Church encyclicals and documents, for instance, in the Majority Report (1966) and Humanae vitae (1968), the principle of totality was used for the morality of birth control in marriage for responsible parenthood and the totality of married life.
The Contemporary Church Teachings and Practice on Contraception

Pope Paul VI: *Of Human Life (Humanae vitae) 1968*

Before Pope Paul VI promulgated *Of Human Life* (Latin: *Humanae vitae*), he consulted the Papal Birth Control Commission and the National Congress of the Italian Women’s Center. In February 1966, Paul VI expressed the complexity and delicacy of the birth control issue and the works by the Birth Control Commission at the 13th National Congress of the Italian Women’s Center before he received the Papal’s Commission reports in June 1966. In his speech, Pope Paul VI noted “the Church’s need for caution and careful study in its attempt to teach the people of God,” and he said: “The magisterium of the Church cannot propose moral norms unless it is sure that it is interpreting God’s will…the Church is not excused from carrying out research nor from examining all the many questions proposed for its consideration from every corner of the world. Sometimes these operations take a long time and are anything but easy.”

Through the speech at the center, Paul VI expressed his sentiments on the issue of the birth control and the commission’s suggestions.

Two years after the disbandment of the commission, on July 25, 1968 Paul VI promulgated the encyclical *Humanae vitae* to respond to the issue and question which the Papal Birth Control Commission had been already dealt with. Even though Pope Paul VI received the official report, the Majority Report as a result of a three years long journey,

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94 Genovesi, 190-191.

95 Ibid., 191.

96 *Address of Pope Paul VI to Participants in the 13th National Congress of the Italian Women’s Center*, February 12, 1966; its full text is found in Liebard, 288-295, at 290.
he was persuaded to reject the report in good part by a few conservative commission members at the last moment of the commission. Eventually, he rejected the result of the Majority Report by condemning artificial contraception as an intrinsically evil act and maintained that “there can be no change in the Church’s opposition to the use of artificial contraceptives.”

Although Pope Paul VI rejected the Majority Report and was persuaded by the conservative commission members with the Minority Report, many theologians and reporters learned that “Humanae vitae was not a mere rehash of Casti Connubii or Ford’s Minority Report…The tone was similar to that of Gaudium et spes, the Council’s Pastoral Constitution on the Church in the Modern World.” As mentioned above, the Majority Report quotes many parts from the Council document, Gaudium es spes, such as the fundamental principles and follows its view and attitude toward the modern world. In other words, ironically, even though Pope Paul VI rejects the Majority Report and adopts the Minority Report, his encyclical, Humanae vitae seems to share and build upon many common values and concerns expressed both in Gaudium et spes and the Majority Report.

While Gaudium et spes removes the hierarchical ranking of the two ends of marriage and conjugal love for the first time among the encyclicals and it suggests the two ends are equally valuable, Humanae vitae develops the affirmation of the equality of the two ends by using the terms “unitive” and the “procreative” purposes, and stresses that the unitive purpose (mutual love union between a husband and a wife) and the

97 Genovesi, 191.
98 McClory, 138.
procreative purpose (procreation and education of children) are equally meaningful and at the same time are absolutely inseparable in “each and every marital act.” In other words, *Humanae vitae* indicates that the conjugal act should always be open to procreation and it condemns artificial birth control as an intrinsically evil act and rejects any changes of the traditional church teachings on birth control. *Humanae vitae* does note that the rhythm method of natural family planning is permissible for Catholics because it does not interfere with natural processes but rather is in accord with natural rhythms and reproductive processes. I will present in detail the encyclical’s understanding of conjugal love and contraception.

Regarding married love, *Humanae vitae* follows and develops the teaching of *Gaudium et spes* without hierarchically ranking procreation over marital union. It describes that conjugal love between a husband and a wife is a very special form of personal friendship and at the same time it is naturally fecund as follows:

…husband and wife become in a way one heart and one soul, and together attain their human fulfillment… very special form of personal friendship in which husband and wife generously share everything, allowing no unreasonable exceptions and not thinking solely of their own convenience… content to be able to enrich the other with the gift of himself… this love is fecund… it also contrives to go beyond this to bring new life into being. "Marriage and conjugal love are by their nature ordained toward the procreation and education of children. Children are really the supreme gift of marriage and contribute in the highest degree to their parents' welfare." (*HV*, no. 9)

On the subject of responsible parenthood, the encyclical adopts the concept from the Majority Report and responds as the below:

With regard to physical, economic, psychological and social conditions, responsible parenthood is exercised by those who prudently and

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99 *Humanae vitae*, no.11.
generously decide to have more children, and by those who, for serious reasons and with due respect to moral precepts, decide not to have additional children for either a certain or an indefinite period of time… the exercise of responsible parenthood requires that husband and wife, keeping a right order of priorities, recognize their own duties toward God, themselves, their families and human society. (HV, no.10)

According to *Humanae vitae*, the marriage act has the unitive and the procreative purposes and the two ends should be connected inseparably. In other words, each and every marital act should be open to procreation potentially. It describes as the below:

> The Church…teaches that each and every marital act must of necessity retain its intrinsic relationship to the procreation of human life… between the unitive significance and the procreative significance which are both inherent to the marriage act… the unitive and the procreative, is preserved, the use of marriage fully retains its sense of true mutual love and its ordination to the supreme responsibility of parenthood to which man is called. (*HV*, no.11-12)

With respect to birth control methods, the encyclical condemns all direct interruption of the generative process including artificial birth control, direct abortion and direct sterilization as follows:

> . . . the direct interruption of the generative process already begun and, above all, all direct abortion, even for therapeutic reasons, are to be absolutely excluded as lawful means of regulating the number of children. Equally to be condemned... is direct sterilization. . . Consequently, it is a serious error to think that a whole married life of otherwise normal relations can justify sexual intercourse which is deliberately contraceptive and so intrinsically wrong. (*HV*, no.14)

By supporting Natural Family Planning and rejecting artificial birth control, Pope Paul VI responds to the Majority Report’s logic in their support of the allowance of artificial contraceptives. He says that “neither the Church nor her doctrine is inconsistent when she considers it lawful for married people to take advantage of the infertile period but condemns as always unlawful the use of means which directly prevent conception,
even when the reasons given for the later practice may appear to be upright and serious."

He says:

If therefore there are well-grounded reasons for spacing births, arising from the physical or psychological condition of husband or wife, or from external circumstances, the Church teaches that married people may then take advantage of the natural cycles immanent in the reproductive system and engage in marital intercourse only during those times that are infertile, thus controlling birth in a way which does not in the least offend the moral principles... it is equally true that it is exclusively in the former case that husband and wife are ready to abstain from intercourse during the fertile period as often as for reasonable motives the birth of another child is not desirable. (HV, no.16)

In stressing the inseparability of the two ends of married love in each and every marital act, *Humanae vitae* follows the lead of the Second Vatican Council’s *Gaudium et spes* by no longer speaking of a hierarchical ranking between procreation and conjugal love. In addition, with condemning artificial birth control methods, *Humanae vitae* suggests that Natural Family Planning (a term not used in the document) using infertile periods in accord with responsible parenthood and the principle of totality for marriage and family. As I mentioned before, even though Paul VI rejects the conclusion of the Majority Report and adopts the general position of the Minority Report, Pope Paul VI’s reasoning in *Humanae vitae* seems to give evidence of sharing many of the general concerns about “responsible parenthood” and of the “totality of the married life” expressed in the Majority Report.

Pope John Paul II’s Approach to Contraception

After Pope Paul VI died on August 6th 1978, John Paul I became pope on August 26th 1978, but his papacy lasted only thirty three days because he died suddenly with a

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100 Paul VI, *Humanae vitae*, no.16.
heart attack. His reign is among the shortest in papal history. After the death of John Paul I, Cardinal Karol Wojtyla of Poland became Pope John Paul II and he went on to have the second longest reign as Pope in the history of the Church. Pope John Paul II was the first non-Italian pope since 1523.

Pope John Paul II was a forceful Pope and he spoke out strongly against war, fascism, communism, dictatorships, materialism, abortion, contraception, homosexuality, relativism, and unrestrained capitalism. He often described these as elements of “the culture of death.” John Paul II officially rejected ordaining women to the priesthood. He was one of the most-travelled world leaders in history, visiting 129 countries during his pontificate. In February 2004, John Paul II was nominated for a Nobel Peace Prize. He promulgated fourteen encyclicals, fifteen apostolic exhortations, and many pastoral letters during his papacy. One of his major encyclicals, Laborem Exercens (Latin: On Human Work) was written in 1981, on the occasion of the 90th anniversary of Leo XIII’s encyclical Rerum Novarum (Latin: On the New Things) on the question of labor. In the encyclical, Laborem Exercens, John Paul II develops the concept of human dignity in work and addresses about the issues of labor, capital, property ownership, the indirect employer, rights of workers, and spirituality of work. The other major encyclical, Veritatis Splendor (Latin: The Splendor of Truth) promulgated in 1993 responds to the questions of the Catholic moral theology such as moral relativism, moral authority of the

102 Ibid.
Catholic Church, human freedom, divine law, natural law, the existence of evil, human conscience, mortal sin, and the authority of the magisterium of the Church in guiding humans.\textsuperscript{105}

Before John Paul II reigned as a Pope, when he was Karol Wojtyla, archbishop of Krakow, Poland, he was appointed as a member of the Papal Birth Control Commission for the fifth and final meeting in 1966, however, he declined to attend the Commission because of “a sense of solidarity with the Polish primate, Cardinal Stefan Wyszynski, who had been denied a travel visa by the Polish government.”\textsuperscript{106} Even though John Paul II did not participate in the Birth Control Commission, his standpoint on marriage and sexuality affected Pope Paul VI and his encyclical, \textit{Humanae vitae}.\textsuperscript{107}

John Paul II defends and reinforces the teaching of \textit{Humanae vitae} on human sexuality with his phenomenological personalism and his theological anthropology stressing the “creation, the fall, and redemption of the body.”\textsuperscript{108} According to John S. Grabowski, who stands by John Paul II’s viewpoint, “while much of the teaching of Paul VI in \textit{Humanae vitae} was based on an appeal to the natural law, John Paul II consistently bases his teaching, not only on the dignity of the person, but on biblical


\textsuperscript{106} McClory, 97.

\textsuperscript{107} Ibid.

continually, Grabowski explains the teaching on artificial contraception by John Paul II as follows: Pope John Paul II presents two distinct lines of argument of the Church teaching on artificial contraception: the first is that it constitutes a “violation of the language of the body” as completing the self-giving of the whole person (in his philosophical view).  

The second line is that the Church teaching is not only based on human reason (natural law), but also “the moral order revealed by God.” In fact, John Paul II cites repeatedly how the biblical text itself presents the revelation by God in his encyclicals, lectures, writings, and apostolic exhortations. In his personalist understanding of human sexuality linked to biblical texts, Grabowski says, John Paul II “has provided a new source and more authoritative foundation for the traditional Catholic understanding” of human sexuality, especially in his “theology of the body.” However, regarding the morality of contraception, there are little linked to biblical texts, so John Paul II has to use the Church tradition and teachings with his own interpretation for the subject matter other than the Bible itself.

Charles E. Curran, a revisionist theologian and strong critic of *Humanae vitae*, has a negative view of the “self-giving” theory developed by John Paul II. Curran points out that the Pope places too much emphasis on the individual physical act without


110 Ibid., 77.

111 Ibid.

112 Ibid.
considering “the totality of the relationship between husband and wife.”\footnote{113} He argues that “no one act can ever fully express the total and reciprocal commitment to self-giving of spouses to each other. In addition, marital love includes friendship love and self-fulfilling love, not just self-giving love.”\footnote{114} In short, because of the stresses of self-giving love and reciprocal acts in marital intercourse, Curran argues that the sexual pleasure which can be the main part of self-fulfilling love in the conjugal act seems to be overlooked in the theology of self-giving love by John Paul II’s theology of the body.

While *Humanae vitae* describes the condemnation of artificial contraception from the perspective of traditional natural law theory (*HV* no.11) as an illicit act against the natural development of the generative process, John Paul II explains the immorality of artificial contraception by using his philosophical understanding of the subjectivity of the person. Namely, he stresses the personalist informed concept of self-giving (“self-donation”). In other words, self-giving cannot be accomplished with selfishness. Thus, as he argues, contraception cannot be used because it is intrinsically tied to a selfish purpose. Sex is “self-donation” or self-giving, so sexual intercourse with contraception is not truly self-giving because of “the attitude of selfishly using the other for one’s own gratification.”\footnote{115} In what follows, I will develop Pope John Paul II’s views as he developed them across his long pontificate.


\footnote{114} Ibid.

On the Family (Familiaris consortio), 1981- Apostolic Exhortation. On the Family (Latin: Familiaris consortio) is an Apostolic Exhortation written by Pope John Paul II and promulgated on November 22nd 1981. It describes the meaning and the role of marriage and the Christian family. In Familiaris consortio, John Paul II defines the conjugal act as a personal union in which a husband and a wife give and receive themselves (self-giving) reciprocally. John Paul II in this document stresses the responsibility and expectations of the family regarding the transmission of life and the education of children as the below:

…sexuality, by means of which man and woman give themselves to one another through the acts which are proper and exclusive to spouses, is by no means something purely biological, but concerns the innermost being of the human person as such… The total physical self-giving would be a lie if it were not the sign and fruit of a total personal self-giving, in which the whole person, including the temporal dimension… This totality which is required by conjugal love also corresponds to the demands of responsible fertility. (Familiaris consortio, no.11)

John Paul II describes marriage as the communion of love between God and people, between Jesus Christ and the Church, between a man and a woman, and between parents and children, and he expresses the concept of “love” with linking to the concept of “gift.” In other words, as God gives life to human persons; and as Jesus Christ gives himself as the savior of humanity; so too husbands and wives give themselves to one another; and as parents give fatherhood and motherhood to their children. He describes:

… love is essentially a gift; and conjugal love, while leading the spouses to the reciprocal "knowledge" which makes them "one flesh,"(35) does not end with the couple, because it makes them capable of the greatest possible gift, the gift by which they become cooperators with God for giving life to a new human person. Thus the couple, while giving themselves to one another, give not just themselves but also the reality of children, who are a living reflection of their love, a permanent sign of
conjugal unity and a living and inseparable synthesis of their being a father and a mother. (*Familiaris consortio*, no.14)

Regarding birth control, John Paul II reinforces *Humanae vitae* and the Church authority by condemning artificial contraception as the below:

… the recent Second Vatican Council and the magisterium of my predecessor Paul VI, expressed above all in the Encyclical *Humanae vitae*, have handed on to our times a truly prophetic proclamation, which reaffirms and reproposes with clarity the Church's teaching and norm, always old yet always new, regarding marriage and regarding the transmission of human life... Consequently, any violence applied by such authorities in favor of contraception or, still worse, of sterilization and procured abortion, must be altogether condemned and forcefully rejected. (*Familiaris consortio*, no. 29-30)

John Paul II follows and reaffirms the meaning of human sexuality expressed in *Humanae vitae* by arguing from his own philosophical personalist understanding of sexuality, namely “personal subjectivity.” He says:

… sexuality is respected and promoted in its truly and fully human dimension, and is never "used" as an "object" that, by breaking the personal unity of soul and body… (no. 32) Indeed Christian parents, discerning the signs of God's call, will devote special attention and care to education in virginity or celibacy as the supreme form of that self-giving that constitutes the very meaning of human sexuality… education must bring the children to a knowledge of and respect for the moral norms as the necessary and highly valuable guarantee for responsible personal growth in human sexuality. (no.37) (*Familiaris consortio*, no. 32 and 37)

He stresses the indivisible and indissoluble unity of conjugal communion as follows:

This conjugal communion sinks its roots in the natural complementarity that exists between man and woman, and is nurtured through the personal willingness of the spouses to share their entire life-project, what they have and what they are… Being rooted in the personal and total self-giving of the couple, and being required by the good of the children, the indissolubility of marriage finds its ultimate truth in the plan that God has manifested in His revelation… (*Familiaris consortio*, no. 19-20)

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116 Ibid., 201.
By continuing with the inseparability of the unitive and procreative meanings of conjugal communion, John Paul II condemns artificial contraception as against the value of the total reciprocal self-giving of husband and wife. He goes further to argue that it falsifies the truth of conjugal love which gives itself in personal totality. As Julie Rubio argues: “Eschewing traditional natural law arguments, he promotes NFP as a method that is fully giving because fertility is offered to one's partner and lovingly received, fully human because it allows for transcendence of desire through self-control in the service of a higher good, and fully open to life in that children are graciously accepted rather than ruled out.”

John Paul II states:

These, based on the nature of the human person and his or her acts, preserve the full sense of mutual self-giving and human procreation in the context of true love... When couples, by means of recourse to contraception, separate these two meanings that God the Creator has inscribed in the being of man and woman and in the dynamism of their sexual communion, they act as "arbiters" of the divine plan and they "manipulate" and degrade human sexuality—and with it themselves and their married partner—by altering its value of "total" self-giving... by means of recourse to periods of infertility, the couple respect the inseparable connection between the unitive and procreative meanings of human sexuality... (Familiaris consortio, no. 32)

Regarding the meaning of “self-giving,” which is a main concept of John Paul II’s human sexuality and love, he states:

The self-giving that inspires the love of husband and wife for each other is the model and norm for the self-giving that must be practiced in the relationships between brothers and sisters and the different generations living together in the family... Education in love as self-giving is also the indispensable premise for parents called to give their children a clear and delicate sex education... for sexuality is an enrichment of the whole person-body, emotions and soul—and it manifests its inmost meaning in leading the person to the gift of self in love. (Familiaris consortio, no. 37)

117 Rubio, 275.
The Theology of the Body-The General Audience, 1979-1984. “The Theology of the Body” is the topic of a series of 129 lectures given by Pope John Paul II during his Wednesday audiences (The General Audience) between September 1979 and November 1984. It was the first major teaching of his pontificate. This audience is noted as a source for John Paul II’s teaching on marriage and sexuality and compiled and expanded upon in many of John Paul II’s encyclicals, letters, and exhortations. John Paul II’s approach to human sexuality is expressed well to his audiences. From the 114th lecture to the final lecture, 129th lecture in the series, the Pope gave lectures on contraception, marriage, and family in reflections based on *Humanae vitae*.

As Grabowski notes: “John Paul II has continued to focus on the human person as revealed in the light of Christ….these audiences comprise a catechesis on the bodily dimension of human personhood, sexuality, and marriage in the light of biblical revelation.” In the “theology of the body” of John Paul II, the most intimate expression of communion in marriage takes place through the bodies of a husband and a wife. Thus, the body “has a ‘nuptial’ meaning which points toward the human need for community.” Grabowski interprets “self-donation” in the theology of body as follows: “In sexual self-donation the couple indeed speaks a ‘language of the body,’ expressing in a manner far more profound than words the totality of their gift to each other. In this

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119 Grabowski, 74.

120 Ibid., 75.
embodied dialogue of mutual love the couple continually discovers each other and themselves more deeply.” 121

Regarding the meaning of “language of the body” in human sexuality, John Paul II explains that it means the expression of entire human being not only physical sexual act in itself, but also the interpersonal and reciprocal relationship between man and woman. Further on, it means the truth of the sacrament through the body. He states:

The human body is not merely an organism of sexual reactions. But it is, at the same time, the means of expressing the entire man, the person, which reveals itself by means of the language of the body. This language has an important interpersonal meaning, especially in reciprocal relationships between man and woman. Moreover, our previous analyses show that in this case the language of the body should express, at a determinate level, the truth of the sacrament. Participating in the eternal plan of love ("sacrament hidden in God"), the language of the body becomes a kind of prophetism of the body. (August 22, 1984, 119th lecture)

At the final lecture of the “theology of the body,” Pope John Paul II speaks of the theme of the “theology of the body” is established on the redemption of the body and the sacramentality of marriage. He states:

The redemption of the body and the sacramentality of marriage can be correctly carried out from the moment when the light of revelation touches the reality of the human body (that is, on the basis of the theology of the body). This is confirmed, among other ways, by the words of Genesis: "The two of them become one body." These words were originally and thematically at the basis of our argument. (November 28, 1984, 129th lecture)

In the lecture on the redemption of the body, the Pope speaks about how the eschatological redemption of the body, in victory over death, is the inspiration for human victory over sin in daily life, whether in marriage or in celibacy. With regards to the

121 Ibid.
redemption of the body in marriage, John Paul II explains that through the mystery of the redemption of the body, a husband and a wife strengthen their indissoluble union in their daily lives as the below:

In his daily life man must draw from the mystery of the redemption of the body the inspiration and the strength to overcome the evil that is dormant in him under the form of the threefold concupiscence. Man and woman, bound in marriage, must daily undertake the task of the indissoluble union of that covenant which they have made between them… Christ's words spring from the divine depths of the mystery of redemption. They permit us to discover and strengthen that bond that exists between the dignity of the human being (man or woman) and the nuptial meaning of the body. (July 21, 1982, 86th lecture)

The pope speaks regarding the indissolubility of the sacrament of marriage in the mystery of the redemption of the body as a man and a woman becoming one flesh in marriage as signifying the relationship between Christ and the Church as a sign of the redemption of the body at the end of time. In addition, he states that marriage is a primordial sacrament in the state of human being’s original innocence because marriage is a sacrament inasmuch as it is an integral part and the central point of the sacrament of creation. He states:

In the great sacrament of Christ and of the Church, Christian spouses are called upon to model their life and their vocation on the sacramental foundation…Christ spoke these words, one might say, from the divine depth of the redemption of the body… They have a significance for marriage in which man and woman unite so that the two become "one flesh," according to the expression of Genesis (2:24). (October 27, 1982, 100th lecture)

Regarding the topic of birth regulation, Pope John Paul II argues that “contraception violates the language of the body as complete self-giving of the whole person.”

He explains:

the conjugal act signifies not only love, but also potential fecundity. Therefore it cannot be deprived of its full and adequate significance by artificial means... The one is activated together with the other and in a certain sense the one by means of the other... in such a case the conjugal act, deprived of its interior truth because it is artificially deprived of its procreative capacity, ceases also to be an act of love... Such a violation of the interior order of conjugal union, which is rooted in the very order of the person, constitutes the essential evil of the contraceptive act. (August 22, 1984, 119th lecture)

Detailing the conjugal union in the relationship to the “language of the body,” the Pope describes how the conjugal act is an expression of the mysterious language of the bodies between a husband and a wife and how the language of the body means not only sexual reaction, but also the reciprocal expression of themselves “in the fullest and most profound way possible to them.”

He says:

by conjugal union, man and woman are called to express that mysterious language of their bodies in all the truth which is proper to it... whose direct source is the body in its masculinity and its femininity, the body in its action and interaction... Man and woman carry on in the language of the body...on the level of this language of the body... as authentic language of the persons, is subject to the demands of truth, that is... man and woman reciprocally express themselves in the fullest and most profound way possible to them. (August 22, 1984, 119th lecture)

As mentioned before, while Humanae vitae by Pope Paul VI is based on the appeal to the natural law, John Paul II “bases his teaching, not only on the dignity of the person, but on biblical revelation. Thus it is primarily an exposition of various biblical

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123 Grabowski, 77.

texts which frames the teaching offered within the catechesis on the theology of the body.”  

In other words, “John Paul II has attempted to make the human person revealed in the light of Christ the basis of the Church’s teaching in sexual, social, and medical morality.”

As mentioned before, due to the lack of biblical texts regarding human sexuality, it is controversial that whether John Paul II’s method of biblical interpretation on human sexuality is grounded in biblical revelation or in his own personal creativity. For instance, John Paul II’s theology of the body is criticized especially in the way the Pope describes the meaning of self-gift to another as “the nuptial or spousal meaning of the body,” and in how the Pope’s theology of the body overlooks key features of human experience.

Ronald Modras (who studies Christian spirituality and ecumenical and inter-religious dialogue) argues that too often John Paul II approaches human sexuality with rather abstract philosophical and theoretical arguments rooted in his phenomenological personalism. Modras criticizes John Paul II’s a dualistic anthropology that lays that “love and human emotions” are under the “human intellect and will” in a subordinate relationship.

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125 Grabowski, 77.

126 Ibid.


128 Ibid., 150-153, Ronald Modras argues that John Paul II develops a “Thomistic personalism,” in which the Pope translates neo-Thomistic natural law into his personalist categories. According to Modras’s critique, John Paul II’s anthropology on sexual ethics is stratified and dualistic body-soul anthropology. John Paul II views human transcendence and spirituality in terms of self-domination with a stratified concept such as human emotions are part of the lower sphere, while intellect and will are part of the higher sphere. Modras mentions the influence of the Kantian tradition of ethics on John Paul II’s philosophy as the
Paul II’s philosophy. In perspective of the morality of artificial contraception with influence of the Kantian ethics, Modras argues that John Paul II maintains that the contraceptive intercourse is a matter of two people using one another as the means for their mutual enjoyment, accordingly; to John Paul II the contraceptive intercourse in marriage is not true love, but the attitude of selfishness in using the other for one’s own gratification. However, Modras indicates a weakness of John Paul II’s argument as John Paul II omits the crucial word “merely,” from the Kantian ethics, so the omitting can occur the misunderstanding of the using one another as the means without recognizing their value at the same time as an end. Therefore, due to his highly interpretive method and mystical reflection on human sexuality, there are controversies in his understanding and teachings on human sexuality.

The Gospel of Life (Evangelium vitae) 1995- Encyclical. The Gospel of Life (Latin: Evangelium vitae) is an encyclical written by Pope John Paul II and promulgated

Kantian tradition of ethics has been influenced many thinkers and philosophical works in Germany and across modern Western Europe. According to the moral imperative, the Categorical Imperative by Immanuel Kant, all persons must be always treated as “ends,” and never as “merely means.” In perspective of the morality of artificial contraception with influence of the Kantian ethics, Modras argues that John Paul II maintains that the contraceptive intercourse is a matter of two people using one another as the means for their mutual enjoyment, accordingly; to John Paul II the contraceptive intercourse in marriage is not true love, but the attitude of selfishness in using the other for one’s own gratification.

Allen W. Wood, Kantian Ethics (New York: Cambridge University Press, 2008), 231-239. The Kantian ethics claimed by the German philosopher, Immanuel Kant (1724-1804) is a deontological ethical theory and declares that “a good will is the only intrinsically good thing and that an action is only good if performed out of duty, rather than out of practical need or desire.” According to Kantian ethics, sexual intercourse is the use of the other’s sexual members and faculties and the natural end of the intercourse is procreation and educating children. Kant defended monogamous marriage as an attempt to protect the rights of persons, especially women within sexual intercourse. In other words, in Kantian ethics, two persons entering into a sexual union solely on the basis of a reciprocal possession of each other, which possession at the same time is only effected in reality by the reciprocal use of the other’s sexual faculties.
on March 25th 1995. It addresses the value and inviolability of human life with dealing
with specific actions such as abortion, euthanasia, and death penalty.

Regarding contraception, the encyclical describes birth control in relation to
abortion. John Paul II condemns the assertion that contraception is “the most effective
remedy against abortion.” He criticizes the “contraceptive mentality,” which is he
considered differently from “responsible parenthood.” According to John Paul II, the
regulation of births with Natural Family Planning for responsible parenthood is
performed “in respect for the full truth of the conjugal act.” However, he indicates that
the “contraceptive mentality” strengthens the temptation of abortion when an unwanted
life is conceived. In addition, he argues that contraception and abortion are different
evils: contraception is opposed to the conjugal love; abortion is violation of the human
life. He describes:

Certainly, from the moral point of view contraception and abortion are
specifically different evils: the former contradicts the full truth of the
sexual act as the proper expression of conjugal love, while the latter
destroys the life of a human being; the former is opposed to the virtue of
chastity in marriage, the latter is opposed to the virtue of justice and
directly violates the divine commandment "You shall not kill". (EV no.16)

John Paul II condemns contraception, sterilization, and abortion as they are used
as an anti-birth policy for the issue of population growth. He explains the immorality of
anti-birth methods as “such interventions must always take into account and respect the
primary and inalienable responsibility of married couples and families, and cannot

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130 Evangelium vitae, no. 16.

131 Ibid.

132 Ibid.
employ methods which fail to respect the person and fundamental human rights, beginning with the right to life of every innocent human being. It is therefore morally unacceptable to encourage, let alone impose, the use of methods such as contraception, sterilization and abortion in order to regulate births.”

He states:

Governments and the various international agencies must above all strive to create economic, social, public health and cultural conditions which will enable married couples to make their choices about procreation in full freedom and with genuine responsibility. They must then make efforts to ensure "greater opportunities and a fairer distribution of wealth so that everyone can share equitably in the goods of creation. Solutions must be sought on the global level by establishing a true economy of communion and sharing of goods, in both the national and international order". This is the only way to respect the dignity of persons and families, as well as the authentic cultural patrimony of peoples. (EV no. 91)

In other words, John Paul II suggests a solution for the population issue lies in cooperating between governments and various international agencies on the global level with protecting married couples' freedom and responsibility for their right and choice of procreation.

**Conclusion: Prospects of Change**

Throughout history, the popes developed their encyclicals and addresses in response to the problems of their times, and artificial contraception has been down through the centuries prohibited by the Roman Catholic Church as an intrinsically evil act. Since Leo XIII, the Catholic Church has had to respond to changes in the modern world triggered by new problems and upheavals in society such as what some perceive as the moral breakdown of a society, the perceived growing infidelity between husbands and wives, the use of power of generation outside of wedlock, temporary marriage,

133 Ibid., no. 91.
experimental marriage, companionate marriage, divorce, adultery, liberty, secularization, mixed marriage, woman’s liberation, adolescent liberation, scientific research concerning human life, human sexuality, population issue, contraception, abortion, and sterilization.

With regard to the ends and meaning of the conjugal act, since Pope Pius XII, the meaning of the conjugal act developed as the expression of the reciprocal gifts between spouses linked to pleasure and happiness, but the ends of the act were still for procreation as the primary and for the unity of spouses as the second. However, later Gaudium et spes removed the hierarchical ranking of the two ends of marriage and the conjugal act, rather the two ends were expressed equally valuable and identical, and they were always related to one another.

In regard to the morality of contraception, despite the suggestion of artificial contraception by the Majority Report from the Papal Birth Control Commission after the Second Vatican Council, in Humanae vitae, Pope Paul VI asserted artificial contraception as an intrinsic evil act and he suggested that each and every act of sexual intercourse should be open to a new life, and that the regulation of birth for responsible parenthood was morally permissible only with Natural Family Planning.

However, in the teaching of Humanae vitae “opening to a new life” during the each and every sexual intercourse seems to be controversial because sexual intercourse during the infertile period is not open to a new life naturally and potentially. Again, according to the teaching of Humanae vitae, Natural Family Planning is permissible morally even though intercourse during the infertile period is not open to a new life. Therefore, if Natural Family Planning is permissible morally in spite of not opening to a
new life during the infertile period, then non-procreative intercourse with artificial contraception should not be condemned as an intrinsically evil act.

With regard to the condemnation of contraception in the Church teaching, while *Humanae vitae* describes the condemnation of artificial contraception as an illicit act against the natural development of the generative process, John Paul II argues the immorality of artificial contraception as contraceptive intercourse is not truly self-giving between spouses because of the attitude of selfishness in using the other for one’s own gratification. In other words, there is a different perspective between Paul VI and John Paul II on the condemnation of artificial contraception.

Therefore, throughout the Church history, the ends and meanings of marriage and the conjugal act had been developed and changed, and there were different perspectives on the condemnation of artificial contraception among the popes. In addition, historically, there was an official suggestion of artificial contraception by the Majority Report from the Papal Birth Control Commission according to the signs of the times. However, the needs and hopes of lay Catholics and the long journey of the Papal Birth Control Commission were ignored by the Church hierarchy under the infallibility and indissolubility of the Church teachings.

I propose that as the developments and changes of the ends and meanings of marriage and the conjugal act in the Church teachings throughout history, it could be possible to change the teaching of contraception according to the signs of the times. The issue of the morality of artificial contraception is still hotly contested between the
traditionalists and revisionists. I will explore the various aspects of their arguments in the next chapter.
CHAPTER TWO

CATHOLIC DEBATES AFTER HUMANAЕ VITAE

Debates by the Catholic Theologians and Ethicists on Contraception

In Chapter One, through examining the historical encyclicals and papal texts between 1880 and 1995, I explored the broad contours of historic theological and moral debates and controversies regarding birth control and the meanings and ends of the conjugal act. In addition, I examined how the Church has changed its teachings substantially and practically throughout history and then, I explored the possibility of how the Church can change its teaching on birth control by examining historical examples in the encyclicals and papal texts and the history of the Papal Birth Control Commission.

In 1968, Pope Paul VI promulgated Humanae vitae and he stressed the two meanings of the conjugal act (the unitive and the procreative) were equally valuable and inseparable. While asserting artificial contraception as an intrinsic evil act, he suggested that each and every act of sexual intercourse should be open to a new life, and that the regulation of birth for responsible parenthood was morally permissible only with Natural Family Planning.

The promulgation of Humanae vitae triggered an immediate and huge controversy. Many theologians and Catholic laypeople expressed their deep frustration
and dissent. The condemnation of artificial contraception by Pope Paul VI in his encyclical meant that he rejected the official Majority Report of the Papal Birth Control Commission which was a special commission established to study a birth control issue. Moreover Paul VI in *Humanae vitae* seemed to turn his back on the strong hopes of many at the time of Vatican II that the Church was engaging the modern world with new theological insight and openness to new views in the sexual ethics sphere.

As the controversy was joined, two general camps emerged rather quickly. On the one hand many who voiced dissent published strong critiques of the reasoning behind Pope Paul VI’s continued condemnation of artificial birth control especially as it was conjoined with an endorsement of the rhythm method, Natural Family Planning. In response a number of prominent theologians, bishops, and laypeople voiced strong relief regarding *Humanae vitae* and articulated strong support for Pope Paul’s theological and ethical conclusions and strong attacks on the views of those criticizing the encyclical. The debate centered not just on the encyclical’s logic regarding the illicitness of artificial birth control, but also on the very authority of Papal views enunciated in an encyclical articulating strong positions on moral matters. A number of defenders of Pope Paul’s reasoning came to argue that his encyclical should be viewed as having the stature of an infallible Church statement. Accordingly, they reasoned, its moral conclusions should be held as beyond dissent.

In this chapter, I will explore the broad contours of this historic theological and moral debate by examining in detail the specific views of a number of the most prominent voices engaged in this controversial tangle of issues. The debate split cleanly
into two broad camps—those voicing dissent from the logic of Pope Paul’s reasoning articulated in the encyclical and those voicing support for his affirmation of the illicitness of artificial birth control and the licitness of Natural Family Planning. At the popular level these two camps have often been referred to as the “conservative” camp, namely those siding with the reasoning of *Humanae vitae* and the “liberal” camp, namely those voicing a critique of papal reasoning on this matter of the immorality of birth control. Given how these terms “conservative” and “liberal” carry such a broad freight of associations on a wide range of sexual ethical, political, and social ethical views, I prefer to more narrowly categorize the two camps as “traditionalists,” who on this issue wish to hold to the Church’s traditional condemnation of artificial birth control and the “revisionists,” who wish to revise the Church’s teaching on this issue. These terms, I believe, avoid some of the confusion brought on by the breadth of associations carried by the terms “conservative” and “liberal.”

Through these literature reviews, I aim to explore the broad contours of historic theological and moral debates and controversies regarding birth control, and the theological and moral reflections from two different approaches would be helpful to understand the Catholic official teachings and its history explored in the previous chapter and to connect their approaches and arguments to the lived experiences of birth control in the sexual lives of heterosexual married Catholics in South Korea, which will be dealt with in the next two chapters.

In what follows, I will examine the main lines of the traditionalist’s position by examining the writings of a number of the most influential articulators of support for
Humanae vitae’s position. Among them are Germain Grisez, William E. May, Janet Smith, and John S. Grabowski. Likewise I will display the main lines of those critical of Humanae vitae and the papal reasoning on the illicitness of artificial birth control by examining the views of a number of prominent revisionist voices, among them Charles E. Curran, Rosemary Radford Ruther, Julie Hanlon Rubio, John T. Noonan, Christine E. Gudorf, Margaret A. Farley, Todd A. Salzman and Michael G. Lawler. These theologians and ethicists, I believe, serve as accurate representatives for the views articulated for and against Humanae vitae as they arose in the years of controversy that followed its promulgation. In this dissertation as a whole, I support the views, arguments, and reflections of revisionists who stress context, intent, and proportionate reasons with criticizing ethical models that stress moral absolutes.

Traditionalist Approaches

As a co-writer of the Minority Report with John Ford during the Papal Birth Control Commission, Germain Grisez is one of the representative conservative moral theologians in the contemporary Catholic Church. With Joseph Boyle, John Finnis, and William E. May, Grisez strongly supports the teaching of Pope John Paul II and the traditional official Church teachings on sexuality. As a supporter of Humanae vitae, Janet Smith and John Grabowski stand by the traditional condemnation of artificial contraception. As conservative moral theologians, Grisez, May, Smith, and Grabowski support only Natural Family Planning (hereafter NFP), and only then for grave reasons.¹

¹ They adopted the grave reasons from the Pope Pius XII’s Address to Midwives on the Nature of Their Profession, October 29, 1951, such as those which not rarely arise from medical, eugenic, economic and social so-called ‘indications.’ See Germain Grisez, Joseph Boyle, John Finnis, and William E. May, “Every
Grisez holds that contraception has a “contra-life will.” NFP, he holds, needs not be “contra-life” nor a contraceptive practice. He says the difference between contraception and NFP is regarding “a reason” and “a choice.” “Contraception” is intended to avoid conception and the having of a baby. Thus he says it includes a “contra-life will.” In contrast, NFP is “the choice to engage in intercourse during infertile times and the choice to adopt a systematic policy of periodic abstinence and intercourse,” which means a “non-contra-life will.” In short, “the choice to engage in intercourse by those who think they are naturally sterile, permanently or temporarily, cannot involve a contra-life will.”

In addition, with other conservatives, Boyle, Finnis, and May, Grisez argues that a couple who use the noncontraceptive choice of NFP always has the intention to accept a baby, so that to the couple, the baby’s “not-coming-to-be” (in the intercourse during the infertile period) is understood as “a side effect of what they intend.”

Even though Smith supports the traditional Church teachings and Natural Family Planning as an only legitimate birth control method, she has a different view and argument from Grisez and his colleagues as she notes that Natural Family Planning has the same intention as artificial contraception

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4 Ibid.

5 Ibid., 131.
which does not want a baby. In what follows I will closely examine the traditionalist thinkers’ views and arguments.

**Germain Grisez**

**Contraception as “Contra-life” vs. NFP as “Not Contra-life.”** With his colleagues, Boyle, Finnis, and May, Grisez argues with the philosophical methodology and language that NFP is legitimate morally because it is not contra-life whereas artificial contraception is intrinsically evil because it is contra-life. Grisez was a co-writer with John Ford for the Birth Control Commission’s so-called Minority Report, which elaborated a strong opposition to artificial contraception.6 He and his colleagues argued in that document that even though both of NFP and artificial contraception have contraceptive intent (which means not wanting a baby), the difference between NFP and contraception, they argue, lies in how NFP does not involve a “contra-life will” whereas contraception with a condom or the pill does so involve such a commitment of will. In addition, Grisez and the others hold that in a couple’s use of the method of NFP, the baby’s “not-coming-to-be” is to be understood as a “bad side effect.”7 He explains about that as follows:

It is a choice *not to do something*—namely, not to engage in possibly fertile sexual intercourse—with the intent that the bad consequences of the baby’s coming to be will be avoided, and with the *acceptance as side effects* of both the baby’s not-coming-to-be and the bad consequences of his or her not-coming-to-be. In this choice and in the acceptance of its side effects, there need be no contralife will. The baby who might come into being need not be projected and rejected…the contraceptive choice by its very

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6 See Chapter One in this dissertation.

7 Grisez et al., “NFP: Not Contralife,” 129.
definition is contra-life. It is a choice to prevent the beginning of the life of a possible person.\textsuperscript{8}

Regarding the difference of the intent to avoid having a baby in both NFP and contraception, Grisez and his colleagues describe that the choice with contraceptive intent for contraception users means that:

They choose the possible baby’s not-coming-to-be… the noncontraceptive choice of NFP, the choice is to not-cause-the-side-effects-of-the-baby’s-coming-to-be by abstaining from causing the baby to come to be. Those who make this choice precisely do \textit{not want to cause the baby}, but they do not choose the baby’s not-coming-to-be, although they do accept that not-coming-to-be as a side effect of what they intend.\textsuperscript{9}

In other words, they argue that the intent and commitment of will involved in NFP and contraception are significantly different and that the intent of contraception is fundamentally “contra-life” and the intent of NFP is fundamentally not. In addition, they believe that these differences matter greatly when unexpected pregnancy occurs. When that happens, the contraception users who do not want to have a baby may be tempted to get an abortion, whereas the NFP users “may find the new baby’s coming to be emotionally repugnant, but, whatever their feelings might be, the baby is not unwanted in the sense that counts morally even though they do not want to have a baby.”\textsuperscript{10}

Regarding the failure of contraception, Gareth Moore presents a new perspective with criticizing the arguments of Grisez and his colleagues.\textsuperscript{11} He argues that a possible

\textsuperscript{8} Ibid., 128.

\textsuperscript{9} Ibid., 131.

\textsuperscript{10} Ibid.

\textsuperscript{11} Gareth Moore OP, \textit{The Body in Context: Sex and Catholicism} (London and New York: Continuum, 2001), 174-175.
person (in the argument of Grisez) is not an actual person and he points out the uncertainty of the time of starting life unwanted such as the beginning of life at birth or at the moment of conception. Moore argues that even though contraception is used due to wanting the start of a new life, it does not mean “if the contraception fails, the newly-conceived child is unwanted; it may well be wanted. . . what is necessarily unwanted is not any actual person at any stage of his/her life, but the possible beginning of a person or. . . the beginning of a possible person.”12 In other words, a being as a result of the failure of contraception is not necessarily unwanted and unloved at the beginning of life at birth and at any stage of his/her life, therefore contraception users are not necessarily contra-life and the contraception users who do not want to have a baby are not necessarily tempted to get an abortion due to the failure of contraception.

Grisez and his colleagues argue that the choice of NFP is not only “not contra-life,” but also “conducive to marital chastity and fosters marital love,” further, NFP users by using periodic abstinence reject satisfaction of “their sexual desire.”13 In his book, *Contraception and the Natural Law*, Germain Grisez’s view on marriage and the marital act seems to follow the encyclical by Pius XI, *Casti Connubii (On Chaste Marriage)* (1930) because he argues that procreative good is the primary reason for sexual intercourse. Likewise there he strongly condemns artificial contraception as an intrinsically evil even as *Casti Connubii* held and later encyclicals did. In the book, Grisez’s view regarding human experience as a source of ethics seems to be negative and

12 Ibid.

13 Grisez et al., “NFP: Not Contralife,” 133.
skeptical. On the contrary, a revisionist perspective puts a great weight on the human experience for the main source of ethics. Grisez describes his criticism regarding human experience for ethical judgment as follows:

The popular attitude we are considering, insofar as it is an argument, suggests that experience is an adequate basis for ethical judgment. In a certain sense, of course this is true. We can understand what the essential human goods are and what actions will promote or hinder their achievement only with the help of experience. But, in another sense, it is false to suppose that experience can determine what is right and what is wrong. Moral judgment is concerned with the ideal, with what ought to be...Experience with life can show us that something is not as it should be, that something should be changed. But experience itself does not tell us what to change.\(^{14}\)

In other words, Grisez argues that human experience cannot by itself determine an ethical judgment.

One of the main documents from the Second Vatican Council was *Gaudium et spes* (The Pastoral Constitution of the Church in the Modern World promulgated) in 1965. Where before procreation had been held as the primary goal of sexual intercourse, *Gaudium et spes* significantly argued that the conjugal act has two primary meanings, the unitive and the procreative. However, when in 1988 Grisez and his colleagues published “Every Marital Act Ought to Be Open to New Life: Toward a Clearer Understanding,” their perspectives on the conjugal act seem to still stay hold with the logic of *Casti connubii* (1930) because they put the heaviest weight on the procreative meaning.\(^{15}\) They describe the issue as follows:

\(^{14}\) Grisez, *Contraception and The Natural Law*, 4.

\(^{15}\) Grisez, et al., “Every Marital Act Ought to Be Open to New Life: Toward a Clearer Understanding.”
For a married couple a baby would be a unique completion of their marital communion. Thus, in positively willing that another child not come to be, they also positively will that their marital communion not be fulfilled in this particular act. Thus, in choosing to contracept, couples also will that their acts of sexual intercourse not be acts of marital communion. They are like people who tell less than they know by telling a lie.16

In other words, they view that a married couple’s sexual intercourse without intent of procreation does not constitute true marital communion. Thus, they seem to argue that procreation is the primary end of the conjugal act. Thus, their view does not seem to correspond with the core message of *Humanae vitae* (1968). As I mentioned above, they still seem to hold to the understanding of Pius XI in *Casti Connubii* (*On Chaste Marriage*) (1930).

In his book *Contraception and the Natural Law* (1964), Grisez condemns contraception as “not an injustice, but malice,” specifically, “the malice of every intrinsically evil act,” and it is directly contrary to an “essential human good,” which is procreation.17 He argues that a married couple who has contraceptive intercourse is essentially engaging in mutual masturbation.18 For Grisez, the Church’s teaching on contraception is infallible and the experience of lay people on the issue of contraception simply offers no substantive grounds for the Church to revise its moral condemnation of artificial birth control.

As an exception, Grisez defends the use of artificial contraception in the case of threatened rape by arguing that the woman’s intention is not “contra-life,” rather; it is a

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16 Ibid., 415.

17 Grisez, *Contraception and The Natural Law*, 94.

18 Ibid., 95.
“defense against violence.” An ethicist, David Kelly criticizes Grisez’s argument on the exception for rape as indicating that even though the sexual acts themselves are fundamentally different, a woman who uses contraceptives because of a serious medical reason has a same intention to a woman raped, namely she does “not want to get pregnant.”

Grisez argues contraception has the malice of an intrinsic evil act because of its “contra-life will,” and NFP is only a moral way to control a birth because it is not only “not contra-life,” but also conducive to marital chastity and fosters marital love. Further, NFP users by using periodic abstinence reject satisfaction of their sexual desire. Grisez and his colleagues argue contraception users and NFP users have a different intention and hold that for NFP users, the baby’s “not-coming-to-be” is to be understood as a bad side effect, not a direct attack on life.

There are three weaknesses of his arguments in my understanding. The first, in the principle of cause and effect, is that the meaning of “a bad side effect” as “the baby’s not-coming-to-be” is not clear and unconvincing. According to his argument, sexual intercourse is a cause, and a baby’s coming-to-be is an effect whereas no sexual intercourse (for NFP users) is a cause and the baby’s not-coming-to-be is a bad side effect. Namely, according to Grisez and his colleagues, no sexual intercourse during women’s fertile period for NFP users means that they avoid sexual intercourse, do not cause the baby, and do nothing for the baby’s coming-to-be. My question is that although there is no cause (no sexual intercourse), how a bad side effect can be followed. In

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addition, in their principle, even though there is no cause, a “baby’s coming to be” can be a good effect, and the “baby’s not-coming-to-be” can be a bad side effect. My question is that although there is no cause as no sexual intercourse during fertile period for NFP users, how a good effect or a bad side effect can be followed. The second, Grisez and his colleagues argue that sexual intercourse as a cause should be always open to the baby’s coming to be as an effect, and the baby’s not-coming-to-be is a bad side effect. However, during women’s infertile period, even though there is a cause as sexual intercourse, the effect should be the baby’s not-coming-to-be. Accordingly, sexual intercourse in marriage is not always open to a new life naturally. Thus, I argue that contraceptive sex during infertile period is not a direct attack to a new life because the act is not open to a new life naturally. So, contraceptive sex is not always contra-life. I criticize that Grisez and his colleagues overlook women’s fertility cycle in their arguments. The third, he fails to support his argument regarding the different intentions between contraception and NFP. Both of NFP users and contraception users have the same intention as to unwant a baby. The difference is that while NFP users avoid sexual intercourse during fertile period to avoid pregnancy, contraception users have sexual intercourse with using artificial contraceptive devices to avoid pregnancy. In short, the difference is with respect to the method of birth control, not with respect to the intention. Therefore, Grisez’s arguments seem to rely on verbal affirmations of difference between NFP and artificial birth control, but these claims seem to be more asserted than convincingly argued for.

In my view, in regard of Grisez’s perspective on human sexuality, even though the Catholic official teachings (such as Gaudium et spes and Humanae vitae) teach that
the two ends of the unitive and the procreative are equally meaningful, and the encyclicals confirmed positively the value of mutuality between spouses through the sexual relationship, Grisez’s arguments and thoughts, as I mentioned above, seem to agree with Pius XI’s *Casti Connubii* (*On Chaste Marriage*) (1930) because he views that procreative good is the primary reason for sexual intercourse, and it is a moral way to reject or oppress the sexual desire even between spouses.

**William E. May**

*Contraception as “the Culture of Death.”* William E. May is a moral theologian and teaching at the Pontifical John Paul II Institute for Studies on Marriage and Family at The Catholic University of America. Along with Grisez, Finnis, and Boyle, May is one of the major proponents of the new natural law theory substantively built on the foundations of St. Thomas.20 According to May, the new natural law theorists, Grisez, Finnis, and Boyle clarify and develop St. Thomas’s work and make their own

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20 Christopher Tollefsen, “The New Natural Law Theory,” *Lyceum*, vol. x, no.1 (fall, 2008): The New Natural Law (NNL) theory is “the name given a particular revival and revision of Thomistic Natural Law theory, initiated in the 1960s by Germain Grisez. Grisez’s initial collaborators included Joseph Boyle, John Finnis and Christopher Tollefsen. More recently, Robert P. George, Patrick Lee, Fr. Peter Ryan, S.J., Gerard Bradley, William E. May, Christian Brugger, and Christopher Tollefsen have done work on the NNL. Also, see William E. May, *An Introduction to Moral Theology* (Huntington, IN: Our Sunday Visitor Publishing Division, 2003), 93-118 at 114-115. May introduces the New Natural Law views of Germain Grisez, John Finnis, and Joseph Boyle. According to May, these new natural law theorists clarify and develop St. Thomas’s work and make their own contributions to natural law theory. May describes their work as centering on four issues: 1) “the identification of the basic goods,” 2) “the distinction between ‘principles of practical reasoning’ and ‘principles of morality,’” 3) “the process of moral deliberation proceeding from the first principle of morality to specific moral norms by means of the modes of responsibility that further specify the first moral principle,” and 4) they “throw light on the relationship between natural law, which is a participation in the eternal law, and the eternal law,” and he notes that their work “marks a significant contribution to natural law theory and substantively builds on the foundations of St. Thomas,” and “they show how the natural law opens us to God, the transcendent source of meaning and value.”
contributions to natural law theory. May states that the new natural law theorists “seek to identify all the basic goods of human persons and to distinguish between those that are ‘reflexive’ or ‘existential’ and those that are ‘substantive.’” In his book, *An Introduction to Moral Theology*, May explains and supports moral absolutes, the authority and infallibility of the Church magisterium, and the Catechism’s teaching on the Christian moral life with criticizing revisionists’ rejection of moral absolutes and dissenting views from authoritative and noninfallible teachings of the magisterium. May argues that theologians have the right to raise questions and to submit their criticism, but ultimately they have to accept the judgment of the magisterium because they do not have a right to dissent from the magisterium. When he mentions the authoritative noninfallible Church teachings in the past (e.g., slavery or the question of religious liberty), he argues that “it is arguable whether there were any errors when one considers precisely what was asserted by the magisterium in different contexts,” and he notes that “Grisez likewise shows that sound development in doctrine does not require dissent in order to take place.” I think a contradiction seems to exist on their moral theories and arguments. Namely, when May and Grisez argue and support moral absolutes, they do not recognize or accept any contexts, changes, or development in regard of a moral agent and her/his moral fulfillment. However, when they defend the authoritative noninfallible teachings of the Church magisterium, they recognize its contexts and a possibility of change and

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22 Ibid., 113-114.
23 Ibid., 260.
development while they do not accept any contextual situations in moral agents and their moral fulfillment and force them not to dissent from the teachings of the magisterium.

In the book, *Catholic Bioethics and the Gift of Human Life*, May develops his ethical arguments on the morality of artificial contraception based on the encyclicals, pastoral letters, talks, and general moral and theological vision of Pope John Paul II. May holds contraception to be a significant support of what he and Pope John Paul II refer to as the “culture of death.”

John Paul’s lengthy employment of this “culture of death” is perhaps most strongly elaborated in his encyclical letter *Evangelium vitae* (*The Gospel of Life*) in 1995. May holds that there is “a long and respected Christian tradition that judges contraception to be anti-life, expressing a will that is indeed at the heart of the ‘culture of death.’”

May argues that:

> The anthropology, a dualistic one, regards the person primarily as a subject of enduring experiences who uses his or her body now for this purpose, now for that. It likewise locates the human and personal meaning of human sexuality in its relational significance, i.e., its ability to allow two subjects of enduring experiences to enter into deep interpersonal union, while regarding the procreative meaning of human sexuality as of itself subpersonal, part of the subhuman world of nature over which the person has been given dominion. This anthropology, as has been shown, is central to the ‘culture of death.’

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24 See Pope John Paul II’s comment in *Evangelium vitae*, no. 19: “At another level, the roots of the contradiction between the solemn affirmation of human rights and their tragic denial in practice lies in a notion of freedom which exalts the isolated individual in an absolute way, and gives no place to solidarity, to openness to others and service of them. While it is true that the taking of life not yet born or in its final stages is sometimes marked by a mistaken sense of altruism and human compassion, it cannot be denied that such a culture of death, taken as a whole, betrays a completely individualistic concept of freedom, which ends up by becoming the freedom of “the strong” against the weak who have no choice but to submit.”


26 Ibid., 122.

27 Ibid., 132.
In other words, May accuses contraception of a dualistic anthropological methodology. In detail, May criticizes that contraception’s moral methodology subordinates the procreative meaning of human sexuality (as biological) to the unitive meaning (personal), and the two meanings in contraception are separated intentionally. Accordingly contraception must continue to be condemned as against the Catholic official teaching on marital sexuality.

In the case of NFP, May states that the anthropology in the NFP is holistic because it respects harmonizing between conjugal love and the good of procreation and regards the human being as “a unity of body and soul,” and in the depth dimensions of a couple’s experience of the rhythm method, “human fertility or fecundity is not some subhuman, subpersonal aspect of human sexuality.” In addition, May argues that while the moral methodology of contraception judges the morality of human acts in terms of “hoped-for results or of the anticipated overall proportion of good and evil that will come about,” the morality of the NFP “depends on both the end intended and the object chosen and, because chosen, also intended.” In other words, contraception ignores the object (what one chooses to do) and focuses on “the remote end or further intention of the act” such as “the reason why one chooses to do this here and now” in terms of its hoped-for benefits. May argues, however, the NFP is based on the recognition “that there are objects of the human act which are by their nature ‘incapable of being ordered’ to God,

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28 Ibid., 128-129.
29 Ibid., 133.
30 Ibid.
31 Ibid., 134.
because they radically contradict the good of the person made in his image.”\textsuperscript{32} May in his analysis of the immorality of contraception draws heavily upon Pope John Paul II’s emphatic condemnation of the culture of death.

**Contraception as “Anti-Life and Anti-Love.”** May condemns contraception as an “anti-life” act (as Grisez does) because “the object freely chosen and willed by someone who engages in an act of contraception is precisely to impede the beginning of a new human life or to impede procreation.”\textsuperscript{33} Distinctiveness on May’s argument is that he separates contraception from the genital/sexual act itself. May presents one example regarding contraception conducted by the third person:

For instance, suppose a father provides a home for his newly married daughter and her husband. His daughter and her husband abhor contraception, deeming it a grave moral evil. They would never contracept, although perhaps they plan to practice periodic continence until they can move into their own quarters. But the girl’s father, in order to make sure that she does not conceive while living in his house, regularly puts contraceptive pills into his daughter’s cereal in the morning. He is the one who is choosing to contracept, not his daughter.\textsuperscript{34}

In other words, May argues that contraception can be conducted or chosen by the third person, not by the sexual agents themselves during the genital act.

With the theory of possible separation between contraception and the genital/sexual act itself, May concludes that contraception is an anti-life act with a contra-life will. As he puts it:

\textsuperscript{32} Ibid.

\textsuperscript{33} Ibid., 135.

\textsuperscript{34} Ibid., 135-136.
Contraception is not a part or aspect of any marital act or series thereof; it is a distinct kind of human act, specified by the choice to impede the beginning of new human life, either as an end or as a means to some further end, one perhaps good in itself. Since contraception is specified precisely by the choice to impede the beginning of new human life, it is an anti-life kind of act, one expressing a contra-life will.35

Regarding the comparison with NFP, May argues that a child conceived by a failure of contraception is an unwanted child because of “not wanting to have the child one could have as a result of this freely chosen act of sexual union and then freely choosing to do something to impede that prospective child’s coming into being,” whereas a child conceived by a failure of NFP is not unwanted baby because “they have done nothing to ‘unwant’ this particular child. He or she may be a ‘surprise’ baby, not an ‘unwanted’ baby.”36 However, my qualitative interviews with ten South Korean Catholic married women showed different attitudes and facts from the argument of May regarding response of the failure of NFP. According to my interviews, eight out of the ten interviewees experienced the failure of NFP, and the failures caused unplanned or unwanted childbirths or abortions.37 Four out of ten had an abortion, and two out of the four had an abortion more than two times. After they experienced the failure of NFP, most of them decided to use artificial contraception. They expressed their failure of NFP as an “unwanted accident” and showed their complaints with regard to uncertainty of NFP as a birth control method. In other words, most of the interviewees (8 out of 10) tried to use NFP in the beginning of marriage, but after unplanned or unwanted


36 Ibid., 137.

37 See Chapter Four of this dissertation regarding the qualitative interviews.
pregnancies, they changed their birth control approach to artificial methods planned. Accordingly, I argue that the intentions of NFP and artificial contraception users are identical, and pregnancy due to a failure of NFP is an unwanted and he or she is an unwanted baby. However, the unwanted baby due to a failure of birth control (to both of NFP and artificial contraception users) is not necessarily unloved at any stage of his or her life and even though the being conceived is not wanted or planned, the baby should be loved and the parents should love him or her.

In regard of anti-love, May follows John Paul II and holds that “John Paul II clearly recognizes the anti-life nature of contraception. It is both anti-love and anti-life.”38 Following the teaching of John Paul II, “self-giving love,” May presents an example of “anti-love” through a “not-giving of spouses to each other” when a couple uses barrier contraceptives, and he says “spouses who must ‘protect’ themselves from one another in such ways are ‘not giving’ themselves unreservedly to one another as bodily, sexual beings, even if this ‘not giving’ is ‘outside the scope of their intention.’”39 In other words, May argues that contraception is not only “anti-life” because of impeding the beginning of new human life, but also “anti-love” because of not-giving of spouses to one another by following the teaching of John Paul II.

With regard to using contraceptives in danger of rape or after rape, May states:

Were she to use some device that would prevent the rapist’s sperm from penetrating her ovum (e.g., a diaphragm or spermicidal jellies), the object specifying her act would not be to impede the beginning of a new life that could begin through her freely chosen genital act, but rather to protect

39 Ibid., 139.
herself from further bodily and personal violation by a rapist, and a human act, specified by this object, is not an act of contraception nor does it violate any moral norm.\textsuperscript{40}

Both Grisez and May defend the use of artificial contraception by a woman being threatened with rape.

**May on birth control.** By supporting the Catholic official teaching, May argues contraception as “anti-life” and “anti-love” because of impeding the beginning of new human life and not-giving of spouses to one another. However, I find May’s argument most unpersuasive. In my understanding, the couple who practices NFP does not *do nothing to unwanted a baby* (italics are mine); rather, they do something, namely, use *do avoidance of the genital sexual act* to unwanted a baby with using some devices such as calendars, thermometer, ovulation test kits, or electronic fertility monitors, which are used for Natural Family Planning. In other words, the couple does something, namely, using artificial devices to be abstinent.

Regarding the intention of birth control, the Catholic Church teaches NFP as a method of birth control for family planning, and Catholics who do not want a baby and want to follow the Church’s birth control teaching would choose NFP as a birth control method. Therefore, in my view, a child conceived by a failure of both NFP and contraception would be an *unexpected and unwanted baby* with finally the same intention and engaged will, but simply employing a different practice or concrete method. As I mentioned before, May’s and Grisez’s arguments seem to rely on verbal affirmations of difference between NFP and artificial birth control, but these claims seem to be more asserted than convincingly argued for.

\textsuperscript{40} Ibid., 140.
Therefore, I argue that both NFP and contraception users have a same intention to \textit{unwant a baby}. On the other hand, while Grisez and May have a same view on contraception as “contra-life” and “anti-life,” May goes further and connects the “anti-life will” to the “anti-love” by following the teaching of John Paul II.

\textbf{Janet E. Smith}

\textbf{Contraception vs. NFP on the Catholic Church tradition.} In her book, \textit{Humanae Vitae: A Generation Later}, Janet E. Smith, a Catholic lay woman and professor of theology, examines and presents a strong defense of the Catholic Church’s position, teachings, and tradition on the issue of family planning.\cite{Smith1991} According to Smith, the intention not to have a baby is the same for couples who practice contraception and those who practice NFP. In this way she differs from Grisez’s view discussed earlier. But Smith holds that because NFP respects the natural fertility cycle of a woman and is thus fully natural, NFP is a moral practice. In contrast, Smith, following closely to the reasoning of \textit{Humanae vitae}, judges contraception to be immoral, because it impedes the order of generation from completing its own natural processes. Smith argues, following the traditional Catholic Church teaching, that contraception users intend not only to avoid having a baby, but also “to thwart the natural end of sexual intercourse” while NFP users also intend not to have a baby like contraception users, but “they do not tamper with the ordination of the sexual act; it remains whatever nature has made it to be, fertile or infertile,” so NFP users respect women’s natural fertility cycle and it is fully natural.\cite{Smith1991} In


\cite{Smith1991} Ibid., 121-122.
short, both NFP and contraception have the same end (not to have a baby), but NFP pursues it in natural way; contraception does so in artificial way.

Regarding the moral judgments of contraception and NFP, she criticizes Grisez and his colleagues including May holding that their arguments “seem to lose sight of the traditional understanding.” In other words, Smith points out that they understand the malice of contraception in the choice with the malicious will rather than the evil of the act of contraception, whereas the Church tradition states that the sin of contraception is “in the intention because the will intends to do an action that is intrinsically evil and the goodness or evil of the will depends primarily upon the object of the act.”

Smith indicates the difference between Grisez and his colleagues and the Church tradition, and points out the weakness of their arguments. With respect of her critiques of other traditionalists, Grisez, Boyle, Finnis, and May, Smith criticizes their arguments on three aspects: 1) the relationship between a choice and an act, 2) contraception as a subject not categorized in the sexual act, and 3) baby’s not coming to be as a side effect of the intent.

First, Smith criticizes “their [Grisez and his colleagues (my addition)] analysis seems to define contraception in such a way that it is an act of the will, a choice, rather than the act that is performed, that is what is traditionally known as the external act.”

Drawing on the reasoning of, *Casti Connubii* and *Humanae vitae*, she states that by

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43 Ibid., 349.

44 Ibid.

following the Thomistic mode of categorizing action, in both documents the Church understands contraception to be an act that violates nature. According to her:

Traditionally some acts are considered intrinsically evil or intrinsically wrong apart from any act of the will. By referring to an act as ‘intrinsically evil’ or ‘intrinsically wrong’ the Church means it is the kind of act that ought never to be chosen directly. Although there is no question that sin refers to an act of the will, the Thomistic tradition holds that the external act can be evil, without reference to the will, insofar as it violates right reason.46

In other words, “the Church teaches that some actions are intrinsically evil apart from the will of the agent, are intrinsically opposed to the nature of the person and human action.”47 However, Grizez and his colleagues argue that “the couple using contraception are doing evil (wrong) not because they are using a contraceptive but because they intend that a child not come to be (this is their choice and what makes the act immoral), and that intention leads them to do something contraceptive.”48 In sum, while the Church tradition speaks of contraception as intrinsically evil because of the evil act itself against the natural telos of the sexual act, Grizez, Boyle, Finnis, and May condemn contraception as intrinsically evil because of the choice with the intent or will which is a baby not come to be. In other words, Smith states that the Church tradition defines the choice as focused on the specific action of using contraceptive devices, whereas Grizez and his colleagues describe the act not as using the devices, but contradicting the basic good of life.

46 Ibid., 356.
47 Ibid., 357.
48 Ibid., 356.
Second, Smith criticizes their categorization of contraception not as the sexual act, but as an act proceeding from a “contra-life will” as we have seen earlier. The Catholic Church has always taught contraception as a sexual sin, along with masturbation, fornication, adultery, homosexual behavior, and so on. However, Grisez and his colleagues view contraception apart from a sexual act as May separates contraception from the genital/sexual act itself. For instance, May argues that contraception can be conducted or chosen by the third person, not by the sexual agents themselves during the genital act. He defines that contraception is not a sexual act, but it is the choice with intent to do something, prior to, during, or subsequent to a sexual act to prevent the baby’s coming to be. Regarding this categorization by Grisez and his colleagues, Smith disagrees with them and she condemns contraception as a perverse sexual act as the encyclicals defines.

Finally, Smith does not accept their theory, that classifies a baby’s “not coming to be” as a side-effect of the intent. According to Grisez and his colleagues, the couple who uses NFP always intends to have a new life in the sexual act and through choosing not to engage in sexual intercourse as a moral choice, the couple accepts baby’s not coming to be as a side effect of their intent, which is always toward a new life. Concerning this theory, Smith presents some questions; “Are the choices of contraceptors and those who use NFP truly different? . . . Do contracepting couples really project a child and repudiate that child? If they do, do couples who use NFP do so any less?” As she holds: “I do not

49 Ibid., 360.
50 Ibid., 368.
believe that most couples using contraceptives are undertaking their act with the primary intent of seeing that a baby not come to be. I think they primarily intend to enjoy intercourse with their spouses and seek to prevent conception.”\textsuperscript{51}  In addition, she argues that the distinction between contraception users and NFP users is what kind of birth control method they choose for the same end, namely, “not to have a child,” and NFP users choose a legitimate method while contraception users choose a wrong way.

\textbf{Smith on birth control.} Smith disagrees with Grisez and his colleagues including May because she thinks both users of NFP and contraception have a same intent, and the only difference between them is the structure of the act itself, which is one chooses a contraceptive way and the other chooses a natural way. Again, she disagrees with their argument, which is that “the couple using contraceptives are doing wrong because they project a child and repudiate it (an immoral choice) and the couple using NFP have not done so; they have simply chosen not to have intercourse (a moral choice).”\textsuperscript{52} Smith argues with traditional terminology that “two couples might have the same end: that is, they both may legitimately not desire to have a child,” and says her “ends” are Grisez’s and his associates’ “reasons.”\textsuperscript{53}

Therefore, while Smith agrees with Grisez and his colleagues’ moral position, which is against artificial contraception, she disagrees with their moral analysis and arguments on family planning because it is different from the Catholic Church’s traditional understanding. While she joins in the sustained condemnation of

\textsuperscript{51} Ibid.

\textsuperscript{52} Ibid., 369.

\textsuperscript{53} Ibid., 368.
contraception, her dissent from the Grisez and May’s views illustrates that there is a diverse range of thinkers and perspectives arrayed across the spectrum of the debates about birth control.

I agree with her critique on Grisez and his colleagues’ moral analysis and arguments, but Smith’s view and arguments in a conservative approach fail to consider about a moral agent’s circumstances, their intentionality, their experiences, and proportional contexts around the moral acts, which revisionists bring for moral evaluation.

**John S. Grabowski**

**Virtue on sexuality.** In the book, *Sex and Virtue*, a moral theologian, John Grabowski contributes a systemic application of biblical and virtue-based categories to the topic of sexuality in renewed moral theology of the Second Vatican Council. Grabowski gives more weight to virtue itself rather than to human goods and empirical experience in an account of human flourishing.54 With regard to the attitude toward the Church teaching, Grabowski condemns any dissenting perspectives against the official Catholic teachings and defends the traditional teachings of the hierarchical magisterium with a biblical and virtue-based approach to sexuality. He views sex as a covenantal and sacramental reality on the biblical foundation and describes the sexual morality in the principle of the virtue of chastity, which fosters the capacity for self-giving love that is characteristic of covenantal love.55

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55 Ibid., 142.
By criticizing the contemporary Western view of human fertility focused on “pursuit of personal fulfillment and pleasure within sexual activity,” he argues with laying weight on John Paul II’s personalist approach that “conjugal chastity is ordered to both loving self-donation and the gift/acceptance of fertility as an aspect of the totality of the person.”

Accordingly, Grabowski proposes Natural Family Planning for a moral birth control practice in a virtue-based approach that fosters conjugal chastity such as greater respect, improved communication, deeper intimacy, and mutuality within marriage. Even though he emphasizes that he focuses on virtue itself rather than empirical experience for his moral theological approach on human sexuality, when he argues NFP as a moral birth control method, he supports NFP with its practical benefits through the experiences of NFP users. In other words, his defense of NFP seems to approach human goods and empirical experience rather than virtue itself. However, he fails to notice negative parts of NFP experiences such as a fear of unwanted pregnancy due to a high failure rate of the Natural Family Planning.

In addition, Grabowski criticizes Grisez and his colleagues’ views and arguments on the moral difference between NFP and contraception in three points. First, their view seems to “neglect the embodied character of human sexuality and of contraceptive choice as a rejection of the person’s fertility” because they focus on only the contra-life will of contraception. Second, “there seem to be logical and ontological difficulties in

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56 Ibid., 127-132.
determining the status of possible persons.”57 Third, they do not seem to account for the inseparability between the unitive and procreative meanings of the conjugal act from the teaching of *Humanae vitae*.58

**Grabowski on birth control.** Grabowski brings practical experiences from NFP users to defend NFP, but he fails to deal with the experiences of artificial contraception users such as comparing or contrasting with NFP users. Contradictorily, his defense of NFP seems to approach human goods and empirical experience rather than virtue itself even though he proposes that he gives more weight to virtue itself rather than to human goods and empirical experience in an account of human flourishing and sexuality. In addition, he fails to notice negative parts of NFP experiences such as a fear of unwanted pregnancy due to a high failure rate of the Natural Family Planning.

Even though he is a traditionalist who follows the traditional teachings of the hierarchical magisterium and disagrees with dissent against the Church teachings, his understanding of the practical experiences of NFP users shows that the main sources of ethics (for revisionists) such as a moral agent’s circumstances, their intentionality, their experiences, and proportional contexts around the moral acts cannot be neglected or ignored when a moral subject matter is evaluated.

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57 Grabowski adopted this critique from Gareth Moore OP, *The Body in Context: Sex and Catholicism* (London and New York: Continuum, 2001), 166-176. Moore criticizes the arguments of Grisez and his colleagues regarding the “contra-life will” of contraception users. Moore argues that a possible baby is not a kind of baby; rather it is not a kind of anything. Namely, a possible person is not a person. He states that “in choosing contraception the couple does not choose against the life of any person. The baby about whom they are thinking is not a person and does not have any life that may be chosen against. . . In choosing to use contraception the couple is making a decision which might be described as ‘contra-possible-life’ but their decision is not ‘contralife’” (167). Moore argues that even though contraception users do not want any offspring, they may nevertheless love and accept any child of their union, and “if they do so, we need not imagine that they have changed or abandoned any earlier commitment to hate the child” (167).

58 Ibid., 146.
Revisionist Approaches

In the aftermath of *Humanae vitae* many theologians and ethicists lost little time in criticizing Pope Paul’s reasoning and the traditionalists’ appeal to natural law categories and modes of argumentation by pointing out the traditionalists’ heavy reliance on an excessive focus on nature, biological structure and physical anatomy. As I mentioned before, I will use the term, a revisionist as a view dissenting from the encyclical, *Humanae vitae*’s condemnation of artificial contraception and wants the Church to revise its position. Revisionists came to try to frame these acts by considering a moral agent’s circumstances, their intentionality, their experiences, and proportional contexts around the moral acts. In this way they attacked what believed was the moral rigidity of the tradition’s enunciation of various moral acts as intrinsically evil. The stress on context, intent, and proportionate reason was aimed at criticizing ethical models that stress moral absolutes. Even though there are many theologians and ethicists who study on the issue of sexuality and birth control within the general revisionist approach, I will limit my study to the writings of Charles E. Curran, Rosemary Radford Ruther, Julie Hanlon Rubio, John T. Noonan, Christine E. Gudorf, Margaret A. Farley, and Todd A. Salzman and Michael G. Lawler. They, I believe, serve as most helpful representatives for revisionist perspectives because they represent various and distinguished major themes in the debates.

**Charles E. Curran**

A moral theologian, Charles E. Curran caused controversy due to his increasingly strong rejection of the traditional papal teaching on birth control that was reiterated in the
1968 encyclical *Humanae vitae*. Curran had been teaching at the Catholic University of America since 1965, but he was removed from the tenured faculty position in 1967 due to his teaching on contraception and his call for changes in other Church teachings. However, he was reinstated after a five-day faculty-led strike, but he was again removed from the faculty in 1986 for his dissent against the Catholic Church's moral teaching on the issues of sterilization, divorce, masturbation, homosexuality, and the beginning of human life. He called for a new approach to natural law, and for a responsible role of faithful dissent from, what he held to be, noninfallible moral teachings. Eventually, in 1986, the Congregation for the Doctrine of the Faith “decreed that Curran was neither suitable nor eligible to teach Catholic theology,” and the Catholic University of America fired him and no other Catholic university would hire him.59 Curran has been teaching at Southern Methodist University since 1991.

In his book, *Tensions in Moral Theology*, he argues that the magisterium fails to pay sufficient attention to the lived-experience of ordinary lay people and he is concerned that the magisterium focuses too narrowly on reductionistic moral understandings rooted in appeals to biological and physicalist structure. Curran proposes a “relationality-responsibility model” as his moral theory and he emphasizes a proportional ethical standard for “the good of the person” that loosens the moral fixation so tightly around discrete physical acts. 60


Dissents from *Humanae vitae*. Curran defines himself as a “dissenting theologian,” and as mentioned the above, he was forced to leave the Catholic University of America under pressure from the Congregation for the Doctrine of the Faith because of his dissenting positions from the hierarchical teaching on the moral issues such as contraception, sterilization, abortion, euthanasia, masturbation, premarital intercourse, homosexual acts, and the possibility of divorce and remarriage. According to Curran, “revisionists criticized the approach of *Humanae vitae* and its defenders for failing to appreciate historical consciousness, paying too much attention to the individual act, proposing a morality too narrowly based on the nature and purpose of the faculty, and identifying the human moral act with the physical structure of the act (physicalism).” In other words, dissenters from *Humanae vitae*, including Curran, point out that it places too much emphasis on the individual physical act without considering “the totality of the relationship between husband and wife.” He argues that “no one act can ever fully express the total and reciprocal commitment to self-giving of spouses to each other. In addition, marital love includes friendship love and self-fulfilling love, not just self-giving love.”

Against those who argue that the Church can never change its moral positions, Curran highlights the historical changes of church teaching such as “the rights of

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61 Ibid., 50.
63 Ibid., 193.
64 Ibid.
defendants, torture, slavery, usury, religious freedom, democracy, and the meaning and justification of marital relationships.”\textsuperscript{65} Therefore, Curran argues the justification of the possibility of dissent from authoritative, noninfallible official teaching on sexual ethical matters such as artificial contraception, homosexuality, sterilization, artificial insemination, in vitro fertilization, and abortion. He says in the present situation wide consultation and dialogue are required in the area of sexual morality for the function of the hierarchical teaching office.\textsuperscript{66} According to Curran:

These realities of greater pluralism and greater dissent on specific issues still exist side by side with the unity of the church and with a credible hierarchical teaching office in the church… We who are calling for a changed theory and practice of sexuality in the Roman Catholic Church will be successful only if we can convince the church of the need to change some of its current ecclesiological understandings of the hierarchical teaching office and to admit the possibility of dissent and error in such teachings.\textsuperscript{67}

Curran thus argues for the need of change and he justifies the possibility of faithful dissent from the current official teaching condemning artificial birth control.

Against those who argue that the Church’s historic teaching on contraception is infallible, Curran notes that “Germain Grisez and John Ford have also maintained that the teaching is infallible on the basis of the ordinary and universal magisterium of all the bishops throughout the world.”\textsuperscript{68} Curran strongly argues that the Church teaching is fallible and especially, on the issue of family planning, it should be so.


\textsuperscript{66} Curran, \textit{Tensions in Moral Theology}, 83-84.

\textsuperscript{67} Ibid., 85-86.

Relationality-Responsibility model. Curran finds problems with the deontological model and the teleological model found often in Catholic official teaching. Curran proposes a “relationality-responsibility model” for Christian ethics, which “incorporates a parallel flexibility and makes room for individual conscience.” Curran says that the approach of his relationality-responsibility model views a human person in multiple relationships with God, neighbor, world, and self.

He develops a strong critique of a number of the implications of the deontological approach to ethics. He argues that the deontological model which focuses on duty and law cannot “cover most of the actions that we perform in our daily lives” as well as important elements of the moral subject, agent, and the virtues in the moral life which are main sources in moral theology or Christian ethics. Likewise Curran strongly critiques teleological models of ethics. He points out their unrealistic approach on human reason and how they are too purposive and controlling. Curran says:

From a theological perspective we human beings do not have complete control over our end. Christian eschatology reminds us that our ultimate end is God’s gracious gift, and we will never attain it in this world. Our final end is outside and beyond history…The teleological approach tends to be too rational insofar as both intrinsic and extrinsic teleology rely

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69 See Curran, *The Catholic Moral Tradition Today: A Synthesis*, 61-66 where he states: “The deontological approach employs the metaphor of duty, law, or obligation as the primary model for the moral life. In philosophical ethics the Kantian categorical imperative and principle of universalizability exemplify the deontological approach. . . The teleological model emphasizes goals or ends. Something is good if it brings you to the goal and bad if it prevents your attaining that goal… Thomas Aquinas stands as the best example of a teleological approach to morality. Aquinas begins his consideration of morality with a discussion of the ultimate end of human beings, which he maintains, is happiness.”


72 Ibid., 64-66.
heavily on reason but seem to exclude the affective, the emotional, and other aspects of the human. The rational is very important, but the human being is more than rational.73

In helpful constructive fashion Curran challenges the deontological moral model that seems so prominent in current hierarchical official teaching on sexual matters. He offers instead a new ethical model, the relationality-responsibility model. Curran notes that the “relationality-responsibility” model interpreted in the light of catholicity “fits the historical consciousness approach with its greater emphasis on historicity, change, individuality, and contingency, and its unwillingness to let go of some general universal morality common to all humankind.”74 He argues that the deontological and teleological models tend to miss key aspects of “the diversity, historicity, and contingency which characterize so much of our life today.”75

As Catholic social teaching and practice have accepted a relationality-responsibility model, Curran argues the model and its methodology should be accepted as normative for the Church’s sexual teaching. Because of the Catholic sexual teaching in based on the teleological aspects of natural law, Curran indicates that “sexual morality is grounded in the nature, purpose, and finality of the sexual faculty” and “the sexual faculty has the twofold finality of procreation and love union.”76 Curran believes that due to the focus on the twofold finality of sexual morality, sexual issues such as masturbation, artificial contraception, and homosexuality are treated morally wrong in the Catholic

73 Ibid., 72.
74 Ibid., 76.
75 Ibid.
76 Ibid., 82.
Church. Regarding the morality of artificial contraception with the relationality-responsibility model, Curran argues:

In a similar manner the sexual faculty should never be absolutized and seen only in itself but in its relationship to the person and the person’s relationship to others. Thus in the matter of artificial contraception for spouses, the good of the person or the good of the marriage relationship justifies interfering with the faculty or its act. A relationality-responsibility model logically calls for a number of changes in the contemporary hierarchical sexual teaching.\textsuperscript{77}

In other words, Curran suggests that the morality of artificial contraception as well as other issues of human sexuality should be understood in the relationality-responsibility model.

**Against physicalism.** Curran argues that the key negative aspect of the Catholic Church’s physicalism is that “the Catholic tradition has too readily identified the physical or natural with the fully human.”\textsuperscript{78} He holds that because the physical is only one part of a human person, therefore, the human person should be understood in many dimensions, for instance, “the physical, the psychological, and the sociological.”\textsuperscript{79} According to Curran, the problematic physicalism of the Church’s teaching on contraception is “ultimately based on the physical or biological finality of the sexual faculty and act,” and focuses on the physical purpose and finality of the sexual faculty and act.\textsuperscript{80} It means only focusing on the physical finality of the sexual faculty and act in itself can ignore other

\textsuperscript{77} Ibid.

\textsuperscript{78} Ibid., 154.

\textsuperscript{79} Ibid., 155.

\textsuperscript{80} Ibid., 153.
parts of human sexual ethics such as the relational, the responsible, the psychological, the spiritual, the emotional, the sociological, and the contextual.

Curran criticizes that “in the official hierarchical teaching on sexuality the methodology gives much more significance to nature and faculties than it does on the person.” According to him, “I have claimed that the official teaching is guilty of physicalism by insisting that the human person cannot interfere with the physical, biological structure of the sexual faculty or the sexual act.”

Curran points out that due to the discrepancy between Catholic teaching and Catholic practice in sexual morality, a number of Roman Catholics have been struggling or have left the church and the discrepancy between papal insistence on moral sexual absolutes and the laities’ widespread rejection of this view has “significant negative effects” in the church. He criticizes physicalism or biologism of the Roman Catholic Church and its hierarchical teaching on human sexuality, which focus on the physical structure of the act and “human reason reflecting on human nature and not directly on faith or revelation.”

**Curran on Catholic sexual teaching.** According to a moral theologian, Lisa Sowle Cahill, “Curran developed not only his distinctive moral agenda affirming freedom and conscience but also more fundamental categories, such as historical consciousness

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81 Curran, *Tensions in Moral Theology*, 102.
82 Ibid., 103.
83 Ibid., 75.
84 Ibid.
and the difference between social and personal ethics in relation to the ecclesial controversy over birth control.”

Cahill criticizes Curran’s view that Catholic sexual ethics did not change or develop at the Second Vatican Council. As she states, “if one takes a larger view of the meaning of sexuality and marriage, accompanied by an appreciation that shifts at this foundational level ultimately have repercussions at the more specific, practical level of behavior and norms, one can see that significant changes did indeed take place at Vatican II.”

In other words, Cahill argues that there was a change at Vatican II, which stops the ranking of the two ends of sex and marriage, “affirming that love gives marriage its foundation and moral orientation,” upholding responsible parenthood, and the legitimacy of intending to avoid conception. While Cahill argues there was a change at Vatican II and after Vatican II, Curran argues:

The term, the finality of the faculty and of the act and the abuse of the sexual faculty, are not used, but the basic teaching remains the same. There are many more references to the person and to the rights of persons than in the earlier documents, but the change remains verbal and does not affect the substance of the teaching.

In other words, according to Curran’s arguments, because of the methodology still based on: 1) the nature of the faculty and of the act, on 2) physicalism and biological structure of the sexual faculty or the sexual act, and on 3) a strong pronatalist position, Catholic sexual teaching went through little change or development at Vatican II. Further,

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86 Ibid., 121.
87 Ibid., 121-122.
88 Curran, Tensions in Moral Theology, 104.
because of the same methodology, the Catholic Church still condemns not only artificial contraception, but also masturbation, sterilization, divorce, artificial insemination, homosexuality, in vitro fertilization, and premarital sexuality. Substantially and practically, there were no changes on the disagreement and condemnation of those subject matters before and after the Second Vatican Council.

According to Curran, “the hierarchical magisterium must recognize, and dialogue with, the lived experience of all God’s people and with the various prophetic voices existing in and outside the church.”89 As the official social teaching’s relationality-responsibility ethical model, Curran declares that the sexual teaching should employ historical consciousness, personalism, and a relationality-responsibility ethical model and change from classicism, human nature and faculties, and a law model of ethics.90

I am in general agreement with Curran’s critique of the physicalism, which is based in his correct observation that there is placed too much of an emphasis on the individual physical act as the basis for drawing forth moral norms. Likewise I think, the Catholic teachings on sexuality too often seem to emphasize only self-giving love in marital sexuality and fail to notice self-fulfilling love. Because of the stress of self-giving love and the emphasis of reciprocal acts, the sexual pleasure which can be the main part of self-fulfilling love in the conjugal act seems to be overlooked in the official teachings.

In substance, as we will see, according to my qualitative interviews with South Korean Catholic married women, self-fulfilling love seems to play a more prominent role in sexual intercourse between spouses than self-giving love and procreative purpose. As a


90 Curran, *Tensions in Moral Theology*, 107.
matter of fact, according to the interviewees, the sexual act means such as a way of bodily communication, a way to relieve a conflict or stress between spouses, a way to have sexual pleasure, and sometimes as a spousal duty or unwilling offering a body for a spouse’s sexual desire. In short, sexual intercourse in practice means more than just “self-giving” between a husband and a wife. It expresses the relational situations in which the couple is faced physically, psychologically, emotionally, financially, and socially. Therefore, as Curran indicates, the emphasis of self-giving love in the conjugal act can shrink the full and deep meaning of the marital sexual act.

Rosemary Radford Ruether

The ideals of marital sexuality. Rosemary Radford Ruether, a feminist theologian, upbraids the ideals of marital sexuality of Catholic moral teaching with a careful analysis of the unrealistic and impractical aspects of the birth control method, NFP. She says “the church should clearly recognize that the relational aspect of the marital act is a genuine value and purpose in itself, and cannot just be subsumed as a means to the end of procreation.” 91 She argues that the sexual act exists on several levels of meaning and purpose; 1) “it is a biological act whose purposive goal is the generation of a new human being,” and 2) “it is an act of love in which the married couple express their union with each other.” 92 According to her, the sexual union “does not just exist on

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92 Ibid., 140.
a physiological level, but it expresses the mutuality of their union on all levels of their being, their total I and Thou with each other.”93

Ruether emphasizes the relational function of the marital sexual act beyond the unitive and procreative meaning and purpose as defined by the Catholic Church. To her, even procreation is related to not only having a child in itself, but also the procreative purpose extends to nurturing a child, the union of the couple, and responsibility to the child. Accordingly, Ruether argues that primary purpose of marriage is “the use of the sexual act for its purely relational function.”94

Ruether argues that the idealistic vision of marital sexuality tends toward a falling away from the ideal of full mutuality in the relationship because it fails to notice the different sexual desire and cycle between a man and woman and the different social contexts the man and woman are faced with in their everyday lives. Regarding birth control methods, she supports oral contraceptive pills, which “are medically safe, would seem to hold out the best possibility for a reasonable balance of goals and ideals in marriage,” whereas she points out the finality of permanent sterilization and psychological intrusion of the sexual act itself with using “the mechanical or chemical contraceptive” as well as the insecurity of the rhythm method.95 Therefore, Ruether indicates the gap between the ideals of marital sexuality and the existential situation and

93 Ibid.
94 Ibid., 143.
95 Ibid., 144-146.
proposes oral contraceptive pills as the second best possibility for the conjugal life with full union and harmony.

**Right to control birth (against the Church’s absolutism).** Ruether argues that progressive Catholics, including herself and Catholic movement in the world in the twenty-first century, do not equal the Vatican. Progressive Catholics, she states, “refuse to surrender our church to fearful, reactionary leaders in its ecclesial hierarchies,” and she declares that “we should not equate Vatican policies with essential Roman Catholicism. Our foundations lie in Jesus Christ and a vision of the church as a new humanity freed from all forms of violence and oppression.” Ruether suggests that “we must call on the Vatican to repent of its teachings about birth control, about the exclusion of all women and married and gay men from ordination, about the spiritual superiority of celibacy, and about the divine sanction for patriarchal hierarchy.”

Regarding the birth control issue, Ruether upbraids the Catholic official teaching on birth control and the Vatican’s wrongheaded pro-life ethics. She indicates that the Catholic Church’s absolutism and unchangeable teaching authority fail to notice new information and social changes and, especially, fail to protect the well-being of women and children. Ruether argues that the Vatican’s rejection of the result of the Birth Control Commission was mainly due to the concern of loosing of their authority and power even though they knew many Catholic lay people’s experiences of NFP such as ineffectiveness, anxiety, and hardship. Accordingly, Ruether argues that the Vatican’s pro-life ethics

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97 Ibid., 6-7.
which condemn contraception and abortion as intrinsically evil, force “women to resort to illegal abortion with the high levels of death and injury due to unsafe conditions.”

Likewise it overlooks the fact that contraception can reduce the need for abortions greatly. Ruether indicates that the Vatican lays absolute moral weight on human life before birth, even the first day of conception, whereas it pays much less attention to human life after birth.

Ruether asserts that official Catholic ethics should recognize that women’s situations understood socially, economically, psychologically, and culturally might be factors that should be weighed against the value of a potential child. Additionally it should recognize also how the needs of children already born also should legitimately weigh in to a decision regarding birth. Therefore, Ruether suggests, “Catholics should recognize the need for effective, affordable birth control” and “abortions should be reduced as much as possible, but not by coercing women to bear children they feel they cannot bear. Rather women should be helped as much as possible to avoid unintended pregnancy in the first place.”

Ruether proposes that the official Catholic teachings on life should be based on supporting the ethic of life before and after birth, and at the same time, she warns the Vatican that its “denial of reproductive agency to women is one of the most egregious forms of violence against women and children.” In short, she argues the ethic of life

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98 Ibid., 49.
99 Ibid., 57-58.
100 Ibid., 59.
should be focused on the well-being and flourishing of women and children and not on the concern of any loss of the Vatican’s authority and power.

**Defects of the rhythm method (NFP).** Ruether lays weight on authentic human will in the sexual act, especially on birth control. According to her, an authentic act of will on love including the sexual act and having a child as an extended act of the sexual act “should be given freely, without external force.” ¹⁰¹ This is why she disagrees with the rhythm method as well as traditional artificial contraception except the oral pills. In other words, to her, birth control methods with natural as well as artificial ways except the oral pills impair the authentic human will for the ideals of marital sexuality, which is a relational function. ¹⁰²

By suggesting a necessity of birth control in actual sexual life, Ruether criticizes the insecurity of the rhythm method and its distortion of the meaning of the marital sexual act. First, as she argues, the rhythm method is very insecure in the actual sexual life due to the insecurity of the safe period, which is the time to be encouraged for the sexual act if the couple would like to avoid pregnancy. Because of different and various menstrual periods and ovulation cycles, the safe period in the rhythm method for the sexual act to avoid pregnancy cannot be applicable to all married couples. Second, as Ruether notes: “another common fallacy found in discussion of the rhythm method, particularly by the clergy, lies in the attempt to promote periodic abstinence as a kind of

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¹⁰¹ Ruether, “Birth Control and the Ideals of Marital Sexuality,” 141.

¹⁰² Ibid., 145-146.
ascetic discipline.” According to her, abstinence for fertile days requested by the clerical moralist misses the essence of the marital relationship. In other words, the marital relationship does not mean “a purely egotistic sexual drive,” which needs to be satisfied, rather; it means “the married person has sublimated the sexual drive into a relationship with another person.” She argues:

Essentially the rhythm method is debilitating because it imposes an abnormal regime on the expression of marital love. It treats marital love as an appetite which can be scheduled, like eating and sleeping. But marital love, if it is really developed, has been sublimated from the appetite level. It has been raised into the expression of a relationship, and therefore needs to follow the laws of that relationship, and to flow with the dynamics of that relationship.

Clearly for Ruether, the relational function of marital act means that it needs to be done at the required moment of solace, reassurance, renewal of the couple’s bonds with each other, “not ten days later that they need to be able to use the sexual act.”

**Ruether on birth control.** Ruether emphasizes the relationship as a primary moral factor in marital sexuality, such as the relationships between spouses and between children and parents. She argues that the ethics of life and birth control should consider the well-being and flourishing of women and children and of family life in general prior to the infallible Church authority and power.

I strongly agree with Ruether’s views and arguments on the marital sexuality and the ethic of life and birth control. Ruether proposes oral birth control pills as a proper

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103 Ibid., 148.
104 Ibid., 149.
105 Ibid., 150.
106 Ibid.
ethical method, but she fails to notice the side effects of the oral contraceptive pills.\textsuperscript{107} Therefore, as long as artificial contraception is morally permissible, women should be the primary person to choose a contraceptive method that may fit their lives and be best for them.

\textbf{Julie Hanlon Rubio}

In her book, \textit{A Christian Theology of Marriage and Family}, Julie Hanlon Rubio presents a renewed understanding of a Christian theology of marriage and family with exploring the Catholic ideals of marital and parental commitments in contemporary society such as the new Catholic marriage liturgy, the tradition, the human sciences, scripture, her own experience as a wife and a mother, the dual vocation of Christian Parents, and divorce and remarriage in Christian families. Even though Rubio disagrees with John Paul II on a few parts such as the mothering role of women and the complementary roles of husband and wife, she quotes frequently from the teaching of the Pope John Paul II in her understanding and development of the sacrament of marriage and family.

Rubio criticizes a feminist theological perspective which focuses on marriage as relationship but pays too little attention to marriage as a sacrament. For instance, according to Rubio, Margaret Farley and Christine Gudorf put a great weigh on

\textsuperscript{107} “This medication [oral contraceptive pills] may cause dizziness, headache, lightheadedness, stomach upset, bloating, or nausea. If these effects persist or worsen, contact your doctor. Notify your doctor if you experience: severe depression, groin or calf pain, sudden severe headache, chest pain, shortness of breath, lumps in the breast, weakness or tingling in the arms or legs, yellowing of the eyes or skin. If you notice other effects not listed above, contact your doctor or pharmacist.” accessed August 17, 2012, http://www.medicinenet.com/oral_contraceptives/page2.htm.
relationships in marriage, but not much about sacramental marriage.\textsuperscript{108} She claims that putting a great weigh on a relationship of love between a man and woman rather than the sacramental bond between a husband and a wife moves people away from God or “make[s] it more difficult for persons to be in relationship with God.”\textsuperscript{109} Rubio affirms marriage as communion and quotes the teaching of John Paul II as “the family, with or without children, becomes a communion of persons dedicated to the church and the human family,” and presents her renewed vision of marriage and family with supporting Pope John Paul II’s Catholic social teaching.\textsuperscript{110} She argues that justice and love are connected in family life and “the love among parents and children flows outward into social, communal, and political commitments” that incorporate the values of solidarity and the common good from the Catholic social teaching.\textsuperscript{111}

Rubio does not discuss contraception as an issue or as a problem in her book, but in her article, “Beyond the Liberal/Conservative Divide on Contraception: The Wisdom of Practitioners of Natural Family Planning and Artificial Birth Control,” Rubio discusses contraception. She seeks the common ground and dialogue between the NFP users and contraception users by presenting five new approaches on the meaning of marital sexual

\textsuperscript{108} According to Rubio, “Farley has moved far away from the theological debates over whether consent during the marriage ritual or sex on the wedding night sealed the sacramental bond between husbands and wives…Gudorf attempts to place pleasure in a central place, alongside procreation and union, the two traditional ends of sexuality in Catholic thinking… Her work moves away from the traditional Catholic understanding of sexuality, and even toward an openness to nonmarital forms of relationships. She does not find in sacramental theology an adequate model for the sorts of relationships in which contemporary Christians find themselves.” Julie Hanlon Rubio, \textit{A Christian Theology of Marriage and Family} (New York and Mahwah, N.J.: Paulist Press, 2003), 79.

\textsuperscript{109} Ibid.

\textsuperscript{110} Ibid., 85.

\textsuperscript{111} Ibid., 183.
act: 1) total self-giving, 2) communication and intimacy, 3) enhanced sexual relationship, 4) increased mutuality, and 5) sexuality linked to spirituality.¹¹² Her approach to contraception and sexual ethics places emphasis on the common experiences between the NFP users and artificial contraception users without judging which one is moral or immoral. The following are her five reframing approaches on the birth control controversy and on the contemporary sexual ethics.

**Total self-giving.** Rubio notes how both NFP defenders and the advocates of artificial contraception have the same goal of self-giving in their marital acts even though the methods to reach this goal are different. In the case of NFP users, “a sexual relationship shaped by natural family planning celebrates and encourages self-donation in the relationship of the couple, which spills over to the children, and ultimately, to the world” while artificial contraception users state that self-giving for the contraception users is also parental “even though spouses are not always open to procreation.”¹¹³ Rubio argues that even though there is a disagreement on the way to achieve self-giving, a common ground exists between the two groups.

While much of Rubio’s approach is admirable, still I agree with Rosemary Radford Ruether’s critique of Rubio’s stress on self-giving in the marital act. Ruther points out the difference between the ideal meaning of the mutual self-giving and the actual practice of the sexual act in the real marriage lives.¹¹⁴ My field research with

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¹¹³ Ibid., 280.

qualitative interviews of Korean Catholic married women strongly supports Ruether’s point. Not every married couple feels the mutual and “total self–giving” in practice whenever they have sexual intercourse. According to my interviews with ten married women, three out of ten said they have an experience of feeling self-giving during the sexual intercourse with their spouses, but not all the time. Rubio’s supporting of self-giving from the NFP advocates, which means total self-giving with sacrifice required “to the spouse, to the children, and to the world,” seems to compel women to sacrifice more than men, especially, when unwanted pregnancy happens due to the failure of NFP. 115 As a matter of fact, my female interviewees who experienced an unplanned pregnancy due to the failure of NFP had to make a difficult choice between an abortion or a sacrifice of themselves for the new life. Therefore, I join Ruether in her criticism of the emphasis on total self-giving in the marital act, especially with insecure birth control method like the NFP is likely to be oppression toward women.

**Communication and intimacy.** According to Rubio, beyond NFP and contraception, married couples “seek high quality marital relationships and embrace practices that enhance intimacy.” 116 The advocates of NFP emphasize improvements of communication, especially, communication about fertility between husbands and wives and other ways of showing affection during the fertile times “such as sharing a candlelight dinner, meditating or praying together, and talking about feelings of love or desire,” further, “alternatives to sex… seem to increase intimacy in the lives of couples

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116 Ibid., 282.
committed to NFP and better quality relationship may even contribute to more lasting marriages."

In the case of contraception users, like the NFP users, Rubio notes they emphasize communication and intimacy in their marital relationship by arguing that periods of planned abstinence damages the maintenance of intimacy in marriage. As contraceptive users argue: “Intimacy would be impeded by undesired abstinence,” Rubio indicates that both advocates are concerned carefully with communication and intimacy.  

**Enhanced sexual relationship.** Rubio states the both sides of NFP and contraception users consider enhanced sexual relationship as a significant part of the sexual intercourse. According to her, the NFP users hold that the period of abstinence enhances the sexual relationship. In other words, having sexual intercourse after abstinence for the fertile days can make the sexual pleasure more enhanced. For the artificial contraception users, the diminished fear of pregnancy can enhance the sexual pleasure and “contraception advocates emphasize the good of sexual pleasure and believe that birth control enhances their ability to become vulnerable enough to give and receive it.”

The emphasis of the enhanced sexual pleasure of the NFP users after abstinence for a while seems that the advocates of NFP focus on the physical sexual pleasure without considering psychological or mental comforts. In fact, according to my interview, 

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117 Ibid.

118 Ibid., 283.

119 Ibid., 285.
most NFP users among the interviewees complain about the fear of unwanted pregnancy and they state the sexual intercourse after menopause enhances the sexual pleasure because of the loss of any fear of pregnancy even though they may feel a vaginal pain sometimes due to not enough cervical fluid. It is necessary to recall that sexual pleasure is powerfully impacted on by psychological and emotional conditions as well as physical conditions. Therefore, the meaning of sexual pleasure in the marital intercourse should consider not only physical pleasure, but also mental and emotional pleasure. Even though Rubio introduces the sexual pleasure of contraception users, she seems to put more weigh on the NFP users’ physical sexual pleasure after abstinence than emotional and psychological pleasure.

**Increased mutuality.** Regarding mutuality, Rubio argues that both NFP and artificial contraception users consider mutuality as a significant part of their sexual lives. Rubio examines the two approaches—NFP and birth control—and assesses them according to the relative weight of responsibility that they put on the woman. She criticizes a woman’s higher amounts of responsibility over a man’s among contraception users for “most contraceptive methods are the responsibility of women alone,” however NFP, Rubio notes, “requires the participation of men and women, because it takes two to abstain.”

However, according to the sociological quantitative survey data and my qualitative interviews of South Korea, the most popular contraceptive methods currently among the Korean Catholic married couples are permanent methods (44.8%) such as

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120 Ibid., 286.

121 See Chapter Four in this dissertation.
tubal sterilization and vasectomy, and the most popular temporary contraceptive method is the use of the condom by the man. Tubal sterilization for women was especially encouraged by the Korean government for the population regulation in the past, but today, vasectomy users are increasing among the married couples who chose permanent methods and it is the most preferred contraceptive method by Korean married women today.

In addition, many Korean married couples use condoms, sometimes along with the rhythm method. The reports from Korean Catholic married people show that contraceptive methods are not the responsibility of women alone. Rather, today many men are becoming the primary contraceptive agents. Whereas oral contraceptive pills for women are the most popular contraceptives in the U.S. (28%), only 2.7% of Korean women aged in fifteen to forty four are using the oral pills.122

Therefore, Rubio’s critique regarding contraception users as gender inequality due to only women’s responsibility alone of contraceptive methods seems to focus on only the experiences of U.S. women. In addition, Rubio argues that “NFP users, particularly women, have higher levels of self-esteem that they attribute to increased awareness of and control over their bodies.” 123 But in the case of Korean NFP users, when unexpected pregnancy happens, women are likely to be left primarily in charge of the accidental pregnancy. Most of my interviewees who have had an experience of accidental unexpected pregnancy after using NFP went to the hospital alone to have an abortion.

122 See Chapter Three in this dissertation.

123 Rubio, “Beyond the Liberal/Conservative Divide on Contraception: The Wisdom of Practitioners of Natural Family Planning and Artificial Birth Control,” 286.
They expressed that the accidental pregnancy happened in their own body, so they should be the primary decision makers how to take care of this issue. Sometimes, women who have an unexpected pregnancy are forced to have an abortion by their family members including their husbands. Therefore, I argue that asking women to be open to a new life during the sexual intercourse in marriage can be a way of oppression against women when they are not available to be open to a new life due to various family or personal situations such as financially, sociologically, psychologically, physically, and environmentally. For me, opening to a new life all the time in marriage is idealistic and it can be possible to a limited number of families. To some family, even though they wish to be open to a new life all the time, because of their real lived situations they cannot be so.

**Sexuality linked to spirituality.** According to Rubio, both NFP and contraception users seek to link sexuality to spirituality. For NFP users, “openness to procreation is a fundamental part of openness to God,” and “self-control is viewed as necessary to making sexual behavior fully human…NFP calls for virtues (chastity), thus it fits more easily into religious life,” and for contraception users, having freedom to have sex by their sexual desire can find “themselves more open to each other, their children, and their world,” and they believe it leads to spiritual growth.124 Rubio notes that NFP users are linked more closely to spirituality than contraception users because NFP users are totally open to fertility and depend on God’s plan for the family while contraception users focus on the goodness of the body rather than the virtue of chastity.

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124 Ibid., 289-290.
**Sexual ethics, equity, and a critique of Rubio.** Rubio argues that the dialogue between NFP users and contraception users develops “an experientially-based theological vision that can serve as a guide for the sexual relationships that are central in the lives of most Christians.”125 Regarding Rubio’s perspective on marriage and family, Curran indicates that she wants to hold the ideal of marriage and family following the teaching of John Paul II by developing a sacramental understanding.126

As Curran criticizes her, even though Rubio argues that her hope is to seek common ground and dialogue between the NFP users and contraception users beyond the liberal and conservative divide on contraception and she also emphasizes experientially-based theological vision. To me she seems to put a weight on NFP advocates in comparison with artificial contraception users, and her approach to NFP seems to be idealistic with less attention to experience and the context of the practitioners.

Her new reframing of NFP seems to miss a few crucial facts when she suggests the good points and advantages of NFP. First, she does not discuss circumstances concerning a married couple, such as their socio-economic situation. Her support of total self-giving to the spouse, to the children, and to the world seems to be idealistic and even though she emphasizes listening to experiences from both NFP and contraception users, her approach to advocate NFP seems to overlook the high rate of failure of NFP and the discourse and the concrete experiences of the users after the failure. Second, when she describes enhanced sexual pleasure after abstinence for NFP users, she seems to focus too

125 Ibid., 294.

much on sheer physical pleasure and sexual desire without considering other psychological and emotional aspects. Ironically, in her book, *A Christian Theology of Marriage and Family*, Rubio criticizes Gudorf as her attempt to place sexual pleasure in a central place. Therefore, even though Rubio tries to advocate both sides, NFP and contraception and seeks a common ground, she seems to put more weight on NFP than contraception.

**Other Revisionist Approaches on Contraception**

**John T. Noonan**

John T. Noonan is a philosopher, jurist, historian and prominent lay Catholic intellectual, whose many works on the history of Catholic moral reflection have proven widely influential. He is the author of the book, *Contraception: A History of Its Treatment by the Catholic Theologians and Canonists*, and in it, Noonan presents the teachings of the theologians and canonists of the Catholic Church on contraception throughout history from 50 to 1965 in western Europe. One of his recent books, *A Church That Can and Cannot Change*, Noonan demonstrates how the moral teachings of the Catholic Church such as doctrinal changes or developments have changed and continue to change throughout Christian history by examining specific issues like slavery, usury, religious freedom, and divorce (in still progress). However, he did not deal with contraception as a main issue in the book.

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In *The Church and Contraception: The Issues at Stake*, Noonan deals with the issue of contraception and holds that contraception is required to reconcile rationally the demands of conjugal love and the requirement of responsible procreation.\(^{130}\) He insists that a new balance must be developed in the value of procreation, the expression and perfection of the marital love, responsibility for the education for children, and mature liberty exercised by human conscience. In addition, Noonan argues that through artificial contraception, the rational reconciliation of conjugal love and procreation can be accomplished.

Noonan presents three valid reasons for change to support contraception; 1) the requirements of conjugal love, 2) the responsibility for education, and 3) the exercise of mature liberty. First, regarding the requirements of conjugal love with emphasizing the change of meaning of conjugal love in the Second Vatican Council, he argues:

> The Council admitted that the values of responsible parenthood and conjugal love might be in conflict...contraception is indeed the obvious rational way to reconcile the demands of conjugal love and the requirement of responsible procreation.\(^{131}\)

Second, regarding the responsibility for education, Noonan points out the misrepresenting of the classical Catholic doctrine on procreation, “the more the better.”\(^{132}\) He argues:

> In the classic formula there is a built-in tension between procreation and education. Too much procreation may endanger the education of existing...

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\(^{131}\) Ibid., 11.

\(^{132}\) Ibid., 12.
offspring…If couples may virtuously and lawfully procreate only as many children as they can educate, and if education today is a burdensome, complicated task of moral and intellectual guidance, then contraception should be permissible to prevent procreation of children who will be deprived of education.133

Third, concerning the exercise of mature liberty, Noonan puts an emphasis on educated Christian’s conscience. He says:

The Christian people, if educated, can find in their consciences better guides to protect the values the law secures. In this area the testimony of Christian couples seeking to live virtuously has weight; and as to contraception the quasi-unanimous testimony is that the present law in today’s world seems unintelligible.134

In other words, while supporting change on contraception in the Catholic teaching, John Noonan asserts “change is not impossible. No unusual act of repudiation of the past is required. . . if the considerations favoring change hold their present force, change will occur.”135 As Noonan makes clear, the Church’s position, teachings, and doctrines have changed throughout Christian history on a number of issues such as slavery, usury, and religious liberty. I argue that the teaching of the regulation of birth is similarly an area where the Church needs to reform her position.

Christine E. Gudorf

In her book, *Body, Sex, and Pleasure*, Christine E. Gudorf, a feminist Roman Catholic moral theologian, presents critical arguments of the Christian tradition and teaching on sexuality and suggests a need to be changed radically. She criticizes the

133 Ibid.
134 Ibid., 14.
135 Ibid.
patriarchal, misogynist, and heterosexist attitudes on the Christian tradition and puts the
primacy on the biological and social sciences and contemporary human experience to
criticize scripture and tradition. She proposes “sexual pleasure,” more precisely, mutual
sexual pleasure as the primary ethical criterion for evaluating sexual activity.\textsuperscript{136} She
develops the concept of “body right”- “human persons have a moral right to control their
own bodies,” for dealing with the issues, sexual abuse and violence, sexual victimization,
sexual relationships, contraception, and sterilization.\textsuperscript{137}

In relation between bodily experience and spirituality, Gudorf argues:

1) bodily experience can reveal the divine, 2) affectivity is as essential as
rationality to true Christian love, 3) Christian love exists not to bind
autonomous selves, but as the proper form of connection between beings
who become human persons in relation, and 4) the experience of body
pleasure is important in creating the ability to trust and love others,
including God.\textsuperscript{138}

In other words, Gudorf regrounds traditional Christian spirituality in embodiment based
in reflection on embodied human experience.

Gudorf supports contraception and even early abortion under some circumstances
and gives substantial reasons for supporting contraception in her essay, “Contraception
and Abortion in Roman Catholicism.”\textsuperscript{139} First, she argues the hierarchical church
teaching on contraception can and should be changed as other teachings have been

\textsuperscript{136} Christine E. Gudorf, \textit{Body, Sex, and Pleasure} (Cleveland, Ohio: The Pilgrim Press, 1995), 116-127.

\textsuperscript{137} Ibid., 160-204, at 161.

\textsuperscript{138} Ibid., 217-218.

\textsuperscript{139} Christine E. Gudorf, “Contraception and Abortion in Roman Catholicism,” \textit{Sacred Rights: The Case for
Contraception and Abortion in World Religions}, ed. Daniel C. Maguire (New York: Oxford University
changed throughout history. Second, church teachings on human sexuality and reproduction have been rethought and reinterpreted by the majority of Catholics as well as priests and bishops around the world. Third, despite the opposition to contraception by the church, many Catholic populations across the world have ignored the ban and practiced contraception for controlling fertility on a massive scale. And fourth, the hierarchy of the church is not “monolithic on the question of contraception”140 because in churches of some nations, individual conscience is respected more than it is in the Catholic Church’s hierarchy. She argues that, fifth, human fertility should be regulated for “the need for development in poor nations and the inevitable augmentation of present ecological pressures from such development.”141 Also, she recommends that contraception needs to be “the primary method of fertility limitation” rather than abortion, which can be better used as “a back-up for contraception.”142

Therefore, on the basis of these critical reasons, she argues that contraception should be a moral method for population management and a responsible way to diminish the high rates of abortion.

**Margaret A. Farley**

In her book, *Just Love*, Margaret Farley presents a new feminist ethical framework for Christian sexual ethics. She recognizes today’s pluralism and diversity of the cross-cultural and interreligious perspectives with regard to sexuality and develops
the four sources for Christian sexual ethics: scripture, tradition, secular disciplines of knowledge, and contemporary experience. Also, she proposes seven norms for just sex with respect for the autonomy and relationality as a basis for the norms: do no unjust harm, free consent, mutuality, equality, commitment, fruitfulness, and social justice. She applies these norms to same-sex as well as to heterosexual relationships.

In regard of the procreation and fertility issue, Farley presents “relationality” in the form of sexual reproduction in her sixth norm “fruitfulness,” and she stretches the norm from the birth of children to “the rearing of children, the initiation of new generations into a culture and civilization, and the ongoing building of the human community.”

Farley views the concept of procreation or fruitfulness of human sexuality beyond the traditional heterosexual biological and physical relationship and explains sexual reproduction in her framework such as “the fruit of a love for which persons in relation are responsible” and expands the ways to “nourishing other relationship, providing goods, services, and beauty for others, informing the fruitful work lives of the partners in relation, helping to raise other people’s children, and on and on.” Eventually, according to Farley, all of those ways are required in “a just love” and “sexual love insofar as it is just, must be fruitful.”

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144 Ibid., 228.

145 Ibid.
Farley brings a social justice norm in the context of sexual ethics by bringing the concept of “responsibility” because social cooperation in community whatever the sexual status of persons is required in human society, and humans as sexual beings have “claims to respect from the Christian community as well as the wider society.” accordingly, she argues that the form of social justice requires responsibility for the consequences of love and sexual activity and views the consequences of the sexual activity not just a matter of the two persons, but a matter of society. In other words, for Farley, sex and procreation are not about only two persons’ sexual matter or decision such as self-giving love, genital intimacy, sexual pleasure, or giving birth, but about issues related to social and communal obligations, well-being for one another, a reasonable level of human flourishing, and eventually all of them have a powerful impact on the common good.

Therefore, this statement shows her view on sexual ethics well, especially in regard of the morality of human procreation: “no children should be conceived who will be born in a context unconducive to their growth and development in relationships, or unconducive to their ultimately becoming autonomous, morally responsible for themselves.”

Todd A. Salzman and Michael G. Lawler

In their book, *The Sexual Person: Toward a Renewed Catholic Anthropology*, Todd A. Salzman and Michael G. Lawler propose a renewed principle of human sexuality and developing sexual marital morality. Their views on human sexuality are

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146 Ibid.
147 Ibid., 271.
rooted in a more personalistic and relational understanding of natural law theory. They propose a renewed Catholic anthropology on morality of marriage dealing with contraception, cohabitation, and the process of marriage, homosexuality, and artificial reproductive technologies. According to their renewed moral principle of human sexuality:

[Conjugal] love is uniquely expressed and perfected through the marital act. The actions within marriage by which the couple are united intimately and chastely are noble and worthy ones. Expressed in a manner which is truly human, these actions signify and promote that mutual self-giving by which spouses [immediately] enrich each other [and mediately enrich their family and community] with a joyful and thankful will.\(^\text{148}\)

The further principle of human sexuality, according to Salzman and Lawler, is that sexual acts should be just and loving, and holistically complementary sexual acts are moral.\(^\text{149}\)

Regarding the renewed principle of contraception, Salzman and Lawler focus on the two equal ends of the marital sexual act in the contemporary Catholic tradition: unitive and procreative. Their argument and view on the morality of the marital sexuality and contraception lay an emphasis on 1) the totality of the conjugal love and 2) the relationship between spouses (marital relationship) and among parents and children (familial relationship).

With regard to the totality of the conjugal love, they state that “this totality is the totality of the couples’ relationship as it is personalized, legalized, and covenanted in


\(^{149}\) Ibid.
marriage and the totality of the family they create together.”\textsuperscript{150} They point out the weakness of traditional Church arguments such as the ignorance of human experience, absolute moral principle, and ideal and abstract character. “Our approach interprets human ‘nature’ as the concrete, socially constructed ‘nature’ persons share in the less than ideal and frequently wounded and messy circumstances of their real, historical lives.”\textsuperscript{151} They argue that the totality of the marriage “embraces the good of each partner, the good of their relationship, and the good of any children who may be born from their marital intercourse.”\textsuperscript{152}

Arguing the possibility of separation of the two meanings of the conjugal act during the infertile period, Salzman and Lawler state that the inseparable connection between unitive and procreative meanings of the marital act in the teaching of the Catholic Church has been widely and convincingly challenged. In regard of the practice of NFP, they argue:

both scientific and experiential, that women in general experience the peak of their sexual desire and responsiveness immediately before, during, after ovulation, it is arguable that the decision not to have intercourse at that time is acting against total self-giving and nature, at least as much as any act of artificial contraception.\textsuperscript{153}

Salzman and Lawler seem to view the issue of birth control as requiring a broader understanding of the totality of marriage. For them, NFP is against the totality of the

\textsuperscript{150} Ibid., 187.
\textsuperscript{151} Ibid., 186.
\textsuperscript{152} Ibid., 187.
\textsuperscript{153} Ibid., 188-189.
conjugal love because a married couple has to avoid the sexual intercourse for a certain period of time. They articulate that avoidance is against total self-giving and nature.

Unlikely to the conservative argument, they understand the meaning of nature in particular historical contexts such as “the ‘nature’ of marriage and the ‘nature’ of not human beings in general but spouses and parents in particular, the nature of husband and wife and of father and mother.” In other words, it can be argued that their criteria of morality, especially for the morality of marital sexuality, it is the marital and familial relationship. They argue:

to be moral, both conceptive and natural and artificial contraceptive intercourse must take place within the context of these various marital and familial goods…Not every married couple need procreate, or even be open to procreation, every time they have intercourse; indeed, as Pius XII taught, not every couple need procreate at all.

In other words, they conclude that some intentionally conceptive and nonconceptive sexual acts, whether naturally or artificially, are moral if they promote the complementary, just, and loving marital relationship between the spouses and/or the just and loving relationship between parents and their children while some sexual acts are immoral if they damage the relationships between the spouses and/or parents and children.

On the emphasis of the nature of human sexuality with presenting different and renewed natural law theory from the contemporary traditionalists’ new natural law theory (NNLT), Salzman and Lawler interpret the meaning of nature newly in the contextual relationship among people and they argue that artificial contraception in the

154 Ibid., 189.
155 Ibid., 190.
understanding of marital and familial relationship and circumstances is moral. Therefore, their new understanding of the morality of the conjugal act and birth control is that they approach the moral issues with the new frame of the contextual personalistic relationship between husband and wife and among parents and children.

**Conclusion**

In this chapter, I have summarized two general approaches—the traditionalist and the revisionist—on the today’s birth control debates and noted some differences and distinctions within each. Traditionalists tend to support Pope Paul VI’s reasoning in *Humanae vitae* and support NFP as morally permissible and as the only means for regulating birth. They condemn artificial contraceptives as an intrinsic evil. The revisionist school, on the contrary, dissenting from the Church’s teaching in *Humanae vitae* and argues that artificial contraception should be permissible morally for family planning in marriage. Their criticism is based in their judgment that the Pope’s and the traditionalist rely on reductionistic appeals to nature, to biological structure and to physical anatomy as the basis for establishing sexual moral norms. Revisionists want to frame these acts differently by considering a moral agent’s circumstances, their intentionality, their experiences, relations with others, and proportional contexts around the moral acts.

In the next chapter I will examine some main features of the sexual culture of South Korea in general and survey contemporary issues of sexuality, family health, fertility, and the use and attitude of contraception in South Korea. This analysis will provide a better understanding about South Korean understanding before I examine South
Korean Catholics’ real experiences in detail. As a revisionist, my goal in this project is to correlate the modern Catholic magisterial teaching on birth control and the theological debates that *Humanae vitae* triggered with the lived experiences and commitments of birth control in the sexual lives of Catholics in South Korea with focusing on the moral agent’s circumstances, their intentionality, their experiences, relations with others, and proportional contexts around the moral acts through my qualitative interviews.
CHAPTER THREE

INTRODUCING ISSUES OF CONTEMPORARY SEXUALITY AND SEXUAL CULTURE IN SOUTH KOREA

In Chapter One, I surveyed the Roman Catholic Church’s teachings on contraception articulated in encyclicals, addresses, and ecclesial documents. In Chapter Two, I explored the debates triggered by Pope Paul VI’s promulgation of *Humanae vitae* in which he ratified the Church’s historic condemnation of artificial birth control. I explored the main lines of argument of those theologians and Catholic ethicists who supported the reasoning of *Humanae vitae* (traditionalists) and those who voiced strong dissent from the magisterial views of birth control and who called the Church to revise her teaching on birth control (revisionists). After surveying two different approaches, I supported the revisionists’ perspectives with my constructive theological ethical argument that the Church’s condemnation of artificial contraception is impractical and pastorally hurtful. I concluded that the main lines of the revisionist view are correct and that the Church teachings on contraception should be reconsidered and reshaped.

My main argument developed in Chapter Two holds that the magisterium’s and the traditionalist theologians’ reasoning for continuing the Church’s condemnation of artificial birth control simply fails to engage human experience, especially the lived experience of heterosexual married Catholic lay people. I agree with the many Catholic
revisionist theologians who call the Church to change its teaching on birth control. Many of them have brought a focus on the experience of married couples from European and North and South American perspectives and in this dissertation I want to support the arguments of Catholic revisionists by examining the experience of South Korean heterosexual married Catholic lay people regarding marital sexual life, their faith and their attempts to respect the Church’s views on birth control. In order to better understand the experience and perspectives of South Korean heterosexual married Catholic women I survey in this chapter quantitative data regarding South Korean sexual culture in general and sexual and reproductive practices of South Korean married couples in particular. I supplement this data in Chapter Four with qualitative data drawn from my in-depth ethnographic interviews of ten South Korean heterosexual married Catholic women.

In this chapter, I offer quantitative data regarding the sexual experience, practices, and understandings of South Korean society in general and of heterosexual married Catholics in particular. In other words, I offer general information regarding South Korean sexual culture and its contemporary challenges in order to help lay the context for my analysis and interpretation of my ethnographic interviews in Chapter Four of the specific challenges, concerns, and tensions faced by South Korean heterosexual married Catholic lays’ experiences of birth control, their sexuality, and faith.

I think that my study in this chapter of regarding general information about the sexual culture of South Korean society will provide an important basis of understanding that will help me interpret and analyze my qualitative data in the next chapter regarding South Korean heterosexual Catholic women’s experiences. By engaging the quantitative
data regarding ordinary people and Catholics in this chapter, I can compare them and
learn how different they are and how significantly Christian faith and the Church’s
teaching affect Catholics’ experiences of birth control, fertility, and sexuality. In addition,
as mentioned before, I bring out a South Korean case study regarding the lived
experiences on birth control through qualitative data, ethnographic interviews in order to
see if this data will support my constructive arguments and analysis developed in chapter
two. According to my study, for many people, their decisions regarding birth control and
marital sexuality seem governed more by practical concerns regarding financial
constraints, family concerns, and career considerations than by papal teaching and faith
commitment. For instance, when some of my interviewees made a plan for having a child,
they had to consider their practical factors such as child-rearing, finances, childcare, and
career more than religious teachings or faith. For these interviewees, even though their
faith affected their family planning, it did not seem to be the primary concern. In other
words, in order to lay the context for my qualitative data centered in my interpretations of
my interviews with ten South Korean heterosexual married women, I explore various
information and backgrounds about today’s South Korean society. In addition, these
quantitative data will allow me to compare and contrast the experiences of my ten South
Korean Catholic heterosexual married women with more general finding regarding South
Korean Catholic heterosexual married experience. In other words, I use quantitative data
regarding South Korean Catholic married lay people as the secondary data to support my
constructive arguments along with the ethnographic interview data as the primary
resource for understanding.
To offer the contextual background, this chapter will focus upon three main areas of analysis. First, I present a range of surveys that shed light on the general sexual culture of South Korea, specifically focused on today’s situation of South Korean sexual issues such as sex education, teenager’s sexuality, sexual violence, the prevalence of premarital sex, abortion rates, and the attitude and use of birth control. For this material, I rely heavily on sociological sources on South Korean culture and morality, statistical data, quantitative survey data, and news articles.\(^1\) Second, I deal with quantitative survey data regarding contemporary South Korean fertility, the attitude and use of contraception, and family health in order to offer a comparative basis to enable a better understanding of the attitudes and practices of South Korean Catholics regarding matters of sexuality and contraception. The last part is about quantitative data regarding South Korean Catholic heterosexual married people’s perspectives on topics such as contraception, abortion, family, marital sexuality, fertility, and religious faith.

In order to engage recent trends in South Korean sexual culture and practice I rely primarily on a number of major national surveys, studies, and books published in Korean, and I supplement my close analyses of these with contemporary news articles, journals, and online articles and essays that help illuminate quite recent trends and challenges in

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South Korean society. Most books available in the United States on South Korean sexual practices tend to use data drawn from surveys conducted in the 1980’s and 1990’s. In an effort to engage more contemporary survey data and more contemporary understandings of South Korean circumstances of both premarital and marital sexual challenges, I have sought out many more contemporary online articles and essays and journalistic accounts. An obstacle to research in this area arises from the dearth of scholarly sources published in South Korea that deal with contemporary South Korean “sexual issues,” especially, related to “religion and ethics.” I have drawn on the most authoritative and best sources available and I have sought to enrich my analysis by my survey of contemporary statistical data, journals, and online articles that are more up to date in their analysis.

I employ both quantitative and qualitative research methods in this dissertation. These methods complement each other and offer “distinct aims and objectives” that provide, I believe, a well-rounded understanding of the density of the lived sexual and relational experience of South Koreans. ² I use quantitative research data to introduce South Korean sexual culture in general whereas I employ a qualitative research method, ethnography, to reflect upon the experience of select South Korean Catholic women’s experiences and understandings and to analyze their stories in relation to official Catholic teachings.³ According to Vigen and Scharen, “ethnography is a way to take particularity


³ For helpful discussions of the discipline of ethnography, see the Vigen and Scharen, eds., Ethnography as Christian Theology and Ethics and Pete Ward, ed., Perspectives on Ecclesiology and Ethnography (Grand Rapids, MI/Cambridge, U.K.: William B. Eerdmans Publishing Co., 2012). See especially Emily Reimer-Barry’s essay, “The Listening Church” in Vigen and Scharen, eds., Ethnology as Christian Theology and Ethics, 98 where she argues: “Ethnography is a valuable and underutilized methodology that has the potential to positively transform Catholic ethics precisely because it can bring new voices, especially
seriously— to discover truth revealed through embodied habits, relations, practices, narratives, and struggles.”4 As they put it:

We understand ethnography as a process of attentive study of, and learning from, people—their words, practices, traditions, experiences, memories, insights— in particular times and places in order to understand how they make meaning (cultural, religious, ethical) and what they can teach us about reality, truth, beauty, moral responsibility, relationships and the divine, etc.5

In part I, I will now explore general information and backgrounds about South Korean’s sexuality, sexual culture and contemporary sexual issues.

**Part I: Contemporary Sexuality, Sexual Culture, and Family Values in South Korea**

**The Double Standard and the Phallus-Centered Sexual Culture**

Throughout South Korean history, women have too often tended to be treated as second-class citizens and limited to being bystanders in the mainstream of societal and family decision-making. They have been “the subjects of discriminations based on their role in marriage, their fertility, and their lack of a right to end their marriage in divorce, as well as their subordinate role in the public domain.”6 In other words, today South Korean women are still expected to be “good wives, sacrificing mothers, and modest daughters and daughters-in-law” in the familial context, and in the socio-economic

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4 Vigen and Scharen, eds., *Ethnography as Christian Theology and Ethics*, xxi.

5 Vigen and Scharen, “What is Ethnography?,”16.

context, their labor is used as a cheap and secondary source of income for the family. In South Korea over the past three decades, there have been significant improvements in the position and rights of women culturally, socioeconomically, and politically. However, many South Korean women still face the ongoing challenge of sexism, patriarchy, and hierarchy at home, in the workplace and within the political sphere. For instance, many in South Korean society expect women to be “superwomen” or “supermoms” who are always perfect in any given situations both inside and outside of the house.

According to a recent study complied by Statistics Korea (in 2012) regarding the female economic participation rate in South Korea, more than 70 percent of women between the age of 25 and 29 had entered the job market whereas for women in their 30s the figure dropped to 55 percent due to many women starting a family. The study showed that 56.4 percent of women aged between 30 and 39 quit their careers, and the major reasons for quitting jobs were marriage, pregnancy, and infant care. The study shows how child-rearing remains a prominent societally sanctioned responsibility in South Korean society. This societal heritage appears to be a major factor in women opting out of the work-place to stay at home for child-rearing obligations. This tends to

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8 Ibid.


10 Ibid.
undercut women’s power both within the economy and within family life. South Korean society, I believe, needs to encourage fathers to engage in more child-rearing and give greater support for working moms by promoting a family-friendly culture and set of policies. In other words, in South Korean society, unplanned or unwanted child-bearing can exact a heavy sacrifice on women. Due in good part to this societal atmosphere, South Korean women regardless of religious background seem generally to seek to control births and prefer to have smaller families than in generations past.

The most prominent aspect of modern sexual culture in South Korea is the double standard of sexual morality for men and women. While men have been able to possess and dominate women’s sexuality, women have too often been treated as sexual objects for men. In marital relationships, for instance, while wives are required to be seductive inside of the house, they are expected to be modest and virtuous outside of the house. In addition, South Korean society tolerates an extramarital relationship or premarital relationship for men but not for women. Men’s extramarital affairs are generally “socially sanctioned unless they break down the family system, while wives’ infidelity is never overlooked” and their extramarital affairs can be a sufficient reason for men’s filing for divorce. Sometimes wives are punished with physical violence by their husbands.\footnote{Youna Kim, \textit{Women, Television and Everyday Life in Korea} (London and New York: Routledge, 2005), 41. To learn more about South Korean sexism, patriarchy, contemporary feminist theology, and its backgrounds, see these books, Wonhee Anne Joh, \textit{Heart of the Cross: A Postcolonial Christology}, (Louisville, Kentucky: Westminster John Knox Press, 2006); Hwa-Young Chong, \textit{In Search of God’s Power in Broken Bodies: A Theology of Maum} (New York: Palgrave Macmillan, 2013); Gi-Wook Shin, Soon-Won Park, and Daqing Yang, ed., \textit{Rethinking Historical Injustice and Reconciliation in Northeast Asia: The Korean Experience} (New York: Routledge, 2007).}

In many quarters of South Korean society women are supposed to be chaste before marriage. Virginity at time of marriage remains a commonly expressed traditional
ideal. In South Korean society “young women’s morality is often judged, by both men and women, on the basis of their premarital sexual experiences.”\textsuperscript{12} While South Korean women tend to hide their premarital sexual experiences, South Korean men often brag about their premarital experiences. In South Korean society, if a man does not have any premarital sexual experience, he may become subject to ridicule. Although many movements in South Korea today seek to improve women’s rights and increase equity in gender roles, women are still generally treated secondarily or subordinately. South Korean women have to deal with disadvantages and inequalities from “the dualistic sexual norm of everyday power that is deeply embedded in, and determines, the perspective of official power.”\textsuperscript{13}

I will now briefly discuss how this double standard in South Korean sexism has been historically sustained by some of South Korea’s dominant religious and philosophical traditions. In contemporary South Korean society, the religious and philosophical past continues to inform the present in fundamental ways. In terms of religious affiliation, 52 percent of South Koreans are either Christian or Buddhist.\textsuperscript{14} Perhaps surprisingly to some, although only 0.2 percent identify with Confucian/Neo-Confucian thought, still its values and views nonetheless continue to play a major role in

\textsuperscript{12} Ibid., 43.

\textsuperscript{13} Ibid., 42.

\textsuperscript{14} Today, 53.1 percent of South Koreans have religion and 46.5 percent of them are atheists. 29.2 percent of South Koreans are Christians (18.3%-Protestants and 10.9%-Catholics) and 22.8 percent are Buddhist. The rest, 1.1 percent of them are Won-Buddhism (0.3%), Confucianism (0.2%), Chendoism (0.1%), the religion of Jeungsan (0.07%), Daejonggyo (0.01%), and the rest (0.35%). 0.4 percent of South Koreans’ religions are not identified. \textit{A Census of the Korean Population} in 2005 by the South Korean National Statistical Office, accessed September 14, 2011, http://kosis.kr/index/index.jsp.
shaping Korean sexual culture. According to Confucianism, “the woman is always placed lower than the man. The husband is compared to the sky and wife is depicted as the ground, and therefore she is obedient to the husband.”\textsuperscript{15} Under the powerful historic influence of Confucianism on South Korean society, women’s sexuality came to be expressed primarily in two ways; a desirable woman, and a woman who follows the ideology of virginal purity. In other words, Korean women are requested to be a “sexy woman,” at the same time a “chaste woman” in the same body. Even though they affirm their sexual desire positively as sexual beings, they still have to deal with the patriarchal oppressive Confucian sexual culture, which projects negative views on women’s sexuality. \textsuperscript{16}

In terms of contemporary situations of South Korean sexual culture, according to Sin-Won Pyoun, a feminist sociologist, the loose standard and flexible attitude of men’s sexuality and the common cultural affirmation of a passive and asexual nature of women may yield two dominate societal-wide pictures of women: (1) women as an object of sexual desire and (2) woman as of a mere utilitarian use designed only for bearing and raising children. These rigid sexual standards and perspectives have helped sustain views that at times tragically appear to encourage sexual violence against girls and women. Indeed South Korean society, like most other societies around the world sees stark cases of sexual crimes and other serious gender conflicts across South Korean society, such as rape (both outside of marriage and within marriage), incest against female children,

\textsuperscript{15} An, \textit{Korean Women and God}, 45.

\textsuperscript{16} Eun-jung Kim, “Love, Sex, Marriage,” in Korea Family Culture Institute, ed., \textit{Family and Korean Society} (Seoul, Korea: Kyoungmun Press, 2009), 100-132,
teenage prostitution, and patterns of sexual assault and harassment against women.¹⁷ I will give concrete examples of such violence to women in a later section of this chapter.

The male-dominant sexual culture in South Korea can be expressed as a “phallic-oriented culture.”¹⁸ Due to the widespread historic view that the male sex is superior to the female sex, sexual intercourse is not perceived of as a mutually intimate interpersonal experience. In South Korean tradition, a sexual relationship seems to be seen as “a physiological or primitive event, a kind of tension release for the male.”¹⁹ In this perspective, only the phallus can be worthy of consideration. South Korean sexual culture still seems to exist primarily for satisfying the male’s sexual desires and needs, downplaying the mental, intimate, and mutual relationship between partners. In most of traditional South Korean society, women have been raised to passively play up to this male-dominant action, and those who were more obedient and passive were encouraged. Most men, on the contrary, have been raised to try to be positive, strong, aggressive, and dominating figures.²⁰ This different set of established cultural gender norms and expectations has carried into everyday sexual and marital relationships. This distorting and discriminating legacy of South Korean views about gender norms and sexual


¹⁸ Choi and Yi, “South Korea.”

¹⁹ Ibid.

²⁰ Kim, Women, Television and Everyday Life in Korea, 42.
expression still greatly impact South Korean sexual culture and gender relations by justify stark inequities as matter of natural difference.  

According to An, a Christian theologian, sex differences and sexual discrimination were essential parts of Confucianism and that patriarchal and hierarchical discrimination were held as necessary for the maintenance of universal harmony and order.  

In Confucianism, a woman’s two important duties are to produce a continuous male genealogy to maintain a pure male bloodline and to look after her husband and his family no matter whether her husband is alive or not.  

In contemporary South Korean society, before marriage, many in the younger generation challenge these sexist traditions and understandings. However, after marriage, they often come to feel that they must follow these traditions. For example, a woman is expected to produce a son as her husband’s family’s wishes. These Confucian sexist expectations and teachings still affect South Korean society enormously in both family life and the public sphere. 

Throughout history, South Korea has adopted several new religions and developed them, and the religions have molded their cultural values, socio-political structures and values, sexual values, moral and spiritual values, family structure, lifestyle, concepts of love, and gender roles both in public and the private space. Among the religions, especially, Confucianism strongly affected South Korea’s traditional culture as

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21 Choi and Yi, “South Korea.”

22 An, 37.

23 Ibid., 38.
well as sexual culture. Due to the influence of Confucianism, South Korean society still highly values women’s chastity. While the meaning of chastity for women “is defined in the bodily concept of virginity rather than faithfulness or mental chastity,” men’s chastity is not an issue, and South Korean men’s manhood is judged by their social status and earning ability, not by fidelity or chastity. For instance, in the case of forced sex or rape, it has been traditionally considered as a violation of woman’s chastity because South Korean sexual culture is characterized as “genitally-oriented sexuality.” Human rights, justice, and physical and mental wounds of the woman raped are treated as secondary.

These established cultural traditions regarding gender relations encourage many South Korean men to aspire to a norm and goal of strong manhood. They develop their views of men’s sexuality through these sexist distorted views that are sustained in school, military service, and at work. They learn to exaggerate their strong stamina and sexual desire. Some South Korean men try to prove their sexual ability through the number of

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24 Historically, Confucianism, Buddhism, and Christianity have impacted on the shaping South Korean traditional religions and sexual and socio-cultural values. Confucianism and Buddhism were received in Korea through China at about the same time (between 371 CE and 372 CE) and they developed as dominant religious influences on Korean society along with indigenous Korean Shamanism. Christianity was introduced to Korea in 1784, so even though Christianity highly values women’s chastity, I argue that due to the patriarchal and hierarchical Confucian cultural system and religious thoughts, Korean society was already rooted in the male-dominated and public sphere of social life and in Korean society, woman’s chastity was considered an important virtue. Traditionally Korean Confucian ideology functioned as a mechanism that oppressed women by inventing “sex difference,” “honored men,” “abased women,” and “the Three Way of Obedience.” When unmarried, obey her father; when married, obey her husband; when widowed, obey her son. “Seven Evil Conducts” in the Confucian teaching are Disobedience to parent-in-law, Failure to bear children, Adultery, Jealousy, Contracting a serious malady, Garrulity, and Theft. See Hyunjoo Song, “Gender Issues and Feminist Movement in Korea,” Korean Institute for Gender Equality Promotion and Education, accessed September 06, 2010, http://www.kigepe.or.kr/usr/eng/sub01/intro.asp.

25 Kim, Women, Television and Everyday Life in Korea, 43.

26 Ibid.
women who they have had a sexual relationship with or by the length of individual sexual encounters.27

Since South Korea - like many other nations - is a male-dominated society, many urban red-light areas resemble a huge boy’s club. For instance, bars in many areas outnumber other businesses. In many bars there are many coin-fed punching bags and kicking machines to test and display men’s strength. Karaoke clubs (called “norae-bang”) allow men to sing, drink and flirt with young women, and barber shops offer massages and sometimes they offer illegal sexual services like prostitution.28 Since the special Anti-Prostitution Law in 2004, many red-light zones have been shut down in South Korea, but many prostitutes have moved into residential areas to continue their business illegally by renting offices or apartments.29 According to the Supreme Prosecutors’ Office in December, 2012, sex crimes have surged in recent years from 13,634 cases in 2007 to 22,034 in 2011 and South Korean people question the effectiveness of the Anti-Prostitution Law. Some experts even proposed “the creation of licensed brothels to tackle the surging sex crimes.”30 Traditionally, South Korean people seem to think that there are men who are incapable of controlling their sexual desires and that men must release their sexual tension regularly. Due to the phallus-oriented sexual culture in South Korea, distorted views and opinions seem to exist as sex businesses are necessary to reduce sexual crimes or to regulate male sexual desires.

28 Choi and Yi, “South Korea.”
30 Ibid.
Even though the South Korean government tries to control the illegal sex industries and tackle the sex crimes, new types of sex business such as online prostitution and sponsor cafes, “in which women search for men who can support them financially in exchange for sex” have been created.\(^{31}\) In short, South Korean society remains influenced by the view that women’s sexuality should be controlled by men within marriage and that women’s sexual desire should not be expressed in public. A good and wise woman is held to be one who is chaste and ignorant of sex. Therefore, South Korean sexual culture can be still defined as a phallus-centered sexual culture. Although South Korean women’s socio-economic and political status and gender roles have improved in recent decades, there still exists a marked double-standard between men and women regarding appropriate sexual attitudes and modes of appropriate sexual expression.

**Premarital Sexuality in South Korea**

A 2006 study of South Korean women’s experiences of premarital sexual intercourse sheds important light on attitudes regarding contraception and abortion. According to this survey of unmarried women living in South Korea, women between the ages of 17 and 25, 34 percent of respondents were found to have had sexual intercourse with a man.\(^{32}\) The rate of those with sexual experience was higher in the older age group, 31 Ibid.

\(^{32}\) Im Soon Lee, MD. et al., “A survey of attitude toward sex of unmarried women in South Korea,” Department of Obstetrics and Gynecology, College of Medicine, Soonchunhyang University, Seoul, Korea, *Korean Journal of Obstetrics and Gynecology*, vol.49 no.1 (January, 2006). This survey aims to analyze unmarried women’s attitude toward sex in Korea. They researched sexual experiences, experiences regarding sex education, attitude toward sex, and experiences of contraception/contraceptive awareness and use to indicate the direction of the future. According to the methods, the respondents were 400 unmarried young women from 17 to 25 years old who lives in Seoul, Korea and the metropolitan area. The questions about general characteristics, general sexual awareness, coitus history, and contraception were given to them by web based questionnaire. The survey was conducted from March to April, 2005. Regarding the
and more than half (51%) in 23-25 age group had had sexual intercourse. More than half (58%) of office workers had an experience of sexual intercourse. The average number of occasions of intercourse was 8.8 and the average number of sexual partners was 2.5. Among single females aged 17-25, 20 percent were found to have a sex partner at the time of the survey. They were found to have sexual intercourse 3 times per month on average. 16 percent of those who were sexually active had at some point been pregnant, and 95 percent of this group had an abortion when they got pregnant. Even though 92 percent of respondents with a sexual history were worried about pregnancy, only 36 percent of them were found to have consistently used contraceptives.33 This survey tells us that even though the rate of sexual experience among unmarried women is increasing, only one third of young women always use contraceptives and the rest allow themselves to run the risk of unwanted pregnancy and abortion. The main argument of this survey strongly suggests that South Korean society needs more practical sex education about effective contraception and adequate measures to protect them from unwanted pregnancy and abortion. In relation to my research project regarding South Korean heterosexual married Catholic women’s birth control, I argue that unmarried women’s attitudes about, and use of, contraception are related to married women’s attitudes about and use of contraception. South Korean unmarried women’s passive attitude regarding contraception

results, the age distribution of 400 respondents was 102 (26%) of age 17-19, 140 (35%) of age 20-22, 158(39%) of age 23-25. 54% of respondents were college students and it was the most common occupation.

33 Ibid.
can still cause unexpected or unplanned pregnancy and abortion even after they get married.\footnote{See the below in this chapter, “Today’s Contraceptive Use and the Attitudes of South Korean Women.”}

These surveys suggest that sex education is one area in which South Korean society must improve. Most unmarried women respondents received formal sex education more than one time: 88 percent received some sex education classes during middle school, 78 percent in high school, and 54 percent in elementary school. 51 percent reported that they received some sex education from TV or mass media. 17 percent reported receiving some sex education during college. 14 percent reported receiving sex education from related organizations while 4 percent received sex education from parents or relatives and 1 percent received sex education from medical doctors or pharmacists.\footnote{Lee, “A survey of attitude toward sex of unmarried women in South Korea.” Most respondents had experiences of sex education more than one time, so they responded with multiple answers.}

However, only 12 percent were satisfied with the contents of their education about sexual matters. Thus, as mentioned before, more effective and adequate sexual education and programs appear necessary for South Korean society.

Unmarried South Korean women who use contraception most commonly rely on their partner using condoms. For this group, 89 percent of contraceptive use relied on condoms, coitus interruptus (68%), periodic abstinence (48%), oral contraceptives (26%), emergency pills (17%), spermicide (2%), and IUDs (1%).\footnote{Ibid. In this survey, some respondents used contraceptives with more than one method such as condoms with coitus interruptus, so they responded with multiple answers.} Even though South Korea has a high contraceptive rate currently, the abortion rate is quite high as well. This strongly suggests that more effective contraception use is required to prevent unwanted
pregnancies and that many young South Korean women today simply are not using any effective means of birth control. As this 2006 survey indicates, the rate of sexual experience of unmarried women is increasing gradually in South Korea. A key moral problem seems quite clear; namely too many young unmarried women are not consistently using any effective means of birth control and they are dealing with unexpected pregnancies by opting for abortions. In addition, as mentioned before, their attitude and awareness affects their marital sexuality and fertility.

In 2008, an important survey of unmarried men and women in their 20’s was conducted by Hwang and Chung.\(^{37}\) It is titled “Contraception Behavior and Related Factors in Unmarried Female and Male.” According to the survey, 56 percent of women and 85.4 percent of men had sexual experiences, and 75 percent of men and 65.7 percent women used condoms for contraception and the second most popular method was coitus interruptus (men-22.7% / women-34.3%). Regarding the question of the reason for using contraception, 79.6 percent of men and 91.4 percent of women answered “to prevent pregnancy,” and 11.4 percent of men answered “because of the partner’s request.” In terms of the decision maker for contraception, 63.4 percent of men and 70 percent of women answered “myself.”\(^{38}\)

However, even though the unmarried women make a decision for contraception, they have their partners use condoms or coitus interruptus mostly as the contraceptive

\(^{37}\) Shin Woo Hwang and Chae Weon Chung, “Contraception Behavior and Related Factors in Unmarried Female and Male,” *Korean Journal of Women Health Nursing*, vol. 17, no. 1 (March, 2011), 77-87. According to this study, 107 women and 96 men were recruited in Seoul, South Korea, and a structured questionnaire was self-administered from July 14, 2008 to September 02, 2008.

\(^{38}\) Ibid.
methods of choice. This suggests that they prefer contraceptive methods in which the male is the primary agent of the contraceptive act. Thus, South Korean women’s sexual attitudes seem to give some agency over to male partners even though the women have strong self-efficacy for contraception and an intention for contraception. Even though South Korean unmarried women have the strong awareness of the need of contraception and strong self-efficacy for contraception, their uses and attitudes of contraception seem to be passive and dependent on men. This could be due to the legacy of the conservative and patriarchal sexual culture and inheritance. Even though this dissertation seeks to explore what constitutes a proper and morally responsible sexual ethic for married people, I think, the general sexual culture and attitudes of unmarried people are related to and affect the sexual attitudes of married people. Therefore, premarital sexual attitudes and practices cannot be ignored or overlooked in dealing with marital sexuality.

**Sex Education**

Sex education has long been a “taboo subject” in South Korean society and students typically receive sex education classes from their schools with just a general and abstract overview. In fact, sex education for teenagers from schools is neither helpful nor practical. For female students, the sex education focuses on the topics of menstruation, pregnancy, virginity, and gender roles, whereas male students are taught about the morality of masturbation and sexual activities, sexual transmitted diseases, and physical development. It is assumed that male students are sexually practical and active but female students should not be. For instance, as a Korean who was born and raised in South Korea, I remember that the sex education I received when I was a teenager seemed to
emphasize that a woman had to keep virginity until marriage whereas a man had to protect a woman’s virginity whom he would date until marriage. I did not learn about man’s virginity; rather it seemed to teach that a woman had to protect herself from a man’s impulsive sexual desire, which was difficult to be controlled. In other words, in South Korean society, a woman is educated about how she has to protect her virginity and be passive sexually.

The traditional silence of South Korean society on sexuality and the theoretical and perfunctory sex education courses have left its teens almost without guidance in dealing with the increased sexual openness influenced by Western culture’s practices and example. “This trend is accelerating with the fast pace of modernization, and the consequences can be observed in the increasing incidence of adolescent pregnancies, sexual abuse, and sexual crimes.” 39 According to the Korean Times in 2009, “nearly 4 percent of teenagers have had sexual experiences and about 15 percent of them [of the 4 percent] have made their partner pregnant or have become pregnant.” 40 These figures suggest strongly that there exists a need for great improvements in sex education.

The Women’s Human Rights Commission of Korea (WHRCK) conducted a survey of 2894 teenagers aged between 13 and 18 - 2538 students and 356 juvenile delinquents- South Korean nationwide from June to July, 2010 to study views on sex and

39 Choi and Yi, “South Korea.”

40 Ji-sook Bae, “Nearly 4% of Teenagers Have Sexual Experience,” Korean Times, March 16, 2009. According to the article, “About 8.6 percent of respondents said they had no problem with selling sex to adults. Internet chatting rooms were turning into brothels. About 5.3 percent said they were offered opportunities to participate in the sex trade, mainly in online chat rooms, and brokers were sometimes involved. Teenagers also sometimes made lewd calls to illegal ‘talking clubs’ but the Internet was the main attraction, the ministry said. . . . An elementary school teacher in southern Seoul said even elementary school students know about sexual intercourse from various media outlets and elsewhere. ‘It's just adults who want to believe that the young know nothing.’ she said.”
levels of sexual engagement. Of these teenagers, 7.3 percent of respondents had engaged in sexual intercourse. About 3 percent of the students had had sex, compared to 39 percent of the delinquents. However, the ratio differed significantly by gender. “Some 63 percent of males answered both parties agreed to do so [agreed to engage in intercourse] while only 35 percent of girls said the same. More girls said they had their first sexual relations by force or involuntarily after getting drunk.”41 According to the survey, 66.9 percent (male and female) said they would reject having sex for money, but 18 percent of the respondents answered they would take money depending on the situation. Also, 3.5 percent said they definitely would take it, and 11.5 percent answered that they were unsure. This survey data shows one face of South Korean teenager’s sexuality.

Consequently, contemporary South Korean teens’ sexuality seems to be gloomy and dark, and current sex education from educational organizations does not appear to be working effectively. As long as South Korean society and schools hesitate to talk about sex, especially with teenagers, teens’ sexuality will be subject to dangerously distorted views and obscured by shadow. They desperately need a consistent education program for establishing healthy, positive, and right sexuality and should be protected from sexual crimes, the pernicious groups engaged in sexual slavery and sexual business culture, and from unprotected sex. It is clear that the South Korean Government and schools should develop effective and practical sexual education programs and need to establish counseling organizations or centers for teens to help them through these difficult years. I argue that healthy and positive teens’ sexuality would be necessary to have healthy and effective family planning and family health after marriage.

41 Mee-yoo Kwon, “1out of 3 adolescents may engage in sex for money,” Korean Times, October 27, 2010.
Sexual Violence

An analysis of sexual violence in South Korea helps us understand contemporary South Korean sexual culture and issues. In particular, one of my interviewees had an experience of sexual violence and the experience affected her marital sexual life significantly. In other words, Catholics are not immune from sexual violence. According to the survey in 2009 from the Ministry of Gender and Family, 0.2 percent of Korean women experienced rape and 0.4 percent experienced attempted rape across their lives. 2.1 percent had experienced severe sexual molestation (meaning forcible touching such as sexual advances and fondling) and 3.3 percent had experienced light sexual molestation. The rate at which the crimes were reported to police also increased, as 12.3 percent of rapes and attempted rapes were reported (7.1% were in 2007) and 5.7 percent of severe sexual molestation was reported (5.3% in 2007). 42

The actual number of victims of sexual assaults in South Korea is about eight times higher than that reported to the police. Only one of eight sexual assault victims reports a case to police. The main reason why the victims don’t report to police comes from “parents [being] afraid that their daughter will never get married and worry about possible revenge attacks by the assaulter.” 43 In other words, parents of the victims prevent their daughters from reporting because they fear that being identified would possibly affect their future marriage, safety, childbirth, and social networking. In addition, in the case of teenagers, they are apt to hide their sexual experience (consensual or non-


43 Ibid.
consensual intercourse) from their parents; therefore the actual number of teen victims of sexual assaults is almost certainly higher than that reported to the police.

According to the article in the *Korea Times* written on 09/22/2011, in respect of current sexual crimes, a growing number of male senior citizens are found to have committed sexual assaults, particularly against minors. The number of sexual assaults perpetrated by those aged over 65 jumped 32.5 percent to 925 in 2010 from 698 in 2009.\(^4^4\) In addition, nowadays, new cases of sexual violence in South Korea come in the form of “dating violence.” “The U.S. Center for Victims for Crimes defines dating violence as controlling, abusive and aggressive behavior in a romantic relationship.”\(^4^5\) It says that such violence can include verbal, emotional, physical, or sexual abuse, or a combination of them. According to the survey by The Korean Women’s Hotline in 2009, about 61 percent of female students replied they suffered verbal violence from their partners. Nearly one fourth said they had to have an unwanted kiss or sex.\(^4^6\)

Another emerging issue of sexual violence in Korea is that more attention is being paid today to how men also are subject to sexual harassment. Many Korean men these days have experienced rape and other sexual violence in workplaces and elsewhere. In particular, many young men suffer from various forms of sexual harassment while they serve in the military. “The majority of male victims choose not to come forward to speak out about the violence against them and seek counseling as Confucian teachings still


\(^{4^6}\) The Korea Women’s Hotline, which is a private call center for abused women, surveyed 800 unmarried female university students regarding “experienced dating violence,” quoted in Park, “Dating violence going unchecked.”
dominate Korean society, which teaches men not to shed tears and stay mentally strong under any circumstances.47

These days, women have become more active in reporting sexual harassment cases to law enforcement authorities and also in seeking help from counseling providers. In contrast, men continue to remain deeply reluctant to disclose sexual harassments or violence against them. Therefore, it is important that Korean society moves to provide adequate protection by the law and counseling organizations and centers for male sexual victims. It is urgent for Korean society to recognize that men can be victims of sexual violence and harassment as well as women.

At present, the most severe sexual violence issue in Korea is sex crimes against children. Reported sex crimes (between 2005 and 2008) against children in Korea outnumbered those in the United States and were three times greater than those reported in Japan and nearly nine times more than those reported in Germany.48 However, a great number of such cases in Korea ended up being unsettled as victims are reluctant to undergo police investigations (only one out of 168 victims contacted the police in South Korea). Patients are often afraid that the police may not take their cases seriously or make matters worse. The Korea Sexual Violence Relief Center, the nation’s largest counseling provider for those who suffer from sexual violence, said it received 42 calls from men in 2009, accounting for 3.1 percent of the total 1338. But the center estimates substantially more than men undergo sexual harassment, saying the tallied numbers are meaningless.47

47 Hyo-Sik Lee, “More men subject to sexual harassment,” The Korea Times, August 25, 2010. According to the article, “the Korea Sexual Violence Relief Center, the nation’s largest counseling provider for those who suffer from sexual violence, said it received 42 calls from men in 2009, accounting for 3.1 percent of the total 1338. But the center estimates substantially more than men undergo sexual harassment, saying the tallied numbers are meaningless.”

48 Si-Soo Park, “Child rape cases in Korea outnumber those in US, UK, Japan, Germany,” The Korea Times, August 02, 2010. According to the article, “The finding, released on Monday [08/02/2010] is based on a comparative research on sex crimes reported between 2005 and 2008 in Britain, the United States, Japan, Germany and Korea. The Ministry of Gender Equality and Family and the Korean Institute of Criminology jointly conducted the research.” Continuously, the article says that “the National Assembly has passed bills on the chemical castration of certain criminals guilty of sex crimes and the court has made more convicted sex offenders, who have served their time in prison, wear electronic anklets to monitor their movements to try and prevent them from re-offending…Only one out of 168 victims contacted the police. In Britain, one out of 12.2 victims report their cases to police, while in the United States, one out of 2.7 victims did so, the research showed.”
Korea whereas in the United States, one out of 2.7 victims did). Documented accounts of incest have increased in Korea across the last five years. “A total of 331 incest crimes took place in 2006 and the number increased to 360 in 2007 and 373 in 2008. The number dwindled to 350 in 2009 and rebounded to 468 in 2010 and to 207 during the first half of this year [2011].”

As I mentioned above, the sexual crimes by the elderly also increased rapidly, totaling 685,861 cases during the past five years. In addition, the crimes become more brutal.

Regarding the increasing sexual crimes in South Korea, I think that the patriarchy and sexism of traditional Confucianism and Christianity, the societally-wide distorted sexual culture, and the lack of effective national programs of sex education can be judged as some of the main causes of the increasing sex crimes, especially toward the disabled, children, women, and even toward men. The most unacceptable and incomprehensible fact is that in South Korea the sexual criminals against children are given mostly light sentences such as just a few years in prison. Due to the light sentences, sexual crimes against children recur often in South Korea, and in many cases, the criminals who were already sentenced caused the same crimes again after being released from prison. These

49 “Sex crimes against the young increase,” The Korea Times, September 14, 2011.

50 Lee, “Sexual assaults by elderly up.”

51 In terms of the religious influence, I argue that the Confucian patriarchy and sexism is the major cause for the negative aspects of sexual culture. In comparison with other religion such as Christianity that has also patriarchal forms and tradition, because Confucianism (received in Korea between 371 CE and 372 CE) has longer history and tradition than Christianity (received in Korea 1784) in South Korea, I argue that the Confucianism affected South Korean sexual culture significantly more than other religions. See An’s book, Korean Women and God: Experiencing God in a Multi-religious Colonial Context for a good introduction to understand Korean Confucianism and Christianity.
studies suggest that harsher sentences are called for against the perpetrators of sexual violence, especially for the sexual crimes against children in order to reduce future crimes.

Also, it would seem that the South Korean government must establish much stronger legal and institutional measures to prevent the whole array of sexual crimes, especially those against children. South Korean sexual culture is not alone in promoting sexual violence and in not offering effective sex education to young people. But the significant scale of South Korean problems in the sexual sphere is depressing and cries out for change. The negative sides of South Korean sexuality seem strongly related to the double standard of sexual morality for men and women, today’s various sexual violence issues, the high rate of abortion, and the ineffective use of contraceptives. However, this is not the only side of South Korean sexuality. There is a positive side in South Korean sexuality, which I will now explore.

**A Positive Aspect of South Korean Sexuality**

Today, a positive aspect of South Korean sexual culture can be found in the new perspective of “romance” and “free love” (which means that free unions of adults are legitimate relations which should be respected whether they are emotional or sexual relations). While the traditional concept of romance and love could be eligible to only young people or single people and should be related to marriage, since 2000 a new perspective on romance has appeared in South Korea and people started viewing free love positively.\(^{52}\) New forms of romance and free love unrelated to marriage have entered the mainstream of South Korean society. For instance, seniors’ sex and love and

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physically challenged persons’ rights of sexual expression have begun to be discussed in the South Korean media. Recently, for instance, there have been public discussions regarding the legitimacy of sex services for the disabled, illegal immigrants, and widowers. Some argue that the government needs to “address the needs of these individuals by allowing prostitution in restricted areas.” They argue that it should be legal for a sex worker to visit the home of a disabled person in order to provide sexual services.

Also, South Korean people started to pay attention to perspectives where every human being has a right to enjoy her/his sexuality and romance beyond the traditional norm, custom, and regime. While in the past, it was treated as a taboo to talk about sexual subject matters in public debate, today, discussion or public opinion regarding sexual subjects became more open socio-culturally. For instance, healthy and pleasurable sexual activities between spouses, single people and teenagers’ sexuality, and a woman’s sexuality have been getting treated in a positive way in the South Korean society.

However, still there seem to be negative aspects of sexuality more than positive aspects in South Korea. There appears to be important room for improvement in the general way Korean society understands human sexuality and how it treats women in general but especially in the sexual sphere. It seems clear that South Korean sexual culture needs to be reformed in positive ways in order to promote greater equality for South Korean girls and women.

53 Na, “Anti-brothel law fails to dampen sex industry.”
Change of South Korean Family Structure and Values

Rapid modernization and economic development of the past four decades have brought greatly changes in the structure and values of South Korean families. Traditional extended families have been superseded by nuclear families as proportions of single-generation households are increasing whereas households with three generation or more have declined. Changes of family values such as marriage, children, traditional family blood ties, rising expenses of childrearing and global economic strains are major causes for falling birth rate in South Korea. In addition, young people’s attitude toward marriage and family has been changed as they tend to postpone marriage. Likewise there has been an increase in divorce and remarriage rates have become more prominent. In addition there have been significant changes in the general household income structure. Following the rise of the numbers of females’ participation in the workplace, the income structure has shifted from the traditional structure of one income per family, usually by a man, to a double-income structure. According to the 2003 Nationwide Family Survey by the Ministry of Gender Equality of South Korea, two-income households accounted for 35.8 percent of 3500 surveyed households.

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54 Korea Family Culture Institute, *Family and Korean Society* (Seoul, South Korea: Kyoungmunsa, 2009), 42-76

55 Ibid.

56 Ibid., 352-413.


58 Ibid.
With regard to the transition of the family values, there are typical traditional views and stereotypes of family in the South Korean society: marital relationship sustaining with the first spouse permanently; the family functioning as an economic and emotional community; responsibility for caring the elderly; divided gender roles between a husband (as a breadwinner) and a wife (as a caregiver). However, these typical stereotypes have been changing among the younger generation, especially the stereotypes regarding women and women’s roles. Regarding the attitude of marriage and having children, older generations tended to regard marriage and childbirth as a necessity and natural process whereas young generations do as a matter of choice for both, marriage and procreation. On the attitude of caring elderly people, according to the nationwide survey by Statistics of South Korea in 2002, approximately 70 percent of the respondents answered that families should take care of the elderly. However, 43 percent of the households lived together with their elderly parents, and about half of the age of 60 or older people answered they did not want to live with their adult children.

In fact, elderly population living alone has increased from 16.1 percent in 2000 to 18.0 percent in 2005. According to the research from the Seoul Metropolitan Government in 2012, among the elderly population in Seoul, the capital city of South

59 Ibid.
60 Korea Family Culture Institute, Family and Korean Society, 42-76.
Korea, 22 percent of the elderly lived alone.\textsuperscript{63} Traditionally, one of the most significant virtues celebrated in South Korean society has been that of respect for the elderly, which is substantially influenced by Confucian roots. Confucian beliefs and thoughts have had a broad impact on the shaping South Korean socio-cultural values as well as sexual values in people’s everyday lives.\textsuperscript{64}

In spite of the influence of western culture, individualism, industrialization, and urbanization, to most South Korean people, family remains the most important group and reference point for personal identification.\textsuperscript{65} In regard of personal relationships, harmony is a virtue of human relationships and harmony with others is more important than self-feeling, self-assertion, self-interest or one’s own needs to Korean people. For instance, if one’s family member, relative, or friend requests something from you and you refuse it, then is typically taken to be rude and insulting. So, it is not easy to express self-feeling honestly or directly in the relationship with others, especially with family or friends in South Korea. For other instance, the younger should obey or show a respect to the older, and the older should be likely to show themselves to be magnanimous among family members as well as in friendships.


\textsuperscript{64} Traditionally Korean Confucianism tended to oppress women by inventing “sex difference,” “honored men,” “abased women,” and “the Three Way of Obedience.” When unmarried, obey her father; when married, obey her husband; when widowed, obey her son. “Seven Evil Conducts” are “Disobedience to parent-in law,” “Failure to bear children,” “Adultery,” “Jealousy,” “Contracting a serious malady,” “Garrulity,” and “Theft.” See Hyunjoo Song, “Gender Issues and Feminist Movement in Korea,” \textit{Korean Institute for Gender Equality Promotion and Education}, accessed September 06, 2010, http://www.kigepe.or.kr/usr/eng/sub01/intro.asp.

\textsuperscript{65} “South Korea-The Society,” accessed September 10, 2012, http://www.mongabay.com/reference/country_studies/south-korea/SOCIETY.html. This article came from the organization of Mongabay’s country study of South Korea.
In fact, today’s South Korean family system and its historically sustained values are facing great challenges arising from the decreasing number of marriages, the rising number of divorces, the lower birthrates, the soaring population of senior citizens, the rise of rates of domestic violence and child abuse. Sadly sexual crimes inside families and suicide rates are on the rise. Therefore, the South Korean government should take comprehensive socioeconomic measures to advocate family values and protect the basic units of South Korean society. Likewise South Korean people have to find a better future by restoring their true values, inheritances, and traditions.

In the next part, I will examine South Korean society’s general views on fertility, family health, and contraception through quantitative survey data in order to compare and contrast them to similar data on Catholic lay people. This will help us interpret how Christian faith and the Church’s teaching affect Catholics’ experiences of and attitudes regarding birth control, fertility, and sexuality.

**Part II- Family Health, Fertility, and Contraception in South Korea**

**Contemporary South Korean Family’s Views on Fertility**

In 1962, South Korea began its nationwide family planning campaign to reduce the total fertility rate (TFR) primarily to promote economic growth, general modernization, and to improve the general wellbeing of society. The South Korean government provided basic maternal and child health services and family planning supplies and services. For instance, the South Korean government offered free surgery services of sterilization for married women and of vasectomy for married men who
already had children. This program was hugely successful. The TFR dropped from 4.5 children per woman in 1970 to 1.74 in 1984 to 1.22 in 2011.66

Today, ironically two of the main social concerns in South Korea are worry about the “low birth rate” and the “general aging of the population.” South Korea today has one of the world’s lowest birth rates. Its birth rate of 1.22 for every woman in 2011 stands well below the OECD (Organization for Economic Co-operation and Development)’s average of 1.71. Since the huge economic panic (it was called in South Korea “IMF (International Monetary Fund) economic risk”) in 1997, South Korean people have been struggling with financial difficulties, job shortages, low income, and increasing unemployment among other problems. The economic panic of 1997 pushed many young people to postpone marriage and the starting of families. Consequently those postponements helped ripple down through the decades and have helped push the low birth rate in today’s South Korea.

In 2002, the South Korean government realized that its people were facing a severe economic and societal decline with one of the fastest aging societies with a low birth rate in the world. So, the population policy of South Korea has shifted from controlling population to pronatalist policy. The South Korean government’s plans for the pronatalist policies included provisions to provide a more favorable environment for childbearing such as tax incentives, giving priority for the purchase of new houses, support for increasing childcare facilities, childcare facilities at work, support for

education, and assistance to infertile couples. The government plan’s goal is that by 2020 South Korea will have raised its birth rate to 1.6 children per woman.67

In the section that follows I draw heavily on The 2009 National Survey on Fertility, Family Health and Welfare in South Korea.68 The national survey has been conducted every three years on the same subjects since 1999, and the data in the latest survey, the 2009 survey, show the changes in absolute numbers and percentages between 1980 and 2009. Because it is a national survey by the South Korean Prime Minister’s office and has been conducted so frequently across the years, it is clearly the most authoritative and comprehensive body of statistics currently available. It is a critical resource for understanding general health trends and the dominant social and sexual practices inside South Korean society today. I have drawn the following information and data including the tables 1 to 7 from this survey.

**Attitudes on Marriage and Children in South Korea**

In recent decades South Korean society has gone through powerful changes in terms of general expectations regarding marriage and having children. Regarding the

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68 Seung-Kwon Kim, et al., *The 2009 National Survey on Fertility, Family Health and Welfare in South Korea* (Seoul, Korea: Korea Institute for Health and Social Affairs, 2009). This study surveyed randomly selected subjects ~18000 married households with members of ages between 15 and 64 and married women of ages between 15 and 49 - living in a number of sample areas nationwide from June to September in 2009. The survey asked questions concerning marriage, family life cycle, pregnancy, childbirth, contraception, mother and child health, familial relationships, the employment of married women, child rearing, the characteristics of the households and members and their economic status, and policies on fertility and family. This Part II is based on the 2009 national survey because I am convinced that the latest date, the large number of people selected randomly nationwide, and the detailed data of this survey have led to reliable conclusions. In addition, the researchers in the Korea Institute for Health and Social Affairs (KIHASA), which is a think tank under the Prime Minister’s Office have been studying the survey on the same subjects every three years since 1999.
necessity of marriage, married women between the ages of 15 and 64 answered as follows:

Marriage seems to be necessary -28.5%;
Being married is better than being single-32.1%

More than 60 percent of them showed a positive perspective on marriage. Regarding having children after marriage, 55.9 percent of the married women ages between 15 and 44 answered that they wanted to have children. So, it meant that more than 50 percent of South Korean married women had a positive attitude on having children after marriage.

**Attitudes on Pregnancy, Birth Rate, and Existing Children**

According to the survey, the birth rate was 1.7 babies for married women ages 15 and 44 in 2009. Regarding the rate of the number of existing children, the numbers of families with no children were increasing and families with more than three children were on the decline.

Table 1. The Change of Total Fertility Rate

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<td>Total fertility</td>
<td>2.7</td>
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<td>1.75</td>
<td>1.71</td>
<td>1.43</td>
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(Unit: Child number per woman)

In terms of the “The Change of Total Fertility Rate” (table 1), between 1960 and 1987 the TFR dropped from 6.0 children per woman to 1.6 children per woman because of the nationwide family planning campaign to reduce the TFR. The TFR remained stable at 1.71 children per woman between 1989 and 1996, when the South Korean government decided to end the family planning campaign. However, in 1999 the TFR dropped sharply due in good part to widespread economic concerns raised by the International Monetary Fund (IMF) responses to Korea’s economic problems beginning in 1997. Since
then, the TFR has been dropping to the point where today South Korean society is struggling with an extremely low birth rate. Accordingly, historic episode in South Korea shows how a financial downturn of the economy can have a profound impact by raising feelings of financial insecurity of families and how this, in turn, can have a major impact on their family planning decisions.

According to the data of the World Health Organization (WHO) the TFR for South Korea stood at 5.4 children in 1966 and dropped strongly across the years. In 1976 it stood at 3.2 children. In 1987 it stood at 1.6 children, in 1996 it stood at 1.71, in 2000 it was 1.47 while in 2002 it was 1.4. The most recent data show that in 2010 the TFR stood at 1.22 children.\(^{69}\) The WHO data strongly supports the South Korean survey data (table 1). According to the source of WHO, the reasons for decrease of the TFR are due to late marriage and successful family planning using increased rates of contraception.\(^{70}\) In regards to the analysis of the decrease of the TFR, the WHO does not discuss the financial reasons due to the South Korea’s IMF economic challenges. According to the table 1, the TFR fell to 1.43 in 1999 from 1.71 in 1996 and in WHO’s data, to 1.47 in 2000 from 1.71 in 1996. As mentioned above, the decrease of the TFR between the 1960s


\(^{70}\) Ibid., “Older Population and Health System: A profile of The Republic of Korea”; According to the WHO, “in recent years, a low fertility rate has emerged as a serious social challenge. The total fertility rate dropped from 4.53 in the 1970s to 1.22 in 2010, among the lowest in member countries of the Organization for Economic Co-operation and Development (OECD). The Government is working to tackle the issue by establishing comprehensive plans to create family-friendly workplace environments and to bolster child care policies.” http://www.wpro.who.int/countries/kor/en/, accessed November 15, 2013.
and the 1980s was due in good part to the governmental policy encouraging population control and contraceptive use. I argue that another major factor for the decrease of the TFR after 1996 lies in the impact of the economic recession in South Korea. According to Namchul Lee and Ji-Sun Chung, fertility is negatively related to female labor force participation in South Korea. They argue that after the IMF intervention in South Korea, the economic crisis forced increasing numbers of women to participate in the labor market, and it was one of the reasons for a considerable decrease of the fertility rate in South Korea.71

Accordingly, financial difficulty can be a significant factor in the decisions regarding family planning. Thus I argue that when Catholic lay people make decisions regarding family planning, their financial situation is often felt by them to be more compelling than the Church’s teachings against artificial birth control. I believe that it is important for the Church to recognize the substantial and practical pressures that lay people have in their everyday lives, and the Church should end its condemnation of artificial birth control. My study of the case of South Korean birth rate shifts seems to give strong support for this argument.

Table 2. The Average Birth Rate by Characteristics on the Married Women Aged 15-44

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</tr>
<tr>
<td>Town/Village</td>
<td>2.0</td>
<td>1.9</td>
<td>1.8</td>
<td>1.85</td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15-24</td>
<td>0.8</td>
<td>0.6</td>
<td>0.6</td>
<td>0.74</td>
</tr>
<tr>
<td>25-29</td>
<td>1.1</td>
<td>1.1</td>
<td>0.9</td>
<td>0.89</td>
</tr>
<tr>
<td>30-34</td>
<td>1.7</td>
<td>1.7</td>
<td>1.6</td>
<td>1.47</td>
</tr>
<tr>
<td>35-39</td>
<td>2.0</td>
<td>2.0</td>
<td>1.9</td>
<td>1.86</td>
</tr>
<tr>
<td>40-44</td>
<td>2.1</td>
<td>2.1</td>
<td>2.0</td>
<td>2.01</td>
</tr>
<tr>
<td>Education Level</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Middle School and below</td>
<td>4.3</td>
<td>4.4</td>
<td>4.1</td>
<td>1.85</td>
</tr>
<tr>
<td>Graduation of High School</td>
<td>1.7</td>
<td>1.8</td>
<td>1.8</td>
<td>1.83</td>
</tr>
<tr>
<td>College and above</td>
<td>1.5</td>
<td>1.6</td>
<td>1.5</td>
<td>1.53</td>
</tr>
</tbody>
</table>

(Unit: number)

Table 2 shows that married women who lived in a small town or village, aged 35-44, and lower education level had a higher birth rate whereas women who lived in cities, who were younger, and who had more years of higher education had a lower birth rate. The fertility rate of the married women ages 15 and 44 was higher than the South Korean total fertility rate (table 1). It tells us that the TFR includes the birth rate of unmarried women and different ages from ages 15 and 44.

Table 3. Existing Number of Children for the Married Women Aged 15-44

<table>
<thead>
<tr>
<th>Year</th>
<th>One and None</th>
<th>Two</th>
<th>Three and Above</th>
<th>Average Child Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>31.7</td>
<td>57.4</td>
<td>10.9</td>
<td>1.7</td>
</tr>
<tr>
<td>2003</td>
<td>27.4</td>
<td>60.6</td>
<td>12.0</td>
<td>1.8</td>
</tr>
<tr>
<td>2006</td>
<td>32.2</td>
<td>56.8</td>
<td>11.0</td>
<td>1.7</td>
</tr>
<tr>
<td>2009</td>
<td>33.4</td>
<td>56.0</td>
<td>10.6</td>
<td>1.7</td>
</tr>
</tbody>
</table>

(Unit: % and number)
In terms of the number of children (table 3), families with two children made up more than 50 percent of the population whereas families with three children and above made up the lowest percentage. This data strongly suggests that most South Korean families preferred having two children or fewer.

**Conditions of Abortion**

Since the nationwide national family planning policy went into effect in 1962, abortion increasingly has played a prominent role as used to promote abortions to married women in their early period of pregnancy by encouraging a treatment under the name “medical treatment for controlling menstruation.” It was called “MR Kits.” Sometimes, the government paid for the expenses of MR treatment for married women. In fact, one of the interviewees in my qualitative interview had the MR Kit treatment in her early period of pregnancy. She described the treatment as an abortion. Even though an abortion in South Korea is illegal today, if a pregnant woman wishes to abort, she usually visits her local OB/GYN, and the doctor usually performs the abortion without any hesitation, or the doctor refers her to a clinic that can perform the abortion.\(^{72}\)

According to the survey by the Ministry of Health and Welfare in 2011 “the number of abortions performed has steadily fallen since 2008 due to the increasing use of

\(^{72}\) “Abortion in Korea,” accessed September 27, 2011, http://www.thekoreanlawblog.com/2007/11/abortion-in-korea.html. According to the article, in the Korean laws, “a physician may perform an abortion if the pregnant woman or her spouse suffers from an eugenic or hereditary mental or physical disease specified by the Presidential Decree, if the woman or her spouse suffers from a communicable disease specified by Presidential Decree, if the pregnancy results from rape or incest or if continuation of the pregnancy is likely to jeopardize the mothers health.”
contraceptives and the participation of obstetricians in anti-abortion campaigns.” 73

Abortions per 1000 fertile women were declining to 21.9 women with abortion in 2008, 17.2 women with abortion in 2009, and 15.8 women with abortion in 2010. 74 According to the survey in 2011, in regard of the reason of the drop of abortion numbers, people recognize the planned pregnancy with using contraceptives and the ministry presumes morning-after pills have helped reduce the number of abortions. In addition, the national atmosphere of encouragement of childbirth seems to have affected the current abortion decline. Also, the survey illustrates that most women who have had an abortion say that they did so because it was an unplanned pregnancy. Therefore, I argue that education and information regarding contraception and safe sex need to be strengthened in South Korea for a continuous drop of abortions.

According to the 2009 National Survey on Fertility, Family Health and Welfare in South Korea, among married women ages between 15 and 49, the first reason for abortions (32.1%) was due to unwanted pregnancy. 75 The second reason (14.6%) was for controlling the age gap between siblings. The third reason (14.1%) was due to the pregnant women’s physical problems or extra uterine pregnancy. The fourth (12.2%) was the medical risk of pregnant women due to the fetus. The fifth (10.7%) was concern about financial difficulties, and the last (9.5%) was premarital pregnancy. As mentioned

73 The Ministry of Health and Welfare of South Korea conducted the research on 4000 women aged between 15 and 44 from May to June in 2011, quoted in Rahn Kim, “Number of abortions decreases since 2008,” The Korea Times, September 23, 2011.

74 Ibid.

above, many South Korean women had an abortion due to unwanted pregnancy. It seems that abortion is often considered to be a readily available birth control method.

Table 4. The Experience of Abortion on the Married Women Aged 15-44

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>53</td>
<td>52</td>
<td>54</td>
<td>49</td>
<td>44</td>
<td>39</td>
<td>40</td>
<td>34</td>
<td>26</td>
</tr>
<tr>
<td>Region</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>55</td>
<td>54</td>
<td>55</td>
<td>49</td>
<td>45</td>
<td>39</td>
<td>41</td>
<td>34</td>
<td>26</td>
</tr>
<tr>
<td>Town/Village</td>
<td>48</td>
<td>47</td>
<td>49</td>
<td>49</td>
<td>39</td>
<td>41</td>
<td>38</td>
<td>35</td>
<td>28</td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15-24</td>
<td>22</td>
<td>27</td>
<td>29</td>
<td>21</td>
<td>21</td>
<td>13</td>
<td>15</td>
<td>15</td>
<td>4</td>
</tr>
<tr>
<td>25-29</td>
<td>42</td>
<td>41</td>
<td>40</td>
<td>36</td>
<td>27</td>
<td>17</td>
<td>23</td>
<td>11</td>
<td>11</td>
</tr>
<tr>
<td>30-34</td>
<td>61</td>
<td>57</td>
<td>55</td>
<td>51</td>
<td>45</td>
<td>35</td>
<td>34</td>
<td>24</td>
<td>18</td>
</tr>
<tr>
<td>35-39</td>
<td>63</td>
<td>63</td>
<td>60</td>
<td>58</td>
<td>52</td>
<td>50</td>
<td>46</td>
<td>40</td>
<td>28</td>
</tr>
<tr>
<td>40-44</td>
<td>67</td>
<td>62</td>
<td>65</td>
<td>60</td>
<td>53</td>
<td>52</td>
<td>50</td>
<td>48</td>
<td>37</td>
</tr>
</tbody>
</table>

(Unit: %)

According to table 4, the total percentage of married women ages 15 through 44 who have opted to get an abortion has been dropping significantly from 1985 through 2009 declining. However, women ages from 35 to 44 had higher levels of abortion than women ages 30 and less. It is clear that these older women do not want to have more children. Namely, they finished a delivery in their late 30s or early 40s. In comparison to the survey of unmarried women between the ages of 17 and 25 in 2005, 95 percent of the unmarried women had an abortion when they got pregnant whereas among the married women ages 15 and 24, the abortion rate was 15 percent in 2006. The reason why unmarried women choose abortion instead of giving birth seems to highlight that the pregnancy of unmarried women is not accepted in South Korean society. Indeed, unmarried mothers in South Korea are exposed to significant societal prejudice and to severe financial difficulties. In fact, programs and support for unmarried mothers are not

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76 Lee, et al., “A survey of attitude toward sex of unmarried women in South Korea.”
well established in South Korea. Given these difficulties and societal prejudices, it is not so surprising that unmarried South Korean women seem to choose abortion at rather high levels instead of bringing their babies into the world and living as unmarried mothers.

Table 5. The Reasons for the First Time and Last Time Abortion on the Married Women Aged 15-44. Parentheses are the last time abortion.

<table>
<thead>
<tr>
<th>The Reason of Abortion</th>
<th>2006</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>The Nation Wide</td>
<td>City</td>
</tr>
<tr>
<td>* Do not want a child</td>
<td>30.0 (38.4)</td>
<td>32.1(36.9)</td>
</tr>
<tr>
<td>*Control the age gap</td>
<td>16.4 (11.7)</td>
<td>14.6(11.2)</td>
</tr>
<tr>
<td>*Pregnant women’s physical problems or extra uterine pregnancy</td>
<td>10.0 (10.4)</td>
<td>14.1(14.5)</td>
</tr>
<tr>
<td>*Medical risk of pregnant women due to the fetus</td>
<td>5.0 (4.6)</td>
<td>12.2(12.7)</td>
</tr>
<tr>
<td>*Premarital pregnancy</td>
<td>7.9 (5.4)</td>
<td>9.5(6.7)</td>
</tr>
<tr>
<td>*Family issue</td>
<td>1.3 (1.1)</td>
<td>2.3(2.3)</td>
</tr>
<tr>
<td>*Financial difficulty</td>
<td>13.4 (13.4)</td>
<td>10.7(11.9)</td>
</tr>
<tr>
<td>*Due to female fetus (do not want a daughter)</td>
<td>2.0 (2.3)</td>
<td>1.3(1.2)</td>
</tr>
<tr>
<td>*During the employment</td>
<td>2.5 (2.1)</td>
<td>2.4(2.0)</td>
</tr>
<tr>
<td>*The rest</td>
<td>11.5 (10.6)</td>
<td>0.9(0.6)</td>
</tr>
</tbody>
</table>

(Unit :%)

In terms of the reasons for abortion (table5), 73.7 percent of the women getting an abortion for the first time and 72.8 percent of the women getting an abortion for the last time abortion named socio-economic reasons, not medical or physical problems. In addition, the number one reason for abortion was reported that I “do not want a child.” Bringing up children imposes a heavy burden on South Korean families even as it does on families around the world. If the South Korean government were to offer systematic supports and programs to ease the economic burden of rearing children to families, the
abortion rate mostly likely would be reduced. This kind of strategy would appear to be the most helpful way to solve the biggest social concern, the “low birth rate.”

**Conditions of Infertility and the Desire toward the Policy of Birth and Family**

According to the 2009 National Survey on Fertility, Family Health and Welfare in South Korea, among infertile married women between the ages of 15 and 49, 77.2 percent of them had infertility treatments. Regarding the expenses of the treatments, 83.5 percent paid out of their pockets and 15.5 percent had government subsidies.\(^77\)

The report by the Korea Institute for Health and Social Affairs uncovered that 13.5 percent of married couples failed to have a baby in 2003. Sterile couples have serious psychological problems and depression from infertility. So they need not only physical support, but also mental health support from the government. “For working wives, 91 percent of them had difficulty managing their work and getting assisted reproductive operations at the same time-26.6 percent quit their jobs and 8.9 percent temporarily left their jobs.”\(^78\) Even though infertility treatments have always been ethically controversial, it is important that we consider many couples’ real pain and anguish who have challenges in starting a family.

Ironically, while 40 percent of the married women ages 15 and 44 had an abortion in 2003, 13.5 percent of married couples were struggling with infertility in the same year. In addition, in Korea, one out of every seven couples is unable to get pregnant according

\(^77\)Kim, et al., The 2009 National Survey on Fertility, Family Health and Welfare in South Korea.

\(^78\)Rahn Kim, “One out of seven couples infertile,” The Korea Times, February 20, 2011.
to the governmental data in 2008. In other words, in South Korea, some married couples have an abortion because they do not want to have a baby due to various reasons whereas other couples make great efforts and spend a lot of money attempting to have a baby.

According to the 2009 National Survey on Fertility, Family Health and Welfare in South Korea, regarding the needs for giving birth and a social expectation for family by the respondents, married women answered as follows: 18.6 percent of them wanted the expansion of childcare facilities, 12.4 percent wished assistance for the expenses to raise their children, and 12.0 percent wished assistance for the expenses for raising infants and toddlers. In other words, the survey shows that South Korean married couples worry about the expenses of rearing of children. In addition, 21.7 percent were deeply concerned about the safe and secure social environments for raising children.

**Today’s Contraceptive Use and the Attitudes of South Korean Women**

One of my main goals in this research project is to explore South Korean heterosexual married Catholic lay people’s experiences with contraception. Through comparing and contrasting South Korean general people’s and Catholic lay’s contraceptive use and attitudes, we gain, I believe, important insights into how Catholic faith and the Vatican’s continued condemnation of birth control shapes sexual and reproductive choices among married South Korean Catholics. Thus, in this part, I will explore South Korean ordinary people’s experiences with birth control.

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79 Ibid.

According to a survey by *The Study Group for Contraception* in 2007, 45 percent of 1000 women South Korean nationwide aged between 19 and 34 (unmarried and married) believed that contraception should be the responsibility of men, whereas only 4.8 percent said it was primarily women’s responsibility. Among the respondents with sexual experience, 33 percent said they had hardly tried birth control. Others said they used a pregnancy tester to see whether or not they were pregnant or used a morning-after pill after unprotected sex. Even for contraception, according to the survey, many turned to fertility awareness or *coitus interruptus* rather than oral pills.

According to the 2009 National Survey on Fertility, *Family Health and Welfare in South Korea*, the rate of contraceptive use increased from 9 percent to 44 percent between 1961 and 1976. Since then, the rate have been rising to 57.7 percent in 1982, 70.4 percent in 1985, 77.1 percent in 1988, 79.4 percent in 1991, 80.5 percent in 1994, 79.3 percent in 2000, 84.5 percent in 2003, 79.6 percent in 2006, and 80.0 percent in 2009. Obviously this charts a remarkable rise in the use of birth control in South Korean society across the last half century.

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81 The study group for contraception is a group of Obstetricians and Gynecologists in South Korea which support the Planned Parenthood. They conducted the survey with 1000 unmarried and married women aged between 19 and 34 nationwide in 2007. Ji-Sook Bae, “Women inactive in preventing unwanted pregnancy,” *The Korea Times*, September 26, 2008.
Table 6. The Contraceptive Use of the Married Women Aged 15-44

<table>
<thead>
<tr>
<th>Year</th>
<th>Use</th>
<th>Non-Use</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Exp</td>
</tr>
<tr>
<td>2000</td>
<td>79.3</td>
<td>10.1</td>
</tr>
<tr>
<td>2003</td>
<td>84.5</td>
<td>8.5</td>
</tr>
<tr>
<td>2006</td>
<td>79.6</td>
<td>9.9</td>
</tr>
<tr>
<td>2009</td>
<td>80.0</td>
<td>10.0</td>
</tr>
</tbody>
</table>

(Unit:%)

In South Korea public awareness of contraception is still very low and many people have poor information about contraceptive methods even though the rate of contraceptive use in married couples has grown to 80.0 percent. For instance, in 2009 even though 80 percent of married women aged 15-44 used contraceptives (table 6), especially, 37 percent of women aged 40-44 chose to have an abortion (table 4). It suggests that there is a dearth of information, knowledge, and practice of effective contraception.

Most South Koreans today engage in premarital sex before they turn 30 years old. By the poll conducted by the Korean Women’s Development Institute, 51.8 percent males aged 25-30 engaged in sexual intercourse without using contraception in 2009, while 43.2 percent of females in the same age group had sex without any form of contraception. Even though most Koreans engage premarital sex before 30, almost 50

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82 “Most S. Koreans Experience Premarital Sex Before 30,” The Korea Herald, January 24, 2010. According to the article, “The poll conducted by the Korean Women’s Development Institute on 3084 people showed that 67.2% of unmarried males aged 25-30 experienced premarital sex using some form of contraception in the past year [2009], while 45.1 percent of single males of ages 19-24 said they engaged in premarital sex during the past year [2009].”

83 Ibid.
percent of them have unprotected sex. In current South Korean society, dating couples with relative frequency get married due to unexpected pregnancy.

Regarding unprotected sexual practices of teenagers, according to the report from *the Korea Centers for Disease Control and Prevention* dated April, 02, 2010, some 41 percent of juveniles having sexual intercourse use some kind of contraceptive and 11.1 percent have suffered from STDs. The 2008 survey by *the Korea Centers for Disease Control and Prevention* says that “9.7% of teenage girls with sexual experience had been pregnant, up from 9.3% from the previous year. Of the pregnant teens, 88.3% opted for an abortion.”84 Continuously, the survey says that teenage males had a 3 percent higher rate of sexual experience than female teens. The causes of sexual problems and distortions in South Korean teenager sexuality seem to be caused primarily by a general lack of awareness about the sexual issues, sex education classes that are too focused only on theoretical aspects of reproduction, and a societally engrained taboo on the discussion of specific or practical sexual measures at home and school.

**The change of the contraceptive use.** The following statistics are based on *the 2009 National Survey on Fertility, Family Health and Welfare in South Korea*. As the average age at which South Koreans get married has kept higher and higher across recent decades, women aged under 29 have come to show lower rates of the contraceptive use, while the women aged in their late 30s showed higher rates of contraception because most women try to end up giving birth in their late 30s. According to the survey, well-educated women (with a degree of B.A. or more) used contraceptives at a higher rate than women with low education levels (with graduation of middle school). In addition, South

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Korean women who get married in their 30s tend to try to get pregnant and give birth as soon as possible after marriage while Korean women who get married in their 20s tend to desire to postpone pregnancy and childbirth. Moreover many women opt not to have children at all in order to keep their career.

The choice of popular contraceptive methods in South Korean society has also changed across recent decades. Currently the most used method is condoms (25.0%). The next is the use of vasectomy (21.0%), and the use of IUD is third at 16.1 percent. In the past, during the revitalization of the effort to control population growth between the 1960s and the 1980s, the South Korean government encouraged married women to get a permanent contraceptive solution such as a tubal sterilization and sometimes the government offered to pay for the surgery. One of interviewees in my qualitative interview had the tubal sterilization in the 1980s provided by the government.

Thus, two major changes seem to have occurred in regarding the contraceptive methods of married South Koreans in recent decades. The first shift can be seen in that the primary location of contraceptive agency has tended to be shifted from the woman’s body to the man’s body. Namely, condoms and vasectomies have become the most frequently used methods of contraception and the (semi) permanent method of contraception, the vasectomy, is done to the man’s body, not the woman’s. Second, while permanent methods such as tubal sterilization were popular in the past, nowadays, women seem to prefer using semi-permanent and reversible contraceptive methods as seen in the growth of IUD use.

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Since the government decreased the funding for free surgical sterilization for married women, semi-permanent methods such as vasectomy and IUD have become more popular. As I learned from my interviews, many South Korean married men preferred the vasectomy because they were willing to sacrifice for their wives and the method is semi-permanent. The negative aspect of the transition from permanent to semi-permanent (vasectomy) or temporary methods (condoms and coitus interruptus which were the most popular temporary methods) is that more women can be exposed to an unwanted pregnancy, which may lead them to opt for an abortion due to the failure of contraception. According to my research with ten South Korean heterosexual married Catholic women, seven out of the ten interviewees experienced the failure of Natural Family Planning (NFP), which is one of the temporary birth control methods, and most of these NFP users used secondary contraceptives such as condoms or coitus interruptus due to the high failure rate of NFP. In addition, actually, they were exposed to an unwanted pregnancy, and in fact, four out of ten had an abortion.

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86 According to the source from the website, www.koreahealthlog.com, which is managed by the group of South Korean medical doctors who were selected by UNESCO for the award of digital heritage, the failure rate of contraception with vasectomy in South Korea had been reported as 0.2-5.0 percent by 2008.
Table 7. Contraceptive Method Used by the Married Women Aged 15-44

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Tubal Sterilization</td>
<td>18.3</td>
<td>15.6</td>
<td>11.3</td>
<td>7.3</td>
</tr>
<tr>
<td>Vasectomy</td>
<td>13.0</td>
<td>15.7</td>
<td>19.7</td>
<td>21.0</td>
</tr>
<tr>
<td>IUD</td>
<td>13.7</td>
<td>16.1</td>
<td>15.0</td>
<td>16.1</td>
</tr>
<tr>
<td>Oral Pill</td>
<td>2.1</td>
<td>2.0</td>
<td>1.1</td>
<td>2.7</td>
</tr>
<tr>
<td>Condom</td>
<td>16.5</td>
<td>8.5</td>
<td>19.2</td>
<td>25.0</td>
</tr>
<tr>
<td>The rest</td>
<td>15.7</td>
<td>26.6</td>
<td>13.3</td>
<td>18.2</td>
</tr>
</tbody>
</table>

(Unit: %)

The purpose of contraceptive use. According to the 2009 National Survey on Fertility, Family Health and Welfare in South Korea, married women aged between 15 and 44 used contraception for a variety of reasons. 68.2 percent used contraception but eventually stopped in order to become pregnant and to give birth. Some women (11.7%) used contraception in order to postpone pregnancy and childbirth. Only 0.1 percent used contraception for other reasons. In detail, married women under 34 used contraception to delay childbirth, and most over 34 year old women used contraceptives for ending their fertility. Most Korean women used contraceptives right after they had one or two children to end their fertility and to stop further pregnancies. According to my quantitative and qualitative data, South Korean married Catholic lay women were no exception. They used contraception after finishing further childbirth.

The preference of contraceptive methods. According to the 2009 National Survey on Fertility, Family Health and Welfare in South Korea, 85.0 percent of the married women aged between 15 and 44 who were using IUDs answered they would use

87 The 2009 national survey did not describe “the rest” in detail in the contraceptive methods. I assumed that Natural Family Planning and coitus interruptus were included in “the rest” with other methods, and in the chapter four of this dissertation, the attitude and use of Natural Family Planning were dealt with in detail. According to my qualitative interviews, I learned that coitus interruptus was misunderstood by most interviewees as a Natural Family Planning.
the method continuously while 51.0 percent of the women who were using spermicide answered continuous use even though the using rate was low. Regarding the most desired methods for future contraceptive use among married women, vasectomy was 72.1 percent while the next was IUDs at 9.9 percent. Sterilization was 6.8 percent, and condom use was 2.4 percent. 5.6 percent answered they did not know. Most married women aged between 15 and 44 desired vasectomy due to safety and convenience for themselves. This fact shows that most women pursue safe and convenient contraceptive methods for themselves. Among Catholics, semi-permanent method like vasectomy were preferred, especially by people who ended fertility, and people who still had a plan for further childbirth preferred temporary methods such as condoms or Natural Family Planning. I did not find much of difference between the choices of Catholics and those of non-Catholic Koreans in general.

**Tentative Findings from the Study of Contraceptive Attitudes and Practices of South Korean Women**

Among the Korean married women ages 15-44, the rate of contraceptive use was 80 percent in 2009. It suggests that contraceptive practice is quite prevalent across the range of South Korean hetero sexual married couples. But as I have noted, there has been an important change in the preferred methods of contraception adopted by couples across the last decades in South Korea. First, the number of women using female contraceptive methods such as tubal sterilization has greatly diminished while more couples have begun to employ male contraceptives like vasectomies and the use of the condom. These changes likely are due to changes in gender equality, the advancement of women’s
education standards, and the increase of women’s economic activities. Second, permanent methods have decreased while couples have adopted greatly increased use of temporary methods such as condom use. Even, couples who don’t want to give birth any more use such temporary modes of contraception. In addition, according to the 2009 National Survey on Fertility, Family Health, and Welfare in South Korea, many young married couples who don’t want to have a baby use temporary methods, and even they showed a high preference for temporary contraceptives. It appears likely, given the data, that if the contraception fails, they will abort.

According to my qualitative interviews, South Korean women have a fear of side-effects or of wrong information regarding contraceptive pills and semi-permanent methods such IUDs. This can be the reason why married women prefer vasectomy and unmarried women prefer condoms. In addition, in comparison with married women, it is not easy to go to an Ob-Gyn for unmarried women in South Korea because of conservative societal atmosphere. Thus, unmarried women seem to prefer using temporary contraceptive methods which do not need any medical services or prescriptions. Therefore, it would seem that South Korean society needs to provide more helpful and supportive contraceptive educational programs and societal atmosphere to help married couples and unmarried women in order to help reduce occasions when they feel pushed to contemplate abortion. Because I did not find any significant differences between South Korean non-Catholics and Catholics on contraceptive use and attitudes, it seems clear that South Korean Catholics need contraceptive educational programs fully as much as do their non-Catholic fellow citizens.
In order to help shed light on South Korean society’s views regarding contraception, I offer table 8 that charts contraceptive method choice among U.S. women. This comparison, I believe, will be helpful for understanding some of the distinctive features of South Korean reproductive practices. The table 8 illustrates a snap-shot of contraceptive use in the United States among women. Contraceptive use in the United States differs widely from the main patterns that appear in South Korean society. While the oral pill is the most used contraceptive method in the U.S., male condoms and vasectomy are the most used methods for married and unmarried women in South Korea. In fact, South Korean women seem to have a fear of side-effects of contraceptive pills and they seem to feel that the oral pills are inconvenient because they have to take them regularly every day. In addition, as mentioned before, many South Korean women seem to believe that contraception should be the responsibility of their male partners. Therefore, South Korean women seem to prefer temporary methods such as male condoms or coitus interruptus and contraceptive surgeries performed on the man’s body such as vasectomies.
Table 8. Data regarding Contraceptive Use in the United States\textsuperscript{88}

<table>
<thead>
<tr>
<th>Method</th>
<th>No. of users (in 000s)</th>
<th>% of users</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pill</td>
<td>10,700</td>
<td>28.0</td>
</tr>
<tr>
<td>Tubal sterilization</td>
<td>10,400</td>
<td>27.1</td>
</tr>
<tr>
<td>Male condom</td>
<td>6,200</td>
<td>16.1</td>
</tr>
<tr>
<td>Vasectomy</td>
<td>3,800</td>
<td>9.9</td>
</tr>
<tr>
<td>IUD</td>
<td>2,100</td>
<td>5.5</td>
</tr>
<tr>
<td>Withdrawal</td>
<td>2,000</td>
<td>5.2</td>
</tr>
<tr>
<td>Three-month injectable (Depo-Provera)</td>
<td>1,200</td>
<td>3.2</td>
</tr>
<tr>
<td>Vaginal ring (NuvaRing)</td>
<td>900</td>
<td>2.4</td>
</tr>
<tr>
<td>Implant (Implanon or Norplant), one-month injectable (Lunelle) or patch (Evra)</td>
<td>400</td>
<td>1.1</td>
</tr>
<tr>
<td>Periodic abstinence (calendar)</td>
<td>300</td>
<td>0.9</td>
</tr>
<tr>
<td>Other*</td>
<td>200</td>
<td>0.4</td>
</tr>
<tr>
<td>Periodic abstinence (natural family planning)</td>
<td>100</td>
<td>0.2</td>
</tr>
<tr>
<td>Diaphragm</td>
<td>†</td>
<td>†</td>
</tr>
<tr>
<td>TOTAL</td>
<td>38,214</td>
<td>100.0</td>
</tr>
</tbody>
</table>

\*Includes emergency contraception, female condom or vaginal pouch, foam, cervical cap, Today sponge, suppository or insert, jelly or cream (without diaphragm) and other methods.

\†Figure does not meet standards of reliability or precision.

One conclusion that I draw from the data is that even though the rate of contraception use is almost 80 percent today, South Korean’s attitudes about contraception are still conservative. In addition, due to the high rate of use in ineffective

and unsafe contraceptives such as male condoms and *coitus interruptus*, South Korean women are too often exposed to an unwanted or unexpected pregnancy. I think that South Korean Catholic lay women are no exception in South Korean society. I argue that there is clearly a strong need for South Korean society to have safe contraceptive methods made widely available and stronger governmental program of education regarding the strengths and weaknesses of different sorts of contraception options.

In part II, I explored South Korean ordinary people’s fertility, family health, abortion, and contraception through quantitative survey data in order to compare and contrast them to Catholic lay people in the next part. In the third main section, I will look into a quantitative survey data regarding South Korean Catholic heterosexual lay people’s fertility, sexuality, and faith in order to compare and contrast them to general South Koreans.

**Part III: Family, Fertility, Sexuality, and Faith in South Korean Catholic Church**

In this last main section, I discuss South Korean heterosexual Catholic lay people’s fertility, sexuality, and faith related to sexual issues in order to offer general information and backgrounds regarding South Korean heterosexual Catholic lay people. This will prove helpful in chapter four where I interpret and analyze the meanings and understandings articulated in my ten interviewees’ stories and their “sharing” of their experiences as Catholic lay woman in South Korea.

Here I rely heavily on two surveys, *The Survey for Family and Family Ministry of Catholics of Archdiocese of Seoul* published by the department of family ministry of the
Archdiocese of Seoul in 2000 and *The Survey on Life and Family* published by the Catholic Bishops Conference of South Korea in 2004. In regards to the 2000’s survey, *The Survey for Family and Family Ministry of Catholics of Archdiocese of Seoul* consisted of handing out a questionnaire to Catholic parishioners during September and October 1999. The questionnaire was distributed to each local parish church located in Seoul which in turn gave the survey to lay people, priests, nuns, and staff who work at the church. A total of 2007 questionnaires were finally collected. Of that total, 1767 were from lay parishioners while 174 were from priests and nuns. 58 questionnaires were collected from the church staff people.

The results of the 2004 survey, *The Survey on Life and Family* were compiled in a subsequent to *Pastoral Letter to Families* published by the 2004 Fall General Assembly of the national Catholic Bishops Conference of South Korea. The Korea Research Center was charged with the 2004 survey, which surveyed 1000 Catholics and 1000 general people from across South Korea. It selected subjects aged fifteen and above nationwide and surveyed them from November 18th to December 19th in 2003 by using a

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90 Ibid., *The Survey for Family and Family Ministry of Catholics of Archdiocese of Seoul*.

91 Ibid., 15. The sampling sizes were 2499 of lay parishioners (2176 of adults who aged over 18 and 323 of teens between the age of 13 and 18) and 1035 of priests, nuns, and the church staffs (388 of priests, 444 of nuns, and 203 of staffs). The sampling error for lay people was plus or minus 2.3 percentage points with 95 percent accuracy and for priests, nuns, and staffs it was plus or minus 5.5 percentage points with 95 percent accuracy.

92 The Korea Research Center is one of the biggest private research companies in South Korea since 1988; In regards to religions of the general population pool, they included 47.4% of atheists, 24.3 % of Buddhists, 18.8% of Protestants, 8.8% of Catholics, and 0.7% of Confucianists and the rest. The general population pool included 8.8 % of Catholics.
proportionate quota sampling and questionnaires. The survey asked varied questions concerning marriage, divorce, remarriage, life, sex, suicide, euthanasia, capital punishment, matters of senior citizens and teenagers, pregnancy, childbirth, contraception, abortion, mother and child health, familial relationships, and religious life among other questions.

The 2004’s survey differed from other surveys which were conducted by the South Korean Catholic Church in the past. First, it was conducted by an entity outside of the Catholic Church. Secondly, differently from other surveys in the past, it asked Catholics and the general population the same questions. In addition, because one of the survey’s goals was to know not only about Catholics, but also about the general South Koreans, it did not exclude Catholics from the general population pool. Therefore, this survey was not reflective solely of Catholic understandings or religious belief with regard to the ethical topics discussed and it surveyed a larger and more varied population. Thus, this survey seems to reflect real and actual experiences, practices, and perspectives of South Korean Catholics more honestly than other sources from the Catholic Church. At the same time, this survey offers helpful data for comparing tendencies in Catholics’

93 Proportionate quota sampling is sometimes just called quota sampling. “Quota Sampling: An Overview,” accessed September 22, 2012, http://dissertation.laerd.com/articles/quota-sampling-an-overview.php. “Quota sampling is a type of non-probability sampling technique. Non-probability sampling focuses on sampling techniques that are based on the judgment of the researcher. With proportional quota sampling, the aim is to end up with a sample where the groups being studied (e.g. males vs. females) are proportional to the population being studied.” The survey’s sampling error was plus or minus 3.1 percentage points with 95 percent accuracy. The survey selected subjects nationwide such as Seoul (224-general people/223-Catholics), Incheon/Kyounggi (244-general people/243-Catholics), Daegu/Kyoung-Buk(112-general people/116-Catholic), Busan/Ulsan/Kyoungnam (118-general people/116-Catholics), Kwangju/Junla (118-general people/113-Catholics), Daejun/Chungcheong(101-general people/105-Catholics), and Kangwon(33-general people/34-Catholics). The general male respondents were 496 (male Catholics -497) and general female respondents were 504 (female Catholics-503). The general respondents aged between 15 and 19 were 101 (Catholics-99), 20’s were 219 (Catholics-221), 30’s were 226 (Catholics-226), 40’s were 191(Catholics-191), 50’s were 213 (Catholics-222), and 60’s and above were 50 (Catholics-41).
understandings and practices with those of the general South Korean society. The religious makeup of the pool of the general respondents surveyed is as follows. The largest group was Buddhists, making up 24.3 percent of those surveyed. Protestants made up 18.8 percent and Catholics made up 8.8 percent. The remaining 47.4 percent specified no religion.94

Together these two surveys offer the most objective snap-shot of Catholic South Koreans’ general views on a number of topics. The key difference of two surveys is that the survey in 2004 included not only Catholics but also people of many other faith traditions and people who did not claim a faith tradition, while the survey in 2000 was conducted only with Catholics. So, the survey in 2000 seems to be useful for knowing South Korean Catholics’ affairs, views, and attitudes in detail.95

Views and Attitudes of South Korean Catholics on Family, Life, and Sexuality

According to The Survey on Life and Family in 2004, the views and attitudes of South Korean Catholics on the subjects of family, life, and sexuality do not show significant differences from all other groups of South Korean people surveyed. Concerning the perspectives and general attitude on the sanctity of life, a small difference of views exists between Catholics and the general respondents. However, as it evident in the analysis below, their practice, use or experience in daily lives showed no significant differences on most subject areas. In other words, even though South Korean Catholics tend to agree with the Church’s teachings in general, there are many difficulties and gaps

94 The Catholic Bishops Conference of South Korea, The Survey on Life and Family (Seoul, South Korea: CBCK, 2004), 10.

95 Since 2004, The South Korean Catholic Church has not surveyed yet on the subjects of marriage, family, and life.
in carrying those teachings forward into day-to-day life and practice. For example, even though 68.4 percent of South Korean Catholics reported their agreement with the Church’s teaching of Natural Family planning, in actual practice the rate of Natural Family Planning use was only 13.4 percent.96

**Views on Marriage, Divorce, and Remarriage**

The Roman Catholic Church teaches divorce and remarriage as grave offenses against the dignity of marriage.97 I present South Korean Catholics’ views of marriage, divorce, and remarriage through a comparison to the general South Korean people to examine Catholics’ understandings, agreements, and practices regarding the Church teachings on marriage, divorce, and remarriage.

40.8 percent of the general pool of South Korean people surveyed answered “if possible, marriage is better than being single” while 45.6 percent of South Korean Catholics so responded. 28.6 percent of Catholics said “you should marry” while the figure from the general pool of those surveyed who gave the same response was 30.6 percent. On the other hand, where 25.6 percent of Catholics answered “if you don’t want, you don’t have to marry,” 28.5 percent of the general population pool answered the same.98 On the subject of divorce, 44.7 percent of the general population and 54.2 percent of Catholics agreed with the answer, “as long as you are married, divorce should not be allowed.” Catholics had more negative views concerning divorce than did the total pool

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97 See the *Catechism of the Catholic Church* (Liguori, MO: Liguori Publications, 1994) n. 2382-2386.

of the general people surveyed. Catholics who had long period of faith and had family members who were all Catholics were against divorce (62.6%).

Concerning remarriage, 55.3 percent of the total pool of South Korean respondents agreed with “if it is available, you remarry” and 44.3 percent of them agreed with “it is better not remarry.” On the other hand, 51.2 percent of Catholics agreed with “it is better not remarry,” and 48.5 percent of them answered “if it is available, you remarry.” Catholic married women aged between 50 and 59 with low education level and low income had strongly negative attitudes on the subject of remarriage. The data tells us that Catholics had more positive views on marriage than the general people and suggests that Catholics in general respect the Church’s teachings on marriage. Likewise Catholics tend to regard divorce and remarriage more negatively than the South Korean population in general does.

**Perspectives and Attitudes on the Sanctity of Life**

Throughout history, there have been heated debates on the issue of “when life begins” scientifically, philosophically, and religiously. The Roman Catholic Church teaches that human life begins at the moment of conception. I present views and attitudes of South Korean Catholics and the general South Korean people on the issue of the sanctity of life. Because, the understanding of the morality of contraception is so closely related to the understanding of the dignity of human life, I explore how general South Koreans and Catholics view the sanctity of life, and explore the points of divergence between these two groups. In addition, this question is one of the questions in my

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99 Ibid., 34-35.

100 Ibid., 36-37.
ethnographic interviews that I used to examine my interviewees’ thought, practice, learning, and faith regarding the Church teaching on the sanctity of human life. Thus, before I investigate my interviewees’ perspective, I study South Korean societal perspective and attitudes on the sanctity of human life.

Regarding the question, “when do you think life begins?” 70 percent of Catholics and 60 percent of the general pool of respondents answered “the moment of conception.” It tells us that Catholics respected this view of the sanctity of life more than the general population and it seems that the Church’s teachings affected Catholics’ views on this issue.

I present figure 1 (below), which regards the eight subjects against the sanctity of life in the Catholic Church. The figure shows the perspectives of South Korean Catholics and general people on the eight issues.

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101 Ibid., 55.
According to the figure 1, the general pool of those surveyed responded against abortion (74.7%), embryo/cloning (73.5%), and suicide (73.0%), while Catholics responded against abortion (80.8%), suicide (80.6%), and embryo/cloning (79.7%).\footnote{Ibid., 54.} It tells us that over all, Catholics had negative perspectives against the eight subjects more than the general population and it seemed that the Church teachings positively affected the views of Catholics. Especially, in regards to artificial contraception, South Korean society in general and Catholics in particular both showed that they did not consider \footnote{Those eight subjects are natural family planning, artificial contraception, abortion, IVF, euthanasia, capital punishment, suicide, and embryo/cloning.}
artificial contraception to be as serious an immoral act “against life” as much as abortion, suicide, and cloning. It seems that since artificial contraception is prevalent among South Korean people including Catholics, people might not consider the subject of artificial contraception as serious as other subjects such as abortion. My interviews with ten Catholic lay women, display a broad respect for the Church’s teaching on the sanctity of life. Most of them (9 out of 10) showed a strong agreement with the Catholic Church teaching that life begins at the moment of conception. However, even though they agreed with the teaching, nine out of ten had an experience with using artificial contraception or illegitimate birth control method in the Catholic Church, and four out of ten had an abortion. My interviews highlight a strong gap between agreeing to the teaching and a willingness to always carry out that teaching.

In regards to artificial insemination, according to the earlier 2000’s survey, only 12.8 percent of Catholics considered artificial insemination unethical whereas 37.5 percent of them responded that it is ethical. 49 percent of Catholics responded that a decision maker for artificial insemination is the couples themselves, not the Church teaching. In other words, only one out of ten Catholics disagreed with the artificial insemination.

Accordingly, it seems clear that most South Korean Catholics do not consider artificial contraception and artificial insemination as a serious moral assault against human life while they raise significant objections to abortion, suicide, and cloning.


However, as mentioned before, their agreement in theory does not always get into practice. For instance, even though South Korean people including Catholics raised significant objection to abortion (74.7% -general people/80.8%-Catholics), 40.1 percent of general respondents and 34.2 percent of Catholic respondents reported experiences of having an abortion.¹⁰⁶

**Perspectives and Attitudes on Sex**

The Catholic Church teaches that sexual intercourse is legitimate only in a marital relationship, and that premarital sex and extramarital sex are against the sacrament of marriage. I present the perspectives and attitudes of South Korean people including Catholics on the subjects of premarital and extramarital sex because they are related to marital sexuality and through the perspectives and attitudes on sexual relationship, we can see that how South Korean Catholics understand and follow the Church teachings and their faith in their marital sexual lives.

**Premarital sex.** According to the survey in 2000 (figure 2), 50.7 percent of adult Catholics and 48.4 percent of teenagers were strongly opposed to premarital sex.¹⁰⁷ However, 44.7 percent of adult Catholics and 40.6 percent of teenagers agreed with “depending on the situation, you can have a premarital sex.” Related to this subject matter, significant differences in views existed between different age cohorts of Catholics. Those in their 60s and over often displayed strongly different views from those in their 20s.

¹⁰⁶ See the below, the part of abortion.

¹⁰⁷ *The Survey for Family and Family Ministry of Catholics of Archdiocese of Seoul* in 2000, 42.
According to the 2004 survey, there was a little difference between the general pool of South Korean respondents and the Catholic respondents on their views of premarital sex. Two-thirds of the general population showed positive attitudes on premarital sex and 64.1 percent of them said “if you love, there is no reason to be blamed.” 50.6 percent of Catholics responded “in any case, premarital sex should be avoided” and 47.1 percent of Catholics answered “if you love, there is no reason to be blamed.”

Especially, most Catholic women aged 60 and over with low level of education and over 31 years of active Catholic practice were strongly opposed to premarital sex while most Catholic men aged in their 20s, especially those living in a big city and those with white-collar jobs with less than three years of active Catholic practice had the highest positive

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108 Ibid.

agreement with the statement, “if you love, there is no reason to be blamed.” The strong disagreements from Catholic women aged 60 and over seem to be caused by relatively conservative and patriarchal South Korean sexual cultural views that were more prominent in the past in contrast with the views of people in their 20s and 30s today.

Regarding the experience of premarital sex, 33.6 percent of the general pool of respondents and 28.6 percent of the Catholic respondents reported having engaged in premarital sex. This would appear to indicate that many Catholics have indeed been affected by the Church’s teachings relating to sexual life. In case of Catholics, the surveys in 2000 and in 2004 almost seemed to be same on the issue of premarital sex.

**Extramarital relationships.** Like premarital sex, extramarital relationships are held to be against the sacrament of marriage in the Catholic Church. I present the views and attitudes on extramarital relationship among Catholics with comparison to the views of general Korean society. Through this data, we can see how South Korean Catholics understand the Church teachings and accept and practice them in their everyday lives.

According to the survey of 2004, 78.4 percent of the survey’s general respondents and 85.5 percent of the Catholic respondents were strongly opposed to extramarital relationships. On the other hand, 21.5 percent of the general respondents and only 14.5% of Catholics agreed with “if you love, there is no reason to be blamed.” In general women had a more negative evaluation of extramarital relationships than men. The reason seems that throughout South Korean history men’s extramarital relationships were more culturally acceptable than women’s and that women experienced significant emotional suffering because of this double-standard.

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110 The low level of education is defined as completion of middle school.
Concerning such relationships outside of one’s marriage, 24.2 percent of the general respondents and 22.2 percent of Catholic respondents answered that they had an experience of spiritual love with the other sex. 14.7 percent of general respondents and 15.5 percent of Catholics had an experience of a physical relationship with an extramarital partner. There was little difference regarding the experience of an affair with physical relationship between men of the general pool of respondents (25.2%) and Catholic male respondents (25.1%). And the rate of men’s experience was five times higher than women’s (women of the general respondents-5.0% and Catholic women-6.4%). Therefore, through the data, we can see that South Korean sexual culture is male-dominated and holds to a strong double standard of sexual morality for men and women. This holds true both for South Korean society in general and for the South Korean Catholic population in particular.

**Sexual Relationships of Married Couples**

As discussed earlier, in the Catholic Church, a sexual relationship is legitimate only in marriage and sexual intercourse should have the two significances: “the unitive significance and the procreative significance” and they should be inseparable.\(^{111}\) Namely, marital intercourse should be legitimate and ethical when it is fulfilled with two purposes at the same time. In other words, if marital intercourse is fulfilled with only either one purpose, it is immoral and not legitimate.

The quantitative data below helps us understand what a sexual relationship means to South Korean married Catholics. It helps us appreciate their understanding of the significances or purposes they have for engaging in intercourse. According to the survey

\(^{111}\) See Pope Paul VI’s encyclical letter, *Humanae vitae*, no.12.
in 2000, on the question of “what kind of situations or when do you have a sexual relationship with your spouse?” many Catholic men answered that whenever they want to have intercourse, they do. Many Catholic women responded that when their husbands wanted intercourse, they feel they have to go along even though sometimes they don’t want to. Therefore, the gender role responses on the sexual intercourse among married couples appeared to highlight a strong bias toward male dominance. In addition, it would seem that the survey of 2000 suggests that the unitive meaning of sexual intercourse (96.2%) is a key factor in most cases of intercourse and only 3.8 percent was for something else. Even though the survey did not mention the rest in detail, I assume that the rest of the reasons for sexual intercourse include an intention for procreation.

Figure 3. When Do You Have a Sexual Relationship with Your Spouse? (Catholic)\textsuperscript{112}

![Bar chart showing when do you have a sexual relationship with your spouse among Catholics.](image)

In a related vein, on the question of gender equality at home, “who is superior at home?” 43.5 percent of adult Catholics responded that a man and a woman are equal at

\textsuperscript{112} Ibid., 57.
home whereas 45.7 percent of them answered that a man is superior to a woman at home (35.7%–a man is a little bit superior to a woman. 10.0%–a man is much superior to a woman). Only 10.8 percent of adult Catholics responded that a woman is superior to a man at home (8.8%–a woman is a little bit superior to a man. 2.0%–a woman is much superior to a man). Therefore, it would seem that the perspective of gender equality at home affects sexual intercourse of married couples. For instance, according to the figure 3, 47.6 percent of Catholic women responded that they have sexual intercourse when their spouses want whereas 36.1 percent of men answered they do. In addition, while only 0.9 percent of Catholic women have sexual intercourses when they want, 20.5 percent of Catholic men do so. Most said that the key reason for sexual intercourse lay in the unitive purposes between spouses. The procreative purpose might be included in the rest. The reason seems that after a period of time for having a baby, the married couples do not seem to consider the procreative purpose when they have sexual intercourse. Namely, after married couples finish having children, the significance of the sexual relationship seems to center in the unitive meaning between spouses. That is the reason that married couples use and need effective contraceptives to have a marital union without worrying about procreation. The union becomes more significant than procreation after a certain period of time in marriage.

\[113\] Ibid.
\[114\] Ibid.
Attitudes of South Korean Catholic Women on Abortion and Contraceptive Use

Abortion. The Catholic Church teaches that “human life must be respected and protected absolutely from the moment of conception,” and “the Church has affirmed the moral evil of every procured abortion.”\textsuperscript{115} Namely, abortion is held as a grave crime against human life. Beyond religion, abortion seems to be treated as a grave evil or crime in some societies. Even though abortion is treated as a grave immoral and criminal act in the Church and society, many women still have an abortion and they experience deep emotional suffering and guilt. I present the views and attitudes of South Korean Catholics on abortion through the comparison to those views and attitudes reported by the general South Korean people.

90.5 percent of the general pool of respondents agreed with the permissibility of getting an abortion in cases of a “medical risk of a pregnant woman” and “pregnancy due to rape.” 79.9 percent of Catholic respondents agreed with the permissibility of abortion due to “the medical risk of a pregnant woman” and 81.1 percent did with “pregnancy due to rape.” In the case of life-threatening pregnancy, 97.3 percent of general South Korean respondents and 94.7 percent of Catholics agreed with the permissibility of an abortion. Therefore this survey data strongly suggests that South Korean people, including Catholics, lay moral weight on saving a pregnant woman’s life more than on saving a fetus.\textsuperscript{116}

\textsuperscript{115} See the \textit{Catechism of the Catholic Church} (Liguori, MO: Liguori Publications, 1994) n. 2270-2275.

\textsuperscript{116} \textit{The Survey on Life and Family} in 2004, 77-78.
Regarding a person or couple’s right to make a decision for or against abortion, 54.2 percent of general respondents and 60.7 percent of Catholics responded that “abortion should be left up to individuals.” However, among people who are against abortion, 52.7 percent of general respondents and 62.6 percent of Catholics agreed that “abortion is murder.” Interestingly, only 17.1 percent of Catholics chose the response that “because abortion is banned by the Catholic Church.” As mentioned above, it seems that abortion is quite often condemned like murder in human society even outside religious circles. Therefore, most people including Catholics were against abortion not just because of particular religious teachings, but also because of these general societal wide moral views.

Regarding how many women have undergone abortions, 40.1 percent of general respondents and 34.2 percent of Catholic respondents reported experiences of having an abortion. Regarding the number of times women had undergone abortions, 54.5 percent of general respondents and 54.1 percent of Catholics had one time, and 35.6 percent of general respondents and 34.3 percent of Catholics had two times, and 9.9 percent of general respondents and 11.6 percent of Catholics had more than three times. Of those reporting having had an abortion, 40.6 percent of general respondents and 44.8 percent of Catholics responded that the reason for their abortion was that “they did not want a child anymore.” 22.8 percent of general respondents and 17.4 percent of Catholics reported aborting due to unplanned pregnancy, and 18.3 percent of general respondents and 18.0

117 Ibid., 79-80.

118 Ibid., 81.
percent of Catholics sought abortions due to financial difficulties. There were little differences of the reason of abortion between the pool of general respondents and Catholic respondents.\textsuperscript{119} Most stated that a key reason for having an abortion was that they did not want to have a child. This means that abortion is being employed as a birth control method. This suggests powerfully that if a woman does not want to have a child or have no plan for another child, it would be morally preferable if they would use effective contraceptives instead of resorting to killing life.

Figure 4. The Reason of Abortion\textsuperscript{120}

\textsuperscript{119} Ibid., 82.

\textsuperscript{120} Ibid.
According to the survey of 2000, regarding the experience of abortion before and after entering the Church, the rate of abortion among Catholics reduced 4 percent after entering the Church. The number of times also reduced a little bit after entering the Church. However, four out of ten Catholics reported having had an abortion after entering the Church.\textsuperscript{121} This data tells us that how much the Church teachings have affected the view and attitude of Catholics on abortion. Even though many South Korean Catholic women had undergone abortions, because the rate of abortion and the number of times were reduced slightly, the Church teachings and the people’s faith do seem to have affected some of their decisions on abortion and their views on the dignity of human life.

Figure 5. Experience of Abortion (Catholics)\textsuperscript{122}

\begin{figure}[h]
\centering
\includegraphics[width=\textwidth]{figure5}
\caption{Experience of Abortion (Catholics)}
\end{figure}

\textsuperscript{121} The survey for Family and Family Ministry of Catholics of Archdiocese of Seoul in 2000, 78.

\textsuperscript{122} Ibid.
The reasons for an abortion reported by Catholic respondents were as follows: “do not want a child”(43.1%); “unplanned pregnancy”(26.8%); “financial difficulty”(13.5%); “possibility of a deformed child”(11.8%); “to have a boy”(5.1%); “medical problem of a pregnant woman”(4.2%). The reasons for an abortion among Catholics were almost the same in the two surveys, that of 2000 and that of 2004.

**Contraception.** Regarding contraceptive use, 50.6 percent of general married people reported using contraception, and 49.1 percent of them stated they were not. Among the married Catholics, 55.0 percent of them were using contraception and 44.7 percent of them were not. The Catholic Church condemns artificial contraception as an intrinsically evil act. However, according to the data, South Korean married Catholics

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123 Ibid.

124 Ibid., 79.

125 *The Survey on Life and Family* in 2004, 83.
were using artificial contraceptives at a higher rate than South Korean general population pool.

On the contraceptive use by education level, people who had an education level of college and over had the highest rate of use (62.6% - general respondents and 59.3% - Catholics) and due to the high use of contraception, the rate of abortion experience was relatively low for the class of people who were well educated.\textsuperscript{126}

In regards to the contraceptive methods, 34.5 percent of general respondents and 44.8 percent of Catholics used permanent methods and only 14.6 percent of Catholics were using Natural Family Planning, which the Catholic Church identifies as the only morally permissible form of contraception. However, I am suspicious of the data of Natural Family Planning. According to my qualitative research data, people who identified themselves as a NFP user used condoms and\textit{coitus interruptus} as a secondary method. For instance, when they were sure about their infertility, they did not use any contraceptives. But, if they were suspicious of their infertile period, some of them used condoms or\textit{coitus interruptus} instead of avoiding intercourse. According to the Church teaching of NFP, people should avoid sexual intercourse during the fertile period and should not use any contraceptives during the infertile period. However, most of my interviewees who thought they used NFP for birth control did use condoms and\textit{coitus interruptus} with NFP. Therefore, I judge that the data of the true NFP users would be less than 14.6 percent.

\textsuperscript{126} Ibid.
Regarding agreement with Natural Family Planning among the Catholics, the survey of 2000 showed that 68.4 percent of Catholics expressed agreement with the Church’s approval of Natural Family planning. It did not necessarily mean agreement in actual practice. Most of those who agreed were aged 50 and over, and the younger respondents agreed less.\textsuperscript{128}

With respect of the contraceptive methods among Catholics, according to the survey of 2000, more than half of adult respondents were using contraception at the time of the survey. Those who are 30 and over showed a high rate of contraceptive use. The popular methods were in the following order: permanent methods, condom, natural family planning, IUD and ring. In the 2000 survey, only 13.4 percent of Catholics were using Natural Family Planning while in the 2004 survey, 14.6 percent of Catholics

\textsuperscript{127} Ibid., 84. \\
\textsuperscript{128} The survey for Family and Family Ministry of Catholics of Archdiocese of Seoul in 2000, 75.
reported using the method. In other words, even though the Catholic Church holds that Natural Family Planning is the only morally permissible approach, most Catholics do not, in fact, practice that method in their daily lives. In addition, younger South Korean Catholics tend to use condoms as the preferred method while older South Korean Catholics tend to use permanent methods at higher rates. It is most likely that those in their 20s and 30s tend to choose temporary method such as condoms because they are still single or are young married couples who still plan for a child later, while those in their 40s and over tend to choose a permanent method because they have already had one or more children and do not plan for another. My interviews bear out this tendency.

In conclusion, even though many Catholics (68.4%) report their agreement with the Church’s approval of Natural Family planning, in actual practice the rate of Natural Family Planning used appears to be very low (13.4%). According to the survey in 2004, while 15.2 percent of the general South Korean respondents used Natural Family Planning, only 14.6 percent of Catholics used that method. As mentioned earlier, the true rate of NFP users would be less than the data because people might use NFP with other temporary contraceptive methods such as condoms and coitus interruptus. Surprisingly general South Korean society uses Natural Family Planning at a slightly higher rate than the Catholic population of South Korea. This suggests that the Church teachings on contraception are considered by South Korean Catholics as an ideal and general teaching in their faith but not necessarily an overriding moral practical teaching to drive all moral in the reproductive decisions in their everyday lives. In addition, it is noteworthy that the survey data discloses that there is little difference between the rates of general South
Korean society and the South Korean Catholic community in the contraceptive use and methods actually used. Like other South Koreans, when Catholics choose contraceptive methods, they consider their own situations such as convenience, safety, and economical efficiency more than religious teachings or faith.

**Marriage Preparation Course in the South Korean Catholic Church**

Through the marriage preparation course, the Catholic Church provides engaged couples preparing for the wedding day with the spiritual resources and practical tools such as natural family planning they need for their strong and healthy marriage. I explore how many South Korean Catholics took the course before marriage and how much the teachings were helpful for their marital lives.

According to the survey in 2000, 4.7 percent of Catholics including people who were baptized after marriage did not celebrate a nuptial mass. The reported data shows that 92 percent of Catholics aged 20s took the course, and 37.3 percent of Catholics aged 60 and over took the course. In my interviews with South Korean Catholic married women, some of them reported that for many Catholics aged 50 and over the course was not readily available and some Catholics had never heard about the course when they were married. This is clearly one of the main reasons why Catholics aged 50 and over had a low percentage of attendance. The figures below show attendance rates for different age groups and their sense of the usefulness or unusefulness of the course.
Figure 8. Taking the Marriage Preparation Course (Catholics)\textsuperscript{129}

<table>
<thead>
<tr>
<th>Age Group</th>
<th>No</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>60s and over</td>
<td>37.3</td>
<td>62.7</td>
</tr>
<tr>
<td>50s</td>
<td>40.8</td>
<td>59.2</td>
</tr>
<tr>
<td>40s</td>
<td>34</td>
<td>66</td>
</tr>
<tr>
<td>30s</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20s</td>
<td>8</td>
<td>92</td>
</tr>
<tr>
<td>Total</td>
<td>41.4</td>
<td>58.6</td>
</tr>
</tbody>
</table>

(Unit: %)

\textsuperscript{129} Ibid., 94.
While many people responded that watching the abortion video was very helpful for them, only 48.6 percent of Catholics took the video class. The rate of taking a lecture concerning a doctrine of the sacrament of marriage was 76.4 percent whereas the rate for taking the class of Natural Family Planning was only 56.2 percent. According to my interviews with Catholic women, marriage preparation courses differ one from another significantly in content and program. Even though many Catholics who watched the abortion video found it very helpful, such programs including the video class were not available to everybody. In addition, some Catholics did not learn about Natural Family Planning at all during the course. Sometimes, the practical issues related to sex and life were omitted or treated in passing and at a high level of generality in the course. Most

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130 Ibid., 95.
courses, as reported in my interviews, lay emphasis on general Catholic doctrines rather than practical teachings aimed closely at the real life reproductive challenges of Catholic married couples.

Therefore, it would seem that based on the data and my qualitative interviews that in order for the marriage preparation course in the South Korean Catholic Church to be made more effective pastorally it needs to be reshaped significantly to engage more practical issues and more practical information to help Catholic married couples substantially. Regarding the current situations of sexual education programs and counseling or healing programs for married couples in South Korean Catholic Church, these programs appear to have serious gaps in their curriculum and sadly they appear to be often simply not readily available for many Catholics in many parts of the country. In addition, there are not enough experts for providing the programs in the Church or the church organizations. Therefore, it would seem that each local Catholic parish needs to commit to staffing these programs to help teen Catholics and married couples for their sexual lives and their married lives in faith. In fact, currently when Catholics need counseling or teaching regarding their faith or bible study, they typically have ready access to such courses and programs in most parishes. However, when they need help regarding their sexuality or their relationships with a spouse or with other family issues, it appears that they often have to look outside of the Church for guidance. Therefore, the South Korean Catholic Church should establish a better network of organizations for counseling on sexuality, family, and marriage issues staffed by educated experts. This can be a way to reduce the gap between Catholics’ daily lives and their religious lives.
In this last section, through the two quantitative data sets, I have explored heterosexual married sexuality and faith among South Korean Catholics by comparing their views with survey data drawn from the South Korean population in general. This provides an important context and frame for interpreting my ten interviewees’ stories and their experiences as Catholic lay women living in South Korea and also to compare and contrast between Catholic lay people and my interviewees.

**Conclusion**

While Parts I and II offered general overviews of South Korean sexuality and sexual culture and contemporary sexual issues, Part III offered general overviews of South Korean Catholics’ sexuality through quantitative research data. This chapter has served to identify in the South Korean society’s sexual culture a prominent double-standard regarding sexual morality for men and for women, and although there is a strong movement in South Korean society working to promote women’s rights, in the popular understanding of gender roles, and women’s participation in the economy, women’s sexuality is still treated as a secondary or subordinate sexuality.

In comparison with South Korean general people, South Korean Catholic’s sexuality, their practice, use and experiences in daily lives showed no significant differences in most subject areas. In other words, as mentioned above, even though South Korean Catholics tend to agree with the Church’s teachings in general, there are many difficulties and gaps in carrying those teachings forward into day-to-day life and practice.

Today, two facts of the main social concerns in South Korea are the “low fertility” and “population aging.” South Korea is heading toward a declining stage as it is one of
the fastest aging societies with a low birth rate. It suggests that contraceptive practice is
generalized in South Korean married couples. However, due to ineffective contraceptives,
mARRIED and unmarried women still sadly struggle with unwanted pregnancies and many
of these fetuses end up being aborted.

In terms of the low fertility rate, one of the main reasons of birth control or
abortion for married couples is that they do not want to have a baby due to a heavy
financial burden of bringing up children. For unmarried women, one of the major reasons
for having an abortion is because of socio-cultural prejudices and financial difficulties for
unmarried motherhood. If the South Korean government would offer systematic supports
and programs to ease the burden of rearing children for families and for unmarried
mothers, it is likely that the abortion rate and the level of birth control usage would
decline. And this would help ease the challenge regarding what some consider being the
nation’s biggest social concern, the “low birth rate.”

Regarding contraceptive use, 50.6 percent of general married people reported
using contraception, and among the Catholics, 55.0 percent of them were using
contraception. Therefore, Catholics were using contraceptives more than general
population pool. Even though 68.4 percent of Catholics expressed agreement with the
Church’s approval of Natural Family planning, it did not mean that actual practice
followed this expression of agreement. In the 2000 survey, only 13.4 percent of Catholics
were using Natural Family Planning while in the 2004 survey, 14.6 percent of Catholics
reported using the method. In other words, even though the Catholic Church holds that
Natural Family Planning is the only morally permissible approach, most Catholics do not, in fact, practice that method in their daily lives.

In the next chapter I offer ten personal stories from South Korean Catholic heterosexual married women’s experience drawn from my qualitative interviews in order to understand the complex interrelations between South Korean Catholics’ views of marital sexuality and their faith in light of their attempts to respect official Catholic teachings. The limitation of quantitative data will be complemented through my qualitative interview data. For instance, according to the quantitative data examined above, 34.2 percent of South Korean Catholic women reported having an abortion and 88.4 percent of them had undergone abortions more than one time. In addition, 44.8 percent of Catholics responded that the reason for their abortion was that “they did not want a child anymore.” However, I could not get their personal reasons of having abortions. Nor could I ascertain their contexts and circumstances from the quantitative data such as why they chose to have an abortion at that time and what situation they were faced with. I could not ascertain whether or not they believed they felt another option was available to then instead of an abortion nor could I get data on who really made the final decision for having an abortion. In addition I could not get information about their feelings after getting an abortion or a sense of, how they understood their religious life after having an abortion. The quantitative data did not offer any close glimpse into how such women viewed their relationship to the Church after their abortions.

In the next chapter, I offer my analysis of my qualitative interviews with ten South Korean Catholic heterosexual married women in order to shed more understanding
on these concrete issues. Even though the ten participants’ stories and experiences cannot comprehensively cover the wide experience of all of South Korean heterosexual married Catholics, still, I believe, that they offer a most helpful spotlight on many common ranges of experience, emotional challenges, and conflicted sense of values and choices shared by so many South Korean Catholic married women today.
CHAPTER FOUR

LESSONS FROM SOUTH KOREAN CATHOLIC WOMEN ON CONTRACEPTION

In Chapter Three, I explored a select set of quantitative surveys that shed light on the general sexual culture of South Korea and South Korean heterosexual married Catholic lay people, especially in regards to sex education, sexual violence, the prevalence of premarital sex, abortion rates, marital sexuality, and the practices involving birth control usage. These quantitative data and contexts serve to develop a general understanding of South Korean people’s and Catholics’ sexual cultures, sexualities, and reproductive practices and attitudes. In addition, they lay the context for my qualitative data, namely the ethnographic interviews with ten South Korean heterosexual Catholic married women, which constitute the focus of this chapter.

My ethnographic research aims to learn from a certain group of people—their stories and views. In contrast, the quantitative data discussed in the previous chapter serve to contextualize my ten interviewees’ perspectives which grow out of their experiences in specific times and places, their stories, and my interpretation and analysis of the interview data. In addition, the quantitative data help me to compare and contrast the experiences of my ten interviewees with more general findings regarding South Korean heterosexual married Catholic experience and culture. In other words, I use quantitative data regarding South Korean Catholic married lay people as the secondary
data to support my constructive arguments and to give more context to the ethnographic interview data.

One of the major, underlying arguments of this dissertation is that the experiences of lay people constitute an important theological datum, especially in the matters of human sexuality.¹ Any Catholic reflection on sexual ethics that ignores the experience of the laity is inadequate. In Chapter Two, I indicate that the current official Church teaching on contraception does not respond to Catholic heterosexual married women’s experiences, struggles and needs with supporting revisionist perspectives. To illustrate a case in point, I interviewed ten South Korean heterosexual married Catholic women. This interview data supports my constructive argument, namely that the Church teaching on contraception should be reshaped and reconsidered in order to give concrete and practical ethical teaching to South Korean Catholic heterosexual married women. Even more, if its official teaching is to be both relevant and adequate, the Catholic Church needs to listen to Catholic women in other societies across the globe who may well have the similar or different contexts, struggles, and needs.

In the first part of this chapter, I will discuss the specific ethnographic method informing this qualitative research and the interview design. Then, in the second part, I will shift focus to share ten personal stories from South Korean Catholic heterosexual married women, which are drawn from my interviews. I conducted semi-open-ended, in-

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¹ For a scholarly work regarding Catholic lay people’s experiences with ethnographic research methodology, see Emily Reimer-Barry “In Sickness and In Health: Towards a Renewed Roman Catholic Theology of Marriage in Light of the Experiences of Married Women Living with HIV/AIDS” (PhD diss., Loyola University Chicago, 2008). In her dissertation, Reimer-Barry explores the experiences of eight Catholic married women who are HIV-positive who live in Chicago, Illinois. Reimer –Barry examines their views regarding their marriage, family life, church involvement, and their everyday experiences living with HIV/AIDS.
depth, one-on-one ethnographic interviews with ten married South Korean Catholic women regarding their experiences with marriage, family, birth control, sexuality, and religious life in order to learn from their experiences and challenges. I do so as a way to pay sustained attention to their stories regarding their own married lives and birth control understood in light of their attempts to respect the official Catholic teachings. Through my analysis of the interview data, I find that these stories lend support to my argument that a huge “gap” exists between official Church teaching on birth control and these ten South Korean heterosexual married Catholic women’s experiences of birth control. In the third part of this chapter, I will reflect a bit on what I learned from this particular research method, briefly noting what I anticipated before beginning the interviews and what I learned through conducting them.

Part I: Methodology of the Project

Introducing Central Features and Aims of Qualitative Research

Qualitative research is, according to Sharlene Nagy Hesse-Biber and Patricia Leavy, “a particular tradition in social science that fundamentally depends on watching people in their own territory and interacting with them in their own language, on their own terms… Qualitative research is an empirical, socially located phenomenon, defined by its own history, not simply a residual grab-bag comprising all things that are ‘not quantitative’”2. In other words, through ethnographic interviews, one kind of qualitative research, a researcher explores a certain group of people’s personal stories and experiences in a particular context, tradition, and culture with interacting between the

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researcher and participants in a specific time and place, in their language, and in specific contexts. In terms of specific research strategies, qualitative researchers “often use one or more of the following methods (though this is not an exclusive list): ethnography, in-depth interviewing, oral history, auto ethnography, focus group interviewing, case study, discourse analysis, and content analysis.” While all of these research strategies are helpful for various kinds of studies, in my case, I selected the format of individual interviews because I wanted to study personal experiences in their particular contexts regarding birth control and marital sexuality as a Catholic and observant. Especially, my reasons for selecting one-on-one individual interviews, rather than conducting focus groups, are that because I have chosen to study a rather private and delicate subject matter, especially in South Korean culture (e.g. birth control, abortion, sexual intercourse with a spouse, and religious faith). My sense is that it would be too awkward to discuss such questions and answers in a group setting. Also, some of these women may know each other outside of the group and may not want others to know these things about themselves. Thus, I was concerned to protect the confidentiality and anonymity of my participants.

This research approach then is a kind of qualitative research method, which contrasts with quantitative research. For example, while quantitative methods use standardized measures, and, if conducting interviews, a set questionnaire in order to develop “a broad, generalizable set of findings presented succinctly and parsimoniously,” qualitative methods exemplify more open-ended questions with the aim of generating “a

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wealth of detailed information about a much smaller number of people and cases, and reduced generalizability.”⁴ Thus, while a researcher cannot claim that a certain group of people represent another group of people or bigger number of people, still by listening closely to them readers may gain insight into their struggles and needs or have common grounds, sympathy, or disagreement.

In relation to the role of the researcher in qualitative research, feminist Christian social ethicist, Aana Marie Vigen, notes: “the purpose of qualitative research, in an inductive approach, is to describe in textured detail what the researcher learns from his or her immersion in a particular context.”⁵ In the ethnographic research, the researcher learns from his or her involvement in the research through interaction between the researcher and the interviewee, and the in-depth understanding of individuals in particular and various contexts.

In-depth interview as main research method of ethnography is “a particular kind of conversation between the researcher and the interviewee that requires active asking and listening. The process is a meaning-making endeavor embarked on as a partnership between the interviewer and his or her respondent”⁶ In other words, a genuine partnership and collaboration between the researcher and the interviewee is vital to the research processes of ethnography.

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⁶ Hesse-Biber and Leavy, 119-120.
In the previous chapter, I used existing quantitative data regarding contemporary South Korean sexual culture and South Korean Catholics’ sexuality. For instance, the quantitative data regarding contraception in the previous chapter give a strong sense of the significant percentage of South Korean people who use contraception, the kind of contraceptives they use, and their reasons for using contraception. In contrast, my ethnographic interviews shed light on why these women used certain types of contraception, how it has worked for them, on their experiences and personal opinions related to contraception, and on what has been the difficulties and challenges related to birth control for each of them. In other words, the quantitative data give broad, generalized, and statistical information whereas the qualitative research data illumine personal, experiential information about how contraception realities affect these particular women. This is one of example of the difference between quantitative and qualitative research.

In addition, while quantitative research depends on measuring instruments such as “the test items, survey questions, or other measurement tools” according to prescribed procedures, in qualitative methods, “the researcher is the instrument.”7 Through his or her skill, insight, ability, experience, background, and knowledge, the researcher analyzes and synthesizes the research data and can change or shifts the result. Due to this characteristic, the result of the data from the qualitative research is subjective and specific. Moreover, the “validity in qualitative methods . . . hinges to a great extent on the skill, competence, and rigor of the person doing fieldwork” through his/her own insight.

7 Patton, 14.
analysis, interpretation, evaluation, language, terms, knowledge, flexibility, and interacting with participants. In other words, the rigor and value of the research depends largely upon the skill and expertise of the person doing the fieldwork.

Also, it is important to acknowledge limits of qualitative methods. For example, qualitative researchers reflect the research data through their own lens. Therefore, the result of the research can be subjective and limited. Because the subjective dimension, there are limits to the uses of qualitative research methods.

Yet, even with this limits – not yielding generalizable findings and having subjective dimensions inherent to them, qualitative methods are nonetheless useful and valid. To illustrate, in specific terms of qualitative research methods used in theology, theologian Mary McClintock-Fulkerson argues that even though qualitative methods do not serve the same purposes as quantitative studies, a case study employing a qualitative method “can provide important contextualization of belief in the instance of Christian faith and open to view important questions.” McClintock-Fulkerson criticizes traditional theological methodologies such as certain types of historical, hermeneutical, and philosophical approaches as excessively theoretical and abstract. The problem, as she puts it, is that these theologies often lack of a sense of the density of lived faith and linkages between a human practice or affirmation of a value and “the actual social world in which it is embedded and sustained or reproduced.” She argues that ethnographic

8 Ibid.


10 Ibid., 129
methods can provide much better grasp of the lived interactions and communications between Christian traditions and embodied practices of Christian faith. 

By the same token, for instance, the Roman Catholic official teaching on birth control attaches importance to the Church tradition and its infallibility relatively to the experiences and circumstances of heterosexual married Catholic lay people in their lived relationships. In other words, as McClintock-Fulkerson pointed out, the Church teaching on birth control is excessively theoretical, abstract, and idealistic, and does not sufficiently engage human experiences, struggles, challenges and often failures in trying to follow the Church’s condemnation of artificial birth control. In a similar vein, in the book, *Ethnography as Christian Theology and Ethics*, Aana Marie Vigen and Christian Scharen argue the necessity of using ethnography as a means and tool for doing theology and ethics to study the social and cultural realities and practical situations, and argue that ethnography is one way “to give flesh and bone to the theological concept of *imago dei* (image of God).”

Through using ethnographic interviews as a tool, a researcher can study certain people’s practical and empirical situations and specific societal and cultural contexts and circumstances related to the subject matters of theology and ethics.

In keeping with the convictions and aims of those expressed by Fulkerson, Scharen, and Vigen, my ethnographic project explores how ten South Korean heterosexual married Catholic women understand and live out their faith in relation to their sexual lives (specifically in terms of their decisions and perspectives on birth control).

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11 Ibid., 130-136.

12 Vigen and Scharen, ed., *Ethnography as Christian Theology and Ethics*, 73.
My aim has been to learn about interactions and tensions between the Catholic Church teachings and their lived practices and faith regarding birth control and marital sexuality. The hope is that when others read these stories and experiences, they will reflect on their own experiences and perspectives, and how they resonate and/or contrast with what these women have expressed.

In Part III of Chapter Three, I summarized South Korean perspectives—among Catholics and general people—on family, fertility, sexuality, and faith by reporting the findings of two quantitative surveys, *The survey for Family and Family Ministry of Catholics of Archdiocese of Seoul* of 2000 and *The Survey on Life and Family* of 2004. The results and facts from the two survey data are not much different from the data I gathered through the qualitative interview regarding the range of topics such as the general use rates of artificial contraception, the levels of abortion use, and the relatively low rate usage of NFP. 13 However, through these qualitative interviews I learned in much richer detail and nuance of peoples’ concrete reasons, specific contexts, personal experiences, feelings before and after, their perspectives, and voices than possible when using quantitative methods. In addition, even though the sample size of my interview project was limited (I was only able to interview ten women), I believe that because these detailed, individual stories and perspectives may make others sympathetic to these

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13 According to *The Survey on Life and Family* of 2004, among Catholics, 55.0% were using contraception whereas 6 out of 10 among my interviewees had used contraception, and 34.2% of Catholics had experiences of abortion whereas 4 out of 10 among my interviewees underwent an abortion. In the survey of 2000, only 13.4% of Catholics were using Natural Family Planning while in the survey of 2004, 14.6% of Catholics used the method. Among my interviewees, 1 out of 10 used only NFP without any other artificial contraceptives.
perspectives, “inspire others,” inform their own voices, or common ground or value can be formed among readers.  

My qualitative interview inquiry is composed of ten women’s stories and these, I believe, are most helpful for getting a better sense for the concrete lived contexts and specific challenges of faithful living and reproductive choices in the South Korean context, specifically, views, attitudes, and experiences of South Korean Catholic heterosexual married women with respect to contraception and religious beliefs. In addition, I use a feminist standpoint when I interpret and analyze the results of my interviews. As a core source of feminist methodology, with exploring ten interviewees’ experiences and their discourses, I deal with their contexts, experiences, and stories as women in South Korea. In other words, I work on how South Korean patriarchal and male-dominant societal culture affected their experiences with birth control and what were their specific experiences as a woman in family, society, and Church.

I was born and raised in South Korea and came to the U.S. in my late 20s. I have lived in the U.S. since 2003. As a South Korean heterosexual married Catholic woman, I share a common ground of cultural identity with my interviewees and share with them much experience regarding South Korea’s patriarchal sexual culture with its double-standards and Korean understandings of family values, traditions, and societal stereotypes regarding sexual issues. Likewise I appreciate how forcefully economic concerns impact on couple’s decisions regarding how many children they can afford to have. It must be acknowledged that my cultural background and range of experience both in South Korea

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14Vigen, 86.
and in the United States has shaped the design of my interviews and influenced my analysis of the data. This, I believe, is true of all such sociological and ethnographic research. Nevertheless, because I generally share a cultural traditional background with my interviewees, I believe that I have been able to be sympathetic to their experiences and understandings during the interviews. Clearly like all such ethnographic researchers I have sought to be as objective in my methods and analysis as possible.

**Specific Methodology and Qualitative Interview Design Used**

The goal of my set of qualitative interviews has been to survey South Korean Catholic heterosexual married women’s experiences and their actual conditions and practices of contraception, family planning, sex life, their understanding of marriage, opinions or thoughts about Church teachings, and their understanding of religious faith. Through this research the aim has been to understand the ways in which the Roman Catholic Church’s articulated sexual ethical understandings have affected these believers’ lives. Thus, this research has attempted to get the larger and wide-ranging theological ethical debates about birth control that have been sustained in the Catholic Church for five decades through attentive listening to particular stories and experiences.

The specific method for the ethnographic work consisted of semi-structured interviews with women aged between 30s and 50s. I conducted the interviews in Seoul, South Korea from August to November in 2010 with IRB approval.

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15 Vigen in her book, *Women, Ethics, and Inequality in U.S. Healthcare* focuses on the experiences of women with breast cancer. Her writings on the role of ethnography in Christian theology and ethics have been most helpful in informing my qualitative research, methodology, analysis, and structuring ethnographic interviews.

16 IRBs (Institutional Review Board) are affiliated with a hospital and/or university. “To test a new drug, treatment regimen, or device, one needs an IRB’s authorization. Moreover, any academic research that
Method of recruitment. I recruited interviewees from three organizations - a non-governmental organization formed by South Korean Catholic women and two local Catholic parishes in South Korea. Interviewees were from different age groups and had been married for varying lengths of time. They are from diverse across socioeconomic classes and have diverse religious histories or backgrounds. Some are cradle Catholics and others converted as a result of marriage.

The three cooperating institutions were the Catholic Women's Research Institute of South Korea and two South Korean Catholic parish churches (Seoul Archdioceses) located in Seoul, South Korea. As a detailed access method for potential participants for recruitment purposes, I introduced and announced my research project in a flyer and I submitted the flyers in person to a person who was in charge of the organization and to priests for the local churches. Then, they announced my research project and recruitment of interviewees (the women’s organization-during their official meeting / the two local churches-during their Sunday mass) to their people and then passed out my flyers to anyone interested. I requested personal contacts with potential participants in the flyer. The flyer had my contact information (South Korean and U.S. contact information) so that if a participant was interested, she called me directly and confidentially. Then, we set up the time and location for the meeting. All interviews were voluntary and confidential. I was relieved and glad to experience that even though I did not know anyone before interviewing, when I met the interviewees, I did not feel awkward or unfamiliar to them.

wishes to interview people usually needs IRB approval-especially if one intends to publish the findings in a medical, sociological, to anthropological journal or text.” See Aana Marie Vigen’s book, Women, Ethics, and Inequality in U.S. Healthcare (New York: Palgrave Macmillan, 2006), 103.
Rather, they showed support for my research and shared their thoughts and experiences openly. They were not worried about participating in these interviews.

**Self-awareness of my social location and role as a researcher.** As a heterosexual married South Korean Catholic woman and a mother of one, birth control has been one of challenging issues for me in my marriage. After having my daughter, due to personal reasons, I did not want to have another kid. So, I needed birth control, and as a Catholic, it challenged me to follow the Church teaching regarding birth control. In fact, my actual situation did not let me open to a new life fully, and I could not rely on Natural Family Planning, which is only legitimate birth control method in the Catholic Church. Accordingly, I use artificial contraception and I am still afraid of having another child, and the issue of birth control is still challenging for me.

As the quantitative data show in the previous chapter, today the most popular contraceptive method used by South Korean heterosexual married women is male condoms, and even though I live now in the U.S., as a South Korean woman, I am no exception. While the oral pill is the most used contraceptive method in the U.S., I seem to have a fear of side-effects of the pill because when I lived in South Korea, I heard about negative reviews of the oral pill. In addition, as other South Korean women, I seem to prefer contraceptive surgeries performed on the man’s body such as a vasectomy. When I considered birth control, my cultural background and my own practical situation were considered more significantly than religious teachings and faith.

This personal context was the starting point for my project, and I wondered how other heterosexual married Catholic women dealt with the issues of birth control, their
marital sexuality, their faith, and the Church teachings. Actually, I wanted to learn from them through my research, and I wanted to share our common experiences, concerns, and struggles with other Catholic women through my project. In addition, I wanted to argue that some heterosexual married Catholic women including myself were still struggling between the idealistic Church teachings and their real lives.

Regarding the researcher’s role in qualitative research, John W. Creswell tells us that “qualitative research is interpretative research, with the inquirer typically involved in a sustained and intensive experience with participants.”\(^\text{17}\) Practically, when I interpret the data of my interviews, my experience with each participant has a significant role. As a researcher who had common experiences, concerns, and struggles, when I interviewed ten women, I felt sympathy for their pains and needs, and I learned how their faith commitments played a role in their marital sexual lives as a Catholic.

Again, even though they were strangers to me and I interviewed each person just once, I felt that they were supportive for my research and they seemed to be open to share their experiences and thoughts. Also, because it was a one-time meeting and they were aware that they were not going to have long term relationships with me, they could probably be straightforward even though they had very personal and sensitive questions from me. For instance, one of my interviewees told me that because she would never see me again, she could share her experiences that she would like to cover up for the rest of her life such as abortion. Most of them wanted to hide their participation of my project from their husbands and family members.

In fact, when I let them know that they were able to see their interview transcripts or my dissertation related to their stories, even though nobody refused the availability, they seemed to worry about confidentiality and anonymity against their family members. So, I learned that because I was a stranger to them and guaranteed them confidentiality and anonymity, they could share their pain and struggles. I showed them my appreciation for their brave. Each participant was compensated South Korean currency 20,000 Won (U.S. dollar value $20.00) at the conclusion of the initial in-person interview.

Indeed, one of the reasons I did not ask them for any follow-up contacts or relationships was to put them at ease. I had to reassure them that they would be guaranteed anonymity. I gave them my contact information after the interview, but nobody has contacted me yet. In all, through my research, I learned about the appropriate attitudes as a researcher, protecting the rights of human participants, connections and interacting between the researcher and the participants, and interpreting, analyzing, and writing the results of the research.¹⁸

**The interviews.** The Catholic Church condemns artificial contraception as an intrinsic evil act against the dignity of human life, and the Church allows lay people to use only Natural Family Planning as a legitimate birth control method. So, I asked South Korean Catholic heterosexual married women about their awareness of the Church teachings, the use of Natural Family Planning, difficulties of birth control, how much their faith affects their sexual lives.

¹⁸ Ibid., 184-185.
The interviewees describe themselves as Catholic Christians and they range in age from their 30s to their 50s. I wished to recruit participants aged from their 20s to 60s, but because the participation was voluntary, I did not have any participants in their 20s and 60s. I did not exclude participants who had been married more than once, nor those without a child. Since I wanted to learn about marital sexuality and family planning of South Korean Catholics, as long as they were married, remarriage or no child was not an issue for my interview project. I excluded only currently pregnant women because they are identified by most IRBs as a vulnerable population and requiring extra care when included in research. Even more, I was concerned not to impose upon pregnant women with questions related to reproductive choices, contraception, sensitive questions such as experience of abortion or unwanted pregnancy. I thought that might be overly sensitive and/or culturally inappropriate – especially in a South Korean context.

I developed my questionnaires to focus on the interviewee's experience and the actual condition of their sexual lives in general and their use of contraception and family planning in particular. In addition I focused some questions to explore my interviewee’s thought about the Church teachings and her own religious faith. I followed the order of my questionnaires, but more like a conversation with interviewees, and used the same questions with all of participants.19

Participation in this interview was voluntary. I was the sole interviewer and each interview was conducted for approximately 60-90 minutes in a location suggested by the interviewee or at a location I provided. Before I started an interview, I asked all participants to pick their favorite pseudonyms to be used in my dissertation according to

19 See the Appendix E for the interview protocol in this dissertation.
the policy of confidentiality and anonymity. Therefore, all names of interviewees used hereafter are pseudonyms created by the interviewees.

All interviews were recorded with a tape-recorder and a digital recorder both at the same time in order to protect the files from unexpected accidents such as poor quality recording or accidently removed files. Even though I made my own field notes while interviewing, the presence of the tape and digital recorders allowed me to rely on the field notes as little as possible. So, I could focus on listening to my participants, responding to their talking, and making eye contact. Because each interview was semi-open-ended, I covered specific topics relevant to this study, including each woman's experiences of contraception use, family planning, her sex life with spouse(s), and her feelings and opinions about the Church teachings and their religious lives with following my questionnaire.

Before starting the interview, I had a short time for greeting each other, introducing myself, thanking the interviewee for participation of my project, describing the aims of my project, and securing her consent and her willingness to have the interview recorded. Also, I told her that she could stop the interview at any time to take a break and that she could refuse to answer any question if she feels emotional stress or anxiety or it became too personal. After the initial interviewing, there were no follow-up interviews and the interviewees did not get to read the transcripts of their interviews. All interviews were conducted in Korean. All transcripts of the interviews were translated by a professional translator from Korean to English after I transcribed them in Korean.
Analysis of the interviews. I conducted only one individual interview on any given day. After interviewing with each participant, I transcribed my entire interview in Korean that same night in order not only to transcribe my interview itself, but also to describe my vivid feeling, memory, interacting with the participant, and learning during the interview. When I analyzed my data, I re-read the transcripts, my field notes, and re-listened the audio files when I needed to listen or read some part of the data again.20

In regard to the method of analysis of the data, even though I had an interview protocol, the in-depth, semi-open-ended, and in –person format allowed me to go deeper into some particular questions and to have additional emerged questions during the interview depending on the participant’s case and story. When I analyzed the data, after describing each participant’s demographic information briefly, I identified five relevant and recurring themes in the interviews and that constituted significant findings for this qualitative study. These themes are: 1) Failed NFP and SubsequentAbortions, 2) The Use and Reasons of Birth Control, 3) Perceptions on When Life Begins in relation to Abortion and Birth Control, 4) Purpose of Sexual Intercourse, 5) The Catholic Teachings and the Religious Effect on Birth Control. In the discussion that follows, I will quote some parts of my interview transcripts as they relate to these five themes in order to convey descriptive information about each participant. I will then offer targeted analysis and interpretation of what I have heard and learned from these women.21

20 Aana Marie Vigen is a feminist Christian social ethicist and an expert on qualitative research. She strongly recommended to me that I transcribe all of my interviews after tape or digital recording for further analyzing and evaluating the results of interviews.

21 Creswell, 190-195.
According to Vigen and Scharen, “the ethnographer owns his/her assumptions, biases, hopes, and concerns as part of the process.”22 And indeed, it is true that I cannot escape interpreting what I hear from my interview participants—that I will think about what they say in light of my research questions and concerns. As a way to confront/negotiate this reality, Vigen and Scharen argue that self-critical awareness and accountability is an ongoing significant process during learning and reporting data in ethnographic work.23 As a researcher, during and after describing my participants’ experiences, stories, thoughts, contexts, challenges, pains, and struggles, I indicate that I interpret the data to contextualize their stories with my standpoint, value, language, terms, knowledge, flexibility, and interaction with my participants. I try to honor as fully as possible what I hear from my participants - to hear them in their own voice and as their own person - even as I know I also filter what I hear given my own interests and concerns.

**Consent and confidentiality.** This study protected the confidentiality of the research participants by adhering to strict procedures for data collection and storage. As I mentioned before, I had to reassure my participants about protection of confidentiality and anonymity because my interview dealt with very personal and sensitive subject matters. Even though participation of my project was voluntary, during the interview, I tried to ease their concerns. I saw doing so as one of my roles as a researcher.

22 Vigen and Scharen, 26.

23 Ibid., 19-21.
In terms of the storage of the interview data, only I, as the researcher, can access to the raw data. I have kept the tapes recorded with a recorder in my locked cabinet with an identifying code number, and the audio files recorded with a digital recorder have been saved in my personal computer with a password only I knew for the duration of this study. At the conclusion of the study, all tapes, notes, and transcripts would be archived in a locked file cabinet to which only I have had access in the U.S., and the audio files in my computer would be transferred to a USB flash drive to be archived in a locked file cabinet.  

**Contribution.** Previous research concerning sexual subjects in the Catholic Church, especially, family values, woman’s sexuality, fertility, abortion, contraception, and marital sexuality have focused mostly European and American Catholic women’s experiences. Thus, this study contributes to Asian Catholic women’s experiences, especially South Korean heterosexual married women’s experiences on birth control, fertility, family values, and marital sexuality in relation to the Roman Catholic faith. While limiting the focus of the study in order to explore the influence of religious, specifically Roman Catholic beliefs and practices on the lives of South Korean Catholic heterosexual married women, this study builds on research done in other areas. There is

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24 In any notes and in all presentations and publications I will remove identifying names and use pseudonyms to protect the confidentiality of my participants. Signed consent forms and payment receipts have been stored together in a locked file cabinet and I separate my interview tapes and files from interview transcripts. Only I, as the researcher, can have access to all of data. For the consent form, see the Appendix C in this dissertation.

25 See the footnote 15 in Introduction of this dissertation. I offered an example of scholarly works regarding European and American Catholic women’s experiences.
little research on South Korean religious matters in the U.S. as well as in South Korea, especially Catholic sexual ethical issues.

On an individual level, the participants have not and will not benefit directly in any way from their participation in these interviews. However, it is my hope that their participation in these interviews will contribute new knowledge and understanding to both the American as well as South Korean academic reflection on Catholic sexual ethics and the understanding of marriage held by South Korean heterosexual Catholic couples today.

The limits of the interviews. I was born and raised in South Korea and my qualitative interviews were conducted with South Korean people and in the Korean language. Even though all of the interview transcripts quoted in this dissertation were translated from Korean to English by a professional translator, some parts of the interview transcripts may be understood by English users as impolite or straightforward conversation between a researcher and an interviewee. However, I did follow the IRB training program’s guidelines and sought to avoid any violations of interviewees’ rights by avoiding creating any uncomfortable questions in the questionnaire or generating any negative emotions for interviewees during the interview process.

Other limits of the interview are related the interview participants’ socioeconomic and demographic backgrounds. All of interviewees lived in Seoul, which is a capital city of South Korea. They were home owners and this means that they were of the middle class and not of a socio-economic marginalized section of the population. All families
were employed.26 All of interviewees had some level of formal education. All of the interviewees had graduated from high school and five of them had gone on to receive a bachelor’s degree. And three of those had gone on to receive a master’s degree. In addition, because I met my interviewees only once and did not have following contacts or relationships after interview, I had a limit to know about them such as their life style, personality, or interest. I knew only what they told me during the interview. In addition, I interviewed only ten women, so I cannot claim that my ten participants represent all South Korean heterosexual married Catholic women.

Another limiting factor that must be noted is how people often try to give researcher responses that they believe the researcher wants or that put themselves in a better light. This dynamic may mean that the interviewees’ responses may be skewed by an overemphasis on how they accept Catholic teachings or how deep their religious faith as Catholics really is. In other words, because I am doing a dissertation in Catholic theological ethics, they could be supposing that I, as a researcher was looking for answers that supported, disagreed, or related to Catholic teachings or religious faith. In fact, I did not express my own perspective, position, or thinking regarding the Catholic official teaching during the interviews in order not to affect my participants’ opinions and thoughts and to make them feel comfortable with expressing their own viewpoints.

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26 At that time of the interviews, eight of ten were full time housewives and Ga-Eun and Kyounghee were employed. All interviewees’ spouses were employed full-time.
Part II: Ten Stories from South Korean Catholic Women

Introducing Ten Women

I will begin by briefly introducing each of the ten women whom I interviewed. Then, I will discuss five themes that surfaced through these conversations. I will not engage all ten women’s stories on each theme. It is not possible to discuss each woman’s experience and perspectives in depth. Thus, I have chosen to focus upon those stories in which a recurring theme and/or thought-provoking insight emerged. In terms of introducing ten women, some of the women shared more with me than others such as their childhood experiences or very personal and sensitive matters. Thus, some of these introductions are more substantive than others.

Lan Mun. Lan is fifty-four years old and has been married for thirty-two years. She has cared for her parents-in-law carefully for thirty years. She has three sons. After she graduated from university she married and has lived as a housewife since. She was baptized in the Catholic Church when she went to university in her early twenties. Her husband and his family used to be Buddhist, but after she was married to him, she converted her husband and mother-in-law to Catholicism. After she received a bachelor’s degree thirty-one years ago, she entered graduate school and recently received a master’s degree. She started her graduate study in her late fifties. She is a person who has a strong passion for life and is very active, positive, and energetic. During the interview, she offered frank and confident responses, even when I asked her very personal and sensitive questions. She has an active religious life as a Catholic.
**Teresa Chang.** Teresa is a calm and quiet person and deeply religious. She is forty-six years old and has been married for eight years. She was married at the age of thirty-eight. She has a part-time job with teaching English and volunteers at a Catholic non-profit organization. She has not had a child, but expresses a strong religious belief that God will give her a baby one day.

**Anna Park.** Anna seems to be a very active and outgoing person. She is forty-five years old and has been married for twenty years. She has one child. Anna became a Catholic when she was in middle school, and her husband is a cradle Catholic. She said that because her husband was a very faithful Catholic when they were dating, she decided to marry him. She has participated in a small Bible study group run by one of non-profit organizations of the South Korean Catholic Church.

**Lina Han.** Lina was the oldest interviewee among the ten participants. She is fifty-eight years old and has been married for thirty-five years. She has three adult children and she used to be a working mom almost for fifteen years. The two oldest are already married. Her husband is a cradle Catholic, and Lina was baptized when she was in high school.

**Sae-Hwa Kim.** Sae-Hwa is forty-one years old and has been married for seventeen years. She has three teenager children and has served her mother-in-law with devotion. She confessed a conflict and uncomfortable relationship with her mother-in-law during the interview. She is a cradle Catholic and her husband and his family are also Catholics. I want to acknowledge that the interview with Sae-Hwa Kim was
heartbreaking and the hardest interview for me personally because of her painful stories and sad childhood.

I will describe her childhood briefly. She had been sexually abused by her biological brother for a long time when she was a teenager. She also experienced sexual harassment by male teens who lived in the same town with her. In addition, her father died when she was young and her old sister had a mysterious death when she was in her 20’s. She also had to bear the embarrassment of reports of sexual scandals involving her mother. After she became an adult, she had to undergo psychiatric treatment and has at times struggled with depression. Sometimes, she still reports suffering from painful childhood memories.\textsuperscript{27}

\textbf{Jae-Sun Lee.} Jae-Sun is forty-nine-years-old and has been married for fifteen years. She has two children. She took the vows of a nun and lived as a religious for eight years. After she left religious life, she was employed. Since she has been married, she has lived as a housewife. Her husband became a Catholic after he met Jae-Sun.

\textbf{Gi-Bi Hong.} Gi-Bi Hong is fifty-four-years-old and has been married for twenty-seven years. She is a housewife and has two adult children. She has done much work in her local parish. She met her husband at the Catholic Church. She was baptized at the age of twenty-five. After marriage, her husband wanted to keep studying, so she had to be responsible for making a living. She used to run a retail shop as well as take care of two children by herself because her husband was studying to become a lawyer and had no

\textsuperscript{27} It took strength and generosity for her to share her painful stories with me for my research. I would like to express my heartfelt thanks to her. As a researcher and learner, I could not give her any psychological counseling or advice, but I listened to her stories and expressed sympathy for her.
income. Therefore, she was faced with serious financial struggles when her children were toddlers. Thankfully, after her husband finished his study and was employed, they have been well-to-do financially.

**Haebaragi Kim.** Haebaragi Kim is an energetic and out-going person. She has volunteered at the Church for the community of laywomen. She is thirty-nine years old and has been married for eleven years. She was a housewife at the time of interview and has one child. She is a cradle Catholic, and her husband was baptized after marriage. Her family is quite active in their own parish life. They do volunteer work, Bible study classes and have a wide range of involvement in all kind of events at their Church.

**Ga-Eun Song.** Ga-Eun is thirty-five years old and she was my youngest interviewee. She has been married for four years. She has one toddler and is a working mom. Her mother has taken care of her son during her work. According to her, she has been able to keep her career because of her mother’s support and helping taking care of her son. She, her husband, and both sides of entire family members are cradle Catholics.

**Kyounghee Kim.** Kyounghee seemed to be a very religious and spiritual person. I interviewed at her house by her invitation. During the interview, she shared with me her mystical and spiritual experiences with Catholicism. She has spent most of her time at her local parish as a leader for a district bible study group. She said she received the gift of prophecy from God, so she has always been living with mutual communication with God spiritually. She is fifty-three years old and she has been married almost thirty years. She was baptized when she was in middle school, and her husband was baptized just before their nuptial mass. She has two adult children.
Relevant Themes

In this section, I will discuss five relevant themes that I asked and learned about through the ethnographic interviews and which are highly pertinent to my research project: 1) Failed NFP and Subsequent Abortions, 2) The Use and Reasons of Birth Control, 3) Perceptions on When Life Begins in relation to Abortion and Birth Control, 4) Purpose of Marital Sexual Intercourse, 5) The Catholic Teachings and the Religious Effect on Birth Control.

Theme 1: “Failed NFP and Subsequent Abortion.” Most my participants had experiences with NFP and there were similar struggles and needs among them. Seven out of ten interviewees (Lan, Lina, Jae-Sun, Anna, Sae-Hwa, Habaragi, and Ga-Eun) had used NFP in the past and all of the seven had unplanned pregnancies due to failed NFP in or around three years after marriage. Even though their first or second pregnancy was unplanned, because they were open to a new life at the beginning of marriage, they accepted the unexpected occurrence and delivered. However, after one or two unplanned pregnancies—some of which were brought to term and others were aborted—many of my interviewees stopped relying on NFP and adopted to the more effective methods of artificial birth control. Only Anna chose abstinence after one time unintended pregnancy. Anna said she has had sexual intercourse about once a year.

According to Lan’s experience, after the birth of her second child, she wanted to avoid any more pregnancies. Lan told me, “I think I started with birth control after that. I had my second child and thought my homework was finally done. Then, I asked my husband to have a vasectomy. But, he didn’t do it.” After she had the second child, they
used condoms and NFP for contraception. She tried NFP for religious reasons. She did not know until she had an interview with me that condoms were considered artificial contraception by the Catholic Church. I learned from my interviews that none of my interviewees had correct information regarding how the Catholic Church defines artificial contraception. Eight out of ten reported that condoms and *coitus interruptus* were not artificial contraceptives. I am not aware whether or not the other two participants knew about that. Through my interviews, I learned that even though my participants understand the condemnation of artificial contraception from the Catholic Church, they do not have correct information or knowledge of what artificial contraception is and what the Catholic Church define it.

One year after having the second baby, Lan became pregnant and had an abortion. She already had two children, a three year old and a one year old. She felt she couldn’t afford to have the third baby at that time, so she had an abortion in the first month of pregnancy. After the abortion, a few years later, she became pregnant again. It was also an unplanned pregnancy. Even though she did not want a child anymore and she thought she was too old to be pregnant, she decided to have the baby because of her religious beliefs.

Oh, well, I was 33 then. Even though I wanted to raise this one, I would be 40 years old by the time this child goes to school. So, I thought about an abortion, but I was then pretty active with *Legio Mariae* [Legion of Mary] activities and taking a lot of training . . . but, I started my marriage with my religious beliefs, so I thought about it so hard for many days. After thinking very hard, I still could not abandon my conscience. So, I made a decision to deliver . . . my husband didn’t like this child.\(^{28}\)

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\(^{28}\) In direct quotations, I use ellipsis ( . . . ) to contract sentences and omit statements that are not related to the theme. And, words in bracket [ ] refer to my addition for explanation.
According to her statement, she seemed to have a lot of inner conflict. She already had an abortion a few years prior, and when this subsequent accidental pregnancy occurred, it might have recalled her previous abortion to her mind.

Lan’s story tells me that she seems to feel guilt and a lot of internal conflict over what is in line with her faith, feeling guilt and regret of her previous abortion, listening to her conscience, a sense of morality, her practical situations, and the real burdens of having to make a decision to abort or to continue with a pregnancy. Therefore, regardless of an unplanned or planned pregnancy, having a child seems to be accompanied with a lot of practical burdens, conflicts, responsibilities, and sacrifice for some women.

It also merits emphasizing that this third childbirth was the result of failed NFP. After having the third baby, Lan again asked her husband to have a vasectomy and this time he complied with her request. After the vasectomy, she said that finally, she felt a freedom from worrying about an accidental pregnancy whenever she had sexual relations with her husband. To illustrate, regarding her use of NFP along with condoms before her husband’s vasectomy, she explained:

**Researcher:** How did you feel about it then, when the Church told you that only Natural Family Planning was allowed?

**Lan:** As a Catholic, I believed that I ought to follow it, but I always worried about it.

**Researcher:** Even though you always worried about it, what was the reason you still kept using it?

**Lan:** Well... I was a very naive and simple observant.

I think it is important to note that even though she worried about ineffectiveness of NFP, she thought she had to follow the Church teaching, and because of her attitude following
the Church teaching unconditionally at that time, she described herself like “naive and simple,” and it meant “obedient and ingenuous or pure” in South Korean context. From Lan’s story, I take the point that she very much struggled between her beliefs and her lived context when it came to making birth control decisions. She experienced the failure of NFP two times (having an abortion on the first accidental pregnancy and delivery on the second unplanned pregnancy), and subsequently she decided to use artificial contraception (condoms and later a vasectomy). For her, artificial contraception via the vasectomy was freeing – was the only option that gave her some peace and with which she was satisfied.

In regard to using an illicit birth control (in her case, a vasectomy) defined by the Catholic Church, she said as follows:

**Lan:** If so, we, [myself and my husband], would enjoy the pleasure by blocking it (God’s authority).

**Researcher:** What do you feel about that part [illicit artificial birth control]?

**Lan:** If that part is a sin, I shall pay the price of the sin.

**Researcher:** What do you think about artificial contraception?

**Lan:** Yes, I think . . . [with artificial contraception] I feel much freer with my personal life and our spousal relationship. I don’t have to be scared of getting pregnant . . . much freer . . . I have become a lot more free. I don’t feel scared of getting pregnant anymore.

**Researcher:** Can you tell me more about before and after your husband’s vasectomy?

**Lan:** In the past, I felt so nervous about it or had to avoid it . . . like I had to pretend I was tired . . . my face color would turn yellow when I didn’t have periods [due to] being afraid I might be pregnant, as to whether I might have to get another abortion in a larger scale . . . I was scared . . .
felt when undergoing with the vasectomy... thinking if it is a sin, then I would pay the price for the sin.

In fact, she expressed a greater feeling of guilt over having an abortion in the past due to the failure of NFP than using artificial contraception. She seems to view that artificial contraception is less sinful than abortion and she wants to be free from the fear of another accidental pregnancy. As stated above, after she had a second child, she asked her husband to have a vasectomy, but her husband did not want to do it at that time. After one time abortion and two accidental pregnancies, her husband had a vasectomy. According to what she said to me, before she experienced the failure of NFP and abortion, when she planned for finishing childbirth after having a second child, she asked her husband to have a vasectomy. In other words, before she experienced with an abortion and two unplanned pregnancies, she had already thought about artificial contraception for her birth control. It can be interpreted as she does not seem to view artificial contraception as a serious illicit act. When I brought up the subject matter of the morality of artificial contraception during the interview, even though she did not show her attitude against the Church’s condemnation of artificial contraception, she seemed to put more weight on her sexual intimacy and freedom from the fear of an unwanted pregnancy than the Church’s teaching. That was why she said “if that part is a sin, I shall pay the price of the sin.” In South Korean language and cultural context, it means that if God judges her due to the sinfulness of vasectomy in the sight of God, she would be ready to suffer the punishment from God or be purged of sin.

As one of the most serious and challenging stories regarding NFP, I will share Lina’s story. As soon as I asked Lina how she controlled birth after marriage, she
answered immediately: “it [birth control] was too difficult for me.” After she had three children, she had to have multiple abortions. I could not bring myself to ask her the total number of abortions, such as how often or how many years, because she looked very sad, pained, and uncomfortable with the subject. So, I chose to not go into the subject in depth. From what she did say, I gained the sense that due to financial difficulty, she could not afford to have another baby after having three children at that time (around thirty years ago).

Furthermore, even though she had multiple abortions, she never used any kind of artificial contraception with any regularity. Instead, she used only NFP for birth control after trying condoms a few times at the beginning of her marriage.

**Researcher:** Can I ask how many times have you used artificial contraception?

**Lina:** I think I used them a few times. My husband used condoms, but I felt really bad. As for me using condoms, I really didn’t feel for it. It was like, as if I had been with someone else. My husband pretty disliked it, so did I. “If we have to use it, let’s rather not do it,” I told him so and he accepted it. When I explained to him about the reason why I avoid (sexual intercourse), he just tolerated it, although it wasn’t easy for him, yes, he did.

**Researcher:** Can I ask the reason you avoided (intercourse)?

**Lina:** because of the fear of getting pregnant.

Thus, after trying condoms a few times, Lina stopped because she did not like it because she could not feel the union with her husband. In other words, she could not feel with a condom that she and her husband became one body during intercourse. In other words, she could not feel truly bodily union with her husband because of using condoms. Even after several abortions due to failed NFP, she kept using NFP and sometimes, she used
abstinence. She seemed to want to feel the sexual intimacy with her husband in a natural way. It means that if she uses an artificial way, a condom, she could not feel true union with her husband. However, ironically, keeping a natural way brought her several abortions.

Although we did not discuss the topic in depth, when we spoke about her experiences of abortion, she looked very pained emotionally. When she became pregnant unexpectedly yet again, she had an abortion without letting her husband know because, she said, she did not want to make her husband worry about that. So, she had to take care of it by herself.

Regarding her experience of having NFP failed numerous times, Lina commented:

I didn’t know how to practice it [Natural Family Planning] accurately. And then, I didn’t know how to avoid when my husband abruptly would demand sex then. Because if I hated or disliked him, or if I had any fights with him in our marriage, I might have done it because of those resenting feelings. But we did not live that way. So, if I avoid him, I thought he [her husband] might misunderstand that and felt it might hurt us tremendously. Therefore, I could not conceive the idea of not doing and avoiding it. I could not do it. After that, when I had a baby, I had to take all responsibilities. In fact, every time when I went to a mass . . . [sobbing and silence] this is a very painful part...so, there are parts that are quite not to be resolved, even each time I attend the Confession sacrament. Therefore, it is also hard for me to look at our children [silence] that’s that. I don’t think we have ever used any artificial methods, so now even at our age, we are most happy when we make love, even now.

**Researcher:** If you don’t mind, can I ask if you are in menopause?

**Lina:** Yes, I am. Even though I am in menopause, I feel more comfortable . . . Because of the menopause, I could become rather freer. However, we are now older, so we have sexual intercourse not many times a year. Yet, we feel much more comfortable and happier when we do it, so I feel like it is better to be in menopause.

Thus, according to Lina, she could not refuse her husband’s demand for sexual
intercourse whenever he wanted because she was afraid such a rejection would hurt him. She said that when her children were little, they had a hardship financially. She could not work due to caring of three children, and her husband was struggling with supporting his family because his position at work was not stable yet. Therefore, she seemed to be afraid of hurting her husband at home with rejecting sexual relationship. Perhaps, I guess because she could not help him financially at that time, she might try to support him mentally through sexual intimacy.

After her children grew, Lina worked and her husband was settled at work.29 Thus, their financial condition became better. However, I did not ask her when her last abortion was, and whether or not she had an abortion again after her financial situation got better. Because her experience of abortion was a very delicate topic, I decided not to go deeper into the topic because I wanted to be careful not cause her emotional discomfort by talking about this history. She just said that she did not use any artificial contraception until her menopause, and did not want to reject her husband’s demand. In addition, as mentioned above, she did not like using condoms because she could not feel that she and her husband became one body truly and fully. Therefore, she seemed to attach great importance to the relationship with her husband.

In regard to her feeling after abortion, even though Lina went to confession due to having had several abortions, she said, she still could not escape from the feeling of guilt. She still seems to carry a heavy burden and feel shame. Going to confession has not helped her let this guilt go or forgive herself. During the interview of the story of

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29 Even though I knew what kind of job her husband had at that time, I cannot note it here for the purposes of confidentiality.
abortion, Lina was crying and looked very pained. Through her story, I learn that for
Lina, an experience of abortion is sorrow and pain itself and it is hard to be healed even
with religious beliefs. In addition, for her, it is very hard to share with anybody.
Sometimes, some women who have an abortion have to deal with this pain alone.
Especially, in Lina’s case, she seems to carry all of burden and shame to herself to keep a
good relationship with her husband. She did not share the pain with her husband at all at
that time. Lina said that almost thirty years later, she let her husband know about her
abortions in the past. Even though she said that the first reason not to use artificial
contraception was due to her religious beliefs, in effect, she seemed to lay weight on
sexual intimacy with her husband more than her faith. Through Lina’s story, it seems to
be hard to keep the balance between the spousal union and controlling birth. Furthermore,
it seems to be unrealistic for some heterosexual married couples to be open to a new life
all the time during the sexual intercourse.

For my several interviewees including Lan and Lina, a fear of pregnancy limited
their sexual intimacy with spouses. Lina particularly seemed to prioritize her husband’s
sexual desire and the relationship with him. Moreover, similar to how Lan reported
feeling after her husband’s vasectomy, Lina expressed feeling freedom from the fear of
pregnancy after her menopause. In other words, both Lan and Lina could not find peace
with respect to sexual intimacy until after a permanent change causing infertility (either
vasectomy or menopause) had taken place that they could count on.

I asked Lina what if she could go back to the past, what she would do for the birth
control. She replied that “even if I go back now, I would not use the artificial ones, I
would rather work harder to do it in a natural way, more actively.” Lina meant that she would do her best to follow the right way of using NFP. It meant that she did not realize that NFP was imperfect. In her mind, it was not because of the flaw of NFP, but because of her wrong use or neglect. She puts so much blame on herself. In effect, since women’s cycles are not on a computerized schedule, there are natural variations. Due to the variations, NFP has a high rate of failure. Even though Lina struggled with unexpected pregnancies and several abortions over a long period of time, she did not want to use artificial contraception because she felt—still feels—that having sexual intimacy without any kind of barrier (condom or otherwise) is what is most important for her marital sexual relations. Even more, it seems that she believes that it is her duty as a wife to respect above all else both her husband’s sexual desire and the official teachings of her religious faith that do not allow for artificial contraception.

However, abortion is prohibited by the Church as an intrinsic evil and Lina also knows this fact. Although she said the first reason not to use artificial contraception was due to her religious reason, she seemed to prioritize the sexual intimacy and in spite of several abortions, she tried to manage the pain and sorrow from abortion alone without telling her husband and her family members. In other words, for Lina, artificial contraception or rejecting her husband’s demand might be more sinful or a greater ethical problem than having an abortion. Even after several abortions, she explained that she could not refuse her husband. After that, she failed birth control with NFP again and she became pregnant. Then, she went to a woman’s clinic alone to abort and she had to bear the weight of this decision alone and deal with all of pain and sorrow alone from having
an abortion. According to what she said to me, she seemed to interpret her experiences of multiple abortions and giving priority to her husband’s demand as she had to sacrifice herself for the peace of her family and for following her religious beliefs. Even after having multiple abortions, she still did not use more effective birth control methods or any artificial contraceptives until her menopause.

Jae-Sun also had an abortion due to the failed NFP. After having the first child, Jae-Sun used NFP, especially “the Billings Ovulation Method,” and condoms together for almost three years until she had a second child.\(^{30}\) At the beginning of the interview, she identified herself as a NFP user in the past. However, in the middle of the interview, I learned that she was not a true NFP user because she also used condoms during her fertile period instead of abstinence.\(^{31}\) She reported that she did not know that condoms were not allowed by the Catholic Church. In terms of the natural method, she said that “it [Billings Ovulation Method] worked well for my body and the church emphasized it and I felt OK, so I took it without feeling any worries or burden.” In other words, because her menstruation cycle was regular, the NFP worked well in her case. However, because she supplemented it with condoms, it was hard to be confirmed that NFP worked well for her.

However one day, two or three years after the second delivery, she found out her cervical mucus looked different, and she already had sexual intercourse that day. So, she

\(^{30}\) John James Billings, an Australian physician, discovered the Billings Ovulation Method with his wife, who was a pediatrician. The Billings Ovulation Method is “a natural family-planning technique in which a woman could monitor her own fertility by observing specific changes in her cervical mucus. The couple’s method, which Billings first began contemplating in the early 1950s, was believed to be more accurate than the traditional rhythm method and was sanctioned by the Roman Catholic Church, which granted Billings a papal knighthood in 1969,” accessed December 02, 2013, http://www.britannica.com/EBchecked/topic/1331696/John-James-Billings.

\(^{31}\) If she was a true NFP user, she should not have used condoms during the fertile period.
went to a doctor and took a “Morning after Pill” in forty-eight hours right after sexual intercourse because she was unsure about a possible pregnancy. According to her, because of financial reasons, she did not want a third child. Thus she used a Morning after Pill to avoid unplanned pregnancy. After the experience with a Morning after Pill, Jae-Sun and her husband stopped using NFP and they always used condoms to avoid any following accidental pregnancies. According to her, the primary reason for choosing to rely on NFP in the past was due to her religious beliefs.

In terms of her birth control after the experience of a Morning after Pill, Jae-Sun said:

Sometimes after taking the pill [morning after pill] I felt a sense of guilt . . . [I realized later] I was not wise . . . As such, I blamed myself, at the time. Thereafter, I still thought of taking oral pill [for birth control] after that, but I let it get by . . . [sometimes, I thought] I should have a surgery . . . In effect, I asked my husband to have a surgery. He disliked it. I also didn’t do anything about it [contraceptive surgery]. And then, I was seriously thinking about it [a contraceptive method]. Anyway, [whenever] I felt suspicious [of my cycle], and then we always used condoms.

In other words, she did not want to use other artificial contraceptives apart from condoms such as a vasectomy or tubal sterilization. In fact, she did not know in the past that a condom was an artificial contraceptive method and condemned by the Catholic Church. Therefore, she seemed to use a condom without any hesitation religiously. In addition, she had never felt guilty about using condoms because, she thought, a condom was only way to be able to use with NFP. In terms of using NFP along with condoms:

**Researcher**: Did you know then that the Catholic Church says you can’t use condoms, either?

32 Regarding the ethical controversy of the Morning After Pill and its function, see the Appendix F titled “Defining Terminology” in this dissertation.
**Jae-Sun:** I did not hear that so specifically. I think I just heard that in passing. But, in my mind, it [100% Natural method] doesn’t work, at all. I realized that it would be impossible . . . I thought that an absolute contraception through a 100% natural method is not possible. So, it was my belief that I absolutely should use condoms and I did it without thinking twice about it.

It is important to underscore that Jae-Sun was not only interviewee who had the wrong information regarding a natural birth control method. Most my interviewees believed that using a condom or *coitus interruptus* during the fertile period temporarily was still a natural method and it was legitimate ethically in the teaching of the Catholic Church. In other words, they tried to avoid sexual intercourse during the fertile period, but when the avoidance was not easy, they used condoms or *coitus interruptus* temporarily. The Catholic Church condemns “*coitus interruptus*” as an illegitimate birth control method with other artificial birth control methods.³³ Therefore, given what Jae-Sun expressed, it makes me wonder how many other South Korean people including lay Catholics might have wrong information or knowledge regarding what is a true natural birth control method, namely, NFP. Accordingly, the respondents in quantitative survey data who identified themselves as a NFP user might include condoms or *coitus interruptus* users who used those methods during the fertile period.

Like Lina, after menopause, Jae-Sun felt free from fear and concern of pregnancy. Regarding sexual relations after menopause, she said that “I feel free, though, my body is

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³³ Regarding unlawful birth control methods, according to *Humanae vitae* no.14, “Equally to be condemned, as the magisterium of the Church has affirmed on many occasions, is direct sterilization, whether of the man or of the woman, whether permanent or temporary. Similarly excluded is any action which either before, at the moment of, or after sexual intercourse, is specifically intended to prevent procreation—whether as an end or as a means.” The Catholic Church defines *coitus interruptus* as an unlawful birth control method because it would be seen as separating the unitive and procreative meanings of sexual intercourse within the act itself.
having a hard time. And then, when it [menstruation] was cut, it really hurts. Whenever I have sex, I am scared because it hurts, so I don’t do that often.” In effect, the fear of unplanned pregnancy limited eight out of ten my participants’ sexual intimacy with their husbands. Regarding the two participants who did not report the difficulty of birth control, one (Teresa) was infertile and the other (Gi-Bi) had a tubal sterilization after having a second child, in three years after marriage. Thus, it seemed to be very challenging for the eight participants be to open to a new life all the time and so instead many have chosen to limit significantly the timing and amount of their sexual relations. In addition, because of the reasons, seven out of eight used artificial contraception, and one out of the eight chose abstinence.

Kyounghee has also had experience with abortion due to the failed NFP. When she was married, Kyounghee wanted to have one or two children because of the societal atmosphere with population control policy at 1970s. Most people were encouraged to have one child by the South Korean government at that time. She said that if her first child was a boy, she might not have had a second child. However, her first one was a girl, so she had a second child. Then, because the second one was a boy, she terminated a pregnancy. She said if the second pregnancy had also been a daughter, she might have aborted it (and possibly others) until she was pregnant with a male. Back then, there was the flood tide of a notion of preferring a son to a daughter in South Korea. Still, today, many South Korean people prefer a son to a daughter, especially among the older generation.34

34 See table 5 in Chapter Three of this dissertation. According to table 5, due to female fetus, 1.3 percent of the South Korean married women aged 15-44 nationwide had an abortion. In the case of Catholics, see
Regarding their choice of birth control methods after having two children, she and her husband have used *coitus interruptus* for almost twenty five years. Like most interviewees, she thought *coitus interruptus* was a natural way. However, after having two children, she acknowledged having had an abortion two times due to accidental pregnancies: “I aborted about two babies. I am not sure if I aborted them by taking pills, though. I was told that there were pills for the abortion, so I took them at a pharmacy store, I don’t know what happened to that. I aborted one. [For the next pregnancy] I went to a clinic and had an abortion.”

At that time (1970s), her doctor recommended that Kyounghee get a tubal sterilization due to the societal atmosphere with population control policy. But, she did not want to do it. In addition, her husband did not want a vasectomy either. Also, she tried to use condoms, but she felt pain with using them. So, she and her husband have used *coitus interruptus* for controlling birth thus far. In other words, even though she had abortions two times, she did not change her birth control method, and she has used *coitus interruptus* so far. However, unlike Lan, Lina, and Jae-Sun, for Kyounghee, religious teaching or her faith did not affect her choosing birth control method.

In Sae-Hwa’s case, she went to a clinic to abort an unwanted pregnancy, but she changed her mind as soon as arriving there. According to her, she had not used contraception until she had two children after marriage. After having the second child, she used NFP, but she got pregnant due to failing NFP. She was advised to have an abortion by her family, especially her mother and mother–in-law. Her husband was not

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chart 4 in Chapter Three of this dissertation. 2.9 percent of the Catholic respondents had an abortion because the fetus was a girl, and they wanted to have a boy.
glad with the third pregnancy. Nevertheless, she could not have an abortion. In fact, she went to a clinic alone, and she was going to have an abortion, but she said, she just returned home. Sae- Hwa said she could not do it:

My mother-in-law had three sons and told me that she give birth to the third one while hesitating about it. She told me she had several abortions. My mom also spoke to other people all over the places that she also had several abortions. My mom also was against the third one. I went to a clinic because of all the other people’s reactions around me, but I absolutely could not do it. So, I just came back.

In summary, because of strong family pressure to have an abortion, she was going to do it. However, she could not bring herself to do it and so delivered a third baby. After having a third child, her husband got a vasectomy, and due to her uterine disease, Sae-Hwa had to have a hysterectomy.

After failing NFP, unlike other interviewees, Anna chose abstinence for birth control. In effect, she wanted to have a baby one year after marriage. However, due to failed NFP, she got pregnant as soon as she got married. She expressed that she was embarrassed with an unplanned pregnancy.

**Researcher:** Did you use contraception after marriage?

**Anna:** Oh well, I thought about it, like calculating ovulation days . . . I calculated them and believed that we had sex only on the days that did not fall into those, but that didn't work.

**Researcher:** Were you practicing Natural Family Planning then?

**Anna:** Right and you know quite frankly if you live with your parents- in-laws, you don't have much freedom . . . within a month after we came back from our honeymoon, we only had sex once or twice, and those were the days that didn't fall into those ones through our calculation . . . but I got pregnant . . . in the following month . . . so we both were surprised . . . Rather than feeling happy about it, we felt weird about it. I had no idea, no plan at that sudden pregnancy . . .
**Researcher:** Can I ask what was the primary reason for practicing Natural Family Planning? What was the reason for not using other contraceptive methods?

**Anna:** I knew there were pills you could take. But I had never bought them before. [Regarding using NFP] I think I did it in my own way because of my religious beliefs. And when we were taking the training [the marriage preparation course in the Catholic Church] for that, we also exercised that, I think . . . That’s why we didn’t use condoms and [rather] calculated those days in our own [checking ovulation] because of our religious beliefs.

In other words, Anna had an unexpected pregnancy due to the failure of NFP, and her experience of that failure affected her sexual life negatively such as choosing almost complete abstinence as birth control. According to what she said to me, she has had sexual relationship with her husband about once a year.

In the cases of Ga-Eun and Habaragi, they had one child at the time of the interview and both of them delivered due to unplanned pregnancy with NFP. However, even though they did not have a plan for a second child, they were not desperate for birth control and they were open to another unplanned pregnancy. Unlike other participants who could not afford to have another kid and worried about childcare, they did not seem to be as desperate as other participants. In effect, they are in their 30s and younger than others.

In Ga-Eun’s case, she works and her mother is taking care of her son. Even though she expressed a burden of childcare support expenses, she had two incomes from her and her husband. Thus, she seems to have better situations than other participants. In Habaragi’s case, she was a full time mother and her son was eleven years old at the time of interview. Even though I did not ask her about the amount of her husband’s income,
she reported regarding her family income level as a middle class. Thus, Habaragi does not seem to worry about childcare and childcare support expenses. Therefore, Ga-Eun and Habaragi do not seem to be desperate for birth control in comparison with other participants. In other words, even though Ga-Eun and Habaragi experienced with failed NFP, they did not change the method to more effective one such as artificial methods. They still used NFP or *coitus interruptus* at the time of the interview.

In comparison to other interviewees, while they expressed their frustration and struggles with birth control, especially NFP, Ga-Eun and Habaragi seemed to be open to another unplanned/unexpected pregnancy. Therefore, I learn that according to people’s practical experiences and contexts, for someone birth control can be a desperate, frustrated, and painful issue, while for other it cannot be like that.

**Theme 2: “The Present Use and Reasons of Birth Control.”** In regard to their preferred/currently used method for birth control, most of them decided which to use by considering their practical situations more than making decisions based in religious reasons. Most participants have used birth control such as NFP (Ga-Eun), vasectomy (Lan and Sa-Hwa’s husbands), tubal sterilization (Gi-Bi), *coitus interruptus* (Ga-Eun, Habaragi, and Kyounghee), and abstinence (Anna). Sae-Hwa had a surgery (hysterectomy), two of ten, Lina and Jae-Sun are in menopause, and one participant (Teresa) is infertile. In the case of using condoms, which is the most popular contraceptive in South Korea, Lan, Lina, Jae-Sun, and Ga-Eun used to use condoms, but not anymore.
In regard to the reasons for wanting/need for birth control (either NFP or one of the artificial means), there were various reasons such as societal influence for population control, economic reasons, woman’s career, and lack of family support for childcare. In fact, nine out of ten interviewees were full-time housewives (six out of ten used to work), and only one, Ga-Eun was a working mom at the time of interview. Thus, only Ga-Eun considered her career for her birth control as a working mom, and the most common reason for birth control among my participants was financial burdens. Even though six out of ten (one was infertile) used to work, after having a child, they quit their job for childcare. In Lina’s case, after her children grew up, she started to work. When she had the interview with me, she was retired.

In regard to the choice of contraception, after they had a certain number of children or terminated a pregnancy, they changed to more effective contraceptives as from a natural method to an artificial method. In this second theme, as mentioned above, because the most common reason for birth control among my participants was financial burdens, I will explore, in particular, the relationship between economic constraints/pressure and the need/desire for reliable birth control. Only Ga-Eun, who was a working mom, worried about her career as well as childcare support expenses in relation to birth control.

According to Lan’s story, after having two children, when she became pregnant again, she had to have an abortion because, she said, she could not afford to have three children at that time. After the first abortion, however, she became pregnant again accidently in a few years due to another failed NFP. When the second unplanned
pregnancy occurred, she delivered because her financial situation was better than before. After having a third child, her husband had a vasectomy. She expressed her satisfaction of the vasectomy because she did not have to worry about unwanted pregnancy. Therefore, in her case, I take the point that a financial situation seemed to affect her decisions with respect to birth control.

Lina was one of the interviewees who had been struggling with birth control until she was in menopause. Even though she experienced numerous failures of NFP and abortion due to the failure, she did not use any artificial contraceptives except using condoms a few times at the beginning of marriage. According to her, she could not afford to have a child after having three children, so she said that she had to abort at that time.

Like Lina and Lan, Jae-Sun also had an abortion due to economic constraints after having two children. According to Jae-Sun, because she had to take care of two children, and especially, her son was sick very often when he was little, she could not work. Thus, she and her family had to survive with only income from her husband. Therefore, they could not afford to have the third child. Lina and Jae-Sun were in menopause at the time of the interview. But, both of them informed me of a pain during sexual intercourse after menopause. Thus, even though they felt free from the fear of accidental pregnancy, they could not enjoy their sexual lives due to the pain.

According to Gi-Bi, she did not use any contraception until she had a second baby. After having the second son, she had been encouraged to get a tubal sterilization by one of the Government organizations charged with population control policy in South Korea in 1970s. Namely, in her case, the South Korean population control policy affected her
birth control at that time. Thus, she got the free surgery at a public health care center with financial assistance from the Government. In fact, when she was pregnant with her second child, she was going to abort due to financial struggle. However, she confessed that she could not even afford to have an abortion at that time. She wished she had miscarried to save money:

I thought a lot about it [abortion]. At the time, my husband did not make any money. If we had some money at the time, we might go through an abortion. But we didn’t have money then, so we didn’t. So, I was thinking a lot about miscarriage. I really wished I would have a miscarriage. There were no day care places or any nursery centers back then.

In other words, due to the financial struggle, Gi-Bi did not want to have any more children after having two, and she accepted a free permanent sterilization operation offered by the government in 1970s. Her story tells us that she prioritized her financial concern for choosing birth control.

According to Ga-Eun’s experience, among the interviewees only she was a working mom and was using NFP with *coitus interruptus* at the time of the interview. According to her, nevertheless of her statement of a financial burden for childcare support expenses, because she had one child and she was still in the middle of her 30s, even though she did not have a plan for a second child, she seemed to be open to a possibility of unexpected pregnancy. In other words, she was not desperate for birth control. In spite of the unplanned delivery of her first child due to the failure of NFP, she did not use artificial contraceptives as more effective contraceptives than NFP because she was open to another possible accidental pregnancy.
Furthermore, with regard to the motivation of choosing NFP for birth control
instead of another method, similar to Lina, according to Ga-Eun, her husband did not like
to use a condom, and she worried about the side-effects of oral pills for herself. However,
unlike Lina she did not consider her religion’s views on birth control, and she just would
like to choose less artificial ways for her physical health. Even though she got pregnant
unexpectedly due to failing NFP, she was open to a new life at the time of her first
pregnancy because it would be her very first baby after marriage. Therefore, for her, the
accidental pregnancy seemed to be acceptable.

In addition, even though she identified herself as a NFP user, they used *coitus
interruptus* when she was in fertile days. Also, like other interviewees, as mentioned
before, she did not know that the Catholic Church disagrees with using *coitus interruptus*.
She looked very surprised after she heard the fact from me during the interview. Even
though she took the marriage preparation course before a nuptial mass, she did not seem
to get a right knowledge of birth control. According to her, she could remember only how
to use NFP from the course. As pointed out in the previous chapter, today the marriage
preparation course in the South Korean Catholic Church, seems to focus on general
Catholic doctrines and instruction of NFP rather than practical teachings or detailed
information aimed closely at the real life reproductive challenges of Catholic married
couples.

On the question of birth control after having the first baby, Ga-Eun said that “as a
matter of fact, I am more careful about that now, since I made a mistake once . . .
Nowadays, only on those days that I am for sure about . . . such as within three days after
a period.” In other words, due to the fear of unplanned pregnancy, their sexual lives were limited. It means that they have possible days to have a sexual relationship only three days a month.

Regarding the reason why she did not want a second delivery, she said:

We thought we would rather raise one child well. The most crucial reason was that if I have my second one, I will have to quit my company and there will be some financial impact, that financial impact will impact our baby... Because of that when you raise a child, you sometimes end up confronting your child with some emotions, and I felt so guilty about it. So, if I had my second one, I didn’t want to have to do the same thing again. Plus, I will have to save my energy without spending it, for a new baby... because of a burden of raising another baby [if I give birth to my second one]. You know being a parent is not simply feeding them... there are a burden of responsibilities in terms of the role of morality and being a role model as parents.

In other words, having another child would be a big challenge for Ga-Eun due to financial burdens and her career.

Seven out of ten interviewees (Lan, Anna, Lina, Sae-hwa, Jae-sun, Gi-Bi, and Ga-Eun) used birth control for economic reasons. In regard to the reason of birth control, according to the quantitative data in the previous chapter, one of the reasons of birth control or abortion for married couples in South Korea today is that they do not want to have a baby due to a heavy financial burden of bringing up children. In addition, 13.5 percent of South Korean Catholic respondents answered the reasons for an abortion as financial difficulty and it was third behind unplanned pregnancy.35 Also, 18.3 percent of general respondents and 18.0 percent of Catholics sought abortions due to financial

difficulties. As a South Korean woman, I can confidently say that South Korean parents have education-first mentality and they have very strong educational fervor. In effect, they spend a lot of money for their children’s private tutoring. I think that these costs may limit the financial resources available for having a second or third child. For example, South Korean parents “spend 195, 000 won ($170) on average per month on private English education for each of their children” and it means that if they have two children, they would spend $340 for private English tutoring per month. In addition, after school, most South Korean students who are from elementary to high school (even among low income families) have at least one or two private tutoring at private cram schools such as English, mathematics, Korean literature, sports, music, or art. This fact is well-known in South Korean society today and “soaring household spending on private tutoring has become a headache for parents from the working class, making it difficult for them to lead normal lives.”

Furthermore, it is hard to find a public education program with low-cost offered by a city or government for after school programs. Most kids have to depend on a private institute or tutoring. In addition, even though since 2005, the South Korean Government has provided financial incentives to encourage childbirth and the education of children

36 See Chapter Three in this dissertation, 204.


38 Ibid.
such as sending a monthly check to cover child support expenses, education expenses, childbirth costs, one-time congratulatory money for childbirth, and financial discount for a pre-school and kindergarten programs, the government programs have started recently and the eligibility is limited to parents who delivered after 2005. In other words, the issue of childbirth and education of children is still one of challenging issues to South Korean parents for their domestic economy including my ten interviewees. Most my interviewees were in their 40s-50s (only two participants were in their 30s), and when they delivered and raised their children in 1970s-90s, they did not have any benefits or support from a city or the government for child caring or education. Therefore, many South Korean parents including my interviewees felt financial burdens regarding fertility issue and education of children, and that kind of societal atmosphere seemed to affect low birthrate in South Korea today.

In conclusion, most of my interviewees were using contraception such as condoms, vasectomy, tubal sterilization, *coitus interruptus*, and NFP. Only Lina had used NFP without any secondary contraceptives, but ironically she had the most abortions among all of the interviewees, more than two times. Most of NFP users used secondary contraceptives such as condoms or *coitus interruptus*. In addition, seven out of the ten interviewees experienced the failure of NFP. And the failures caused unplanned or unwanted childbirths or abortions. Four out of ten had an abortion, and two out of the four had an abortion more than one time. After they experienced the failure of NFP, most of them decided to use artificial contraception such as semi-permanent (vasectomy), or temporary way (condom or *coitus interruptus*). One out of ten, Anna has had abstinence
to prevent conception because of a fear of pregnancy after experiencing an unplanned pregnancy due to a failure of NFP. In other words, most my interviewees (except one who was infertile) needed birth control, and many interviewees experienced a failure of NFP. After failing, they had used artificial contraception or coitus interruptus, which was defined in the Catholic Church as unlawful birth control. It tells us that birth control seems to be necessary in marital sexual lives, and if it does, effective birth control method should be used to prevent unplanned or unwanted pregnancy, and further to prevent having an abortion.

Therefore, I assume that if a woman follows the Church teaching for birth control—use only NFP without any secondary contraceptives and no abortion, then due to a high rate of failure of NFP, she would be pregnant accidently often, and would have to deliver many children and spend a lot of time, energy, and cost to bring up them, and it would be terminated after her menopause, in her 50s or 60s. If she does not want to deliver, she would have to have multiple abortions like Lina. I think that this is the reality of the issue of birth control in our lived experiences.

Most of the interviewees (7 out of 10) tried to use NFP in the beginning of marriage, but after unplanned or unwanted pregnancies, they changed their birth control approach to artificial methods (specifically to condoms, coitus interruptus, vasectomy and tubal sterilization). Many participants said they were affected by religion for choosing NFP in the first place, however, after their experience of failure, they felt that they had to opt for an artificial method.
These stories from my interviewees suggest that even though they tried to follow the Church’s teaching in their actual lives, eventually they had to negotiate with the realities of their economic situations, career, and family support for caring a baby. Ga-Eun and Habaragi were open to a possibility of another unplanned pregnancy because they had only one child and their practical situations such as age, childcare support, and economic reasons were not desperate for controlling birth. In effect, they did not want another child, but they seemed to be open to a new life potentially, and due to the openness, they were still using NFP (with secondary contraceptives like *coitus interruptus*) with expecting its possibility of failing.

In short, Lina and Jae-Sun expressed their freedom from a fear of pregnancy after menopause, and Lan and Sae-Hwa were satisfied with their husband’s vasectomies. Anna, who has opted for abstinence, reported that she was looking forward to having menopause for a freer sexual life. Ga-Eun (who is still in her 30s and using NFP) has been still struggling with monitoring and calculating her menstrual cycle and avoiding and dealing with a fear of pregnancy. Consequently, nobody (except Teresa who was infertile) was free from the fear of pregnancy and nobody could enjoy their sexual lives fully with Natural Family Planning. Even after menopause, due to pain during intercourse or health problems or weak sexual desire, they could not enjoy their sexual relationships with their spouse. In other words, the official Church teaching on contraception, which insists on only NFP as a lawful birth control, did not respond to my interviewees’ practical situations, experiences, struggles, and needs.
Theme 3: “Perceptions on When Life Begins in Relation to Abortion and Birth Control.” For my own learning, I asked my interviewees about this topic. In fact, before interview, I wondered how my interviewees thought about the issue of when life begins because it was a controversial ethical subject matter among Catholic theologians and ethicists in relation to the issue of birth control and Catholic sexual ethics. Also, I wondered how people’s religious beliefs affected their practices in their lived contexts.

For instance, there are two opposite positions in the abortion debate - pro-life and pro-choice, and the Catholic Church is pro-life. In effect, some artificial contraceptives (the IUD and the Morning After Pill) are abortifacient because they have a possibility of preventing transport of a conceptus (the product of conception) and/or implantation of a conceptus in a woman’s uterus after fertilization. Thus, before conducting an interview, I wondered if I had an interviewee who had an experience of abortion, what her perspective, position, or religious beliefs would be or whether or not the Catholic Church’s pro-life position affected the decision. In addition, I wondered my participants’ thoughts and opinions about abortifacient contraceptives, whether or not they had information or knowledge about them, and how their views and religious beliefs worked on their practical/final decisions. Therefore, I asked them a question as “when do you think life begins?” and through the interview, I learn that there is a gap between their perspectives/religious beliefs and their practical decisions in their real lives.

Most of interviewees (9 out of 10) viewed a new life as beginning at the moment of conception. In effect, four out of ten had an abortion and one of the four had an abortifacient contraceptive, Morning After Pill. Only Teresa who was infertile stated that
life begins at the moment of implantation according to her personal experience with infertility.

**Researcher**: When, do you think, a new life begins?

**Teresa**: I think it is the moment of implantation, because I was told implantation was hard in my case. I don’t know whether the conception happened or not [in my body], but I was told that implantation could not happen since my uterus was frail and aged . . . since I have heard that kind of story many times . . . wow . . . and when implantation happens I thought it is a new life! . . . One thing that is odd is that I didn’t know when I didn’t know, but once I started sterilization treatments and know it . . . you know I am each time when I have my periods . . . thinking as to whether or not my baby might end up coming out . . . my baby . . . these kinds of things, I feel too sad and lonely . . . the thing is, it is a thing that I only know myself and can’t share with anyone else . . . not even my husband.

**Teresa**: I . . . ah . . . this is the very first time I have talked about this . . . no one even discussed that with me. I felt utterly lonely.

One of the reasons of her infertility was the failure of implantation even after conception. In her understanding, if a life begins at the moment of conception, when the embryo fails to implant, she might be grieving at being unable to carry a pregnancy to term. According to what she said to me, whenever her menstruation started, she was disappointed and grieving because she had to learn that her baby died in her belly. In other words, she used to believe that a life begins at the moment of conception, but due to her several experiences of failing implantation after conception, she got the new perspective on life as life beginning at the moment of implantation. During the interview, she looked like she emphasized her perspective on life in order to defend her situation. In addition, at the same time, she expressed her sorrow, struggle, and her longing for a baby.
In conclusion, nobody agreed with the pro-choice position. Even though seven out of ten were using illicit birth control methods, four out of ten had an abortion, and even two out of the four had an abortion more than one time, most of my interviewees voiced general support for the pro-life position as life begins at the moment of conception in line with their faith. In the four participants (who had an abortion)’s case, their beliefs of pro-life might make them feel guiltier because they had to break their religious beliefs in their practical lives. Therefore, I learn that there is a gap between agreement with the Church teaching and carrying the teaching into a real life.

Because none of my interviewees had right information of abortifacient contraceptives, during the interview, I offered them information of abortifacient, interceptive, or contragestive methods (the IUDs and the Morning After Pill). In effect, Jae-Sun took the Morning After Pill to abort at a woman’s clinic, but I was aware that she did not have accurate/correct information regarding the pill – how the pill works in her body. She reported that she knew she took an abortion pill at the clinic.

After offering information, I asked their opinions about the morality of the abortifacient contraceptives, and they expressed their disagreements with them. Among my participants, only one participant had an experience of the Moring After Pill, and none of them used the IUDs.

As mentioned above, since the question of when life begins was controversial among Catholic theologians and ethicists, before interviewing I expected various viewpoints and furthermore, I anticipated that people who had an experience with an abortion would support the pro-choice position. However, even though they had an
abortion, they still supported the anti-abortion position and they showed regrets and
shame about having an abortion in the past. In addition, they seemed to blame
themselves.

Regardless of their practical experiences in real life, they supported the Church
teaching - life begins at the moment of conception. Therefore, I argue that due to the
idealistic teaching, many Catholics who cannot follow the teaching in their practical lives
have to live with feeling regret, guilty, and pain.

Theme 4: “The Purpose of Sexual Intercourse.” According to the Church
teaching, the conjugal act has two meanings and purposes - the unitive and procreative-
and they are equal and should be always opened to each other. However, after a certain
period of time, some married couples terminate a pregnancy or they do not want to have a
child due to various reasons. Nevertheless, in effect, they still have a sexual relationship
without opening to or purposing procreation. My interviewees are no exception.

According to the Church teaching, birth control itself is not illicit, but the method
should be always natural - only NFP is a licit. However, through my interviews, I learn
that NFP has a high rate of failure, and due to its imperfection, many of them (seven out
of ten) had unplanned pregnancies in or around three years after marriage. After
experiencing a failure, they changed the method to more effective one like one of
artificial contraceptives. Therefore, for a married couple, the purpose for sexual
intercourse can have two meanings at the same time for a certain period time, but after a
while, procreation is not the purpose of the conjugal act any more permanently or for
some particular period of time. Rather, a heterosexual married couple seems to look forward to being away from the burden of procreation.

In this fourth theme, I explore how the two purposes of the conjugal act work practically in my participants’ lived experiences, what is the primary purpose of the conjugal act, and how birth control affects their sexual intercourse. In effect, most interviewees had different views about the meaning and purpose of sexual relationships. Some stressed the core of that relationship as bodily communication and self-giving while others viewed it as a spousal duty. For someone it was a stress reliever and for others it was primarily a mode of bringing on new life. In addition, everybody had a different context and situation related to this theme.

Through the interview with Lan, I was made aware that she and her husband enjoy their sexual lives truly and they have healthy and positive marital sexuality. Lan described the meaning of sexual relations with her husband as follows:

I married believing my husband liked me incredibly. Our communication has not been good. I have lived for my man, a man-centered life style, a male-dominant setting . . . but when it comes to two of us, husband and wife, he works hard to please me so lovely then I feel he puts a lot effort . . . to fulfill the satisfaction of my body . . . yes, he works really hard. He doesn’t come first, after I, the woman, feel it first, he then follows . . . here the number priority is me. So, even though he has a bad manner [in his daily life], everything is forgiven then. . .

In other words, Lan can feel the strong union with her husband through sexual intercourse. According to her, in the age of 20s and 30s, Lan and her husband used to have sex every single day, so sometimes she felt back pain due to the frequent sexual intercourse. After turning 50s, they have still enjoyed having intercourse two or three times a month. According to her, her husband has gotten energy in daily life through the
sexual intercourse with his wife. Regarding the procreative meaning of the relationship, after her husband had a vasectomy, rather, they could have sexual intimacy fully without the fear of unwanted pregnancy. Therefore, for Lan and her husband, the primary function of conjugal act was for their sexual intimacy and getting energy for their everyday lives.

In Teresa’s case, due to her infertility, her primary purpose of sexual intercourse is having a baby. However, because her husband did not want to have a baby, she expressed frustration in the relationship with her husband. She said:

Even now . . . what I find funny is . . . I still want to meet ovulation days. if possible . . . yet I feel really sorry that he [my husband] avoids those ovulation days. He doesn’t know even if by any chance . . . he is not interested. My husband is not interested in the ovulation days, at all. Even I keep saying that I am in ovulation and requests to remember of those days have been of no use until now. So, I really, really feel so bad. I believe these kinds of thing even make me lonelier every month. When it comes to the time . . . I think . . . we have a different understanding about sex, even between us.

In other words, while procreation is the primary goal for sexual intercourse to Teresa, sexual intimacy is the primary goal to her husband. She expressed frustration in the relationship with her husband. Thus, I learn that the meaning of the conjugal act can be different between spouses, and due to the different purpose, a couple can have a struggle and conflict.

As mentioned above, due to the fear of pregnancy, Anna has been abstinent for a long time. She articulated her opinion regarding the conjugal act itself as a bodily communication between the spouses. In her case, due to the lack of a sexual relationship with her husband, she said she felt sometimes the lack of intimacy with her husband and
a difficulty for mutual conversation as a married couple. However, because they have spent a lot of time at the Church volunteering and with bible study together, she said, they have lived well spiritually and the religious life has helped their spousal relationship positively even for the sexless relationship.

**Anna:** Words like intimacy or love, we say such things a lot. Of course, they are all right words. By the way, what do you call that stuff, a conversation things like that? . . . I think it was called a bodily conversation. I can understand and share the same feeling about it. But we can’t do that kind of stuff anyway . . . If so, do we have a sufficient conversation, honestly that is not the case, either, right? I feel confused . . . to whether people in general live harmoniously or one spouse is usually a lack of something . . . or if they might have an internal wound personally. It concerns me, though . . . Come to think of it . . . I think it affects us. Of course, it is not like we feel uncomfortable about each other something like that . . . Anyway, it is just I feel like we communicate less.

**Researcher:** Can I ask the reason? Could it be related to the sexual relationship?

**Anna:** Right . . . as it [sexual intercourse] is absent, although it doesn’t look like it on the outside, we have some sort of an individual wound to a certain degree, I . . . feel that way . . . don’t you think so? Even if we have a strong self-esteem, nonetheless you feel depressed, stuff like that . . . there are times like that I have wondered whether that kind of thing comes from the abstinence of it [sexual intercourse] . . . anyway, I have thought about it from a standpoint as a married person.

Thus, from Anna, I learned that the fear of pregnancy limited not only their sexual intimacy, but also communication between spouses in their everyday lives. According to her, she and her husband were active Catholics and they spent a lot of time and energy at Church during the week as well as weekends such as volunteering, participation in a small group, a social meeting with the Church members, and a bible study. Anna’s story tells me that she and her husband seemed to try to overcome their spousal conflicts due to
sexless relationship and less communication/intimacy through other ways and means such as religious activities in their Church.

Jae-Sun viewed the conjugal act as a true self-giving between a husband and a wife, which the Catholic Church is teaching today. In fact, since Jae-Sun started the online Bible study, she said she had a new vision of the meaning of sexual intercourse with her husband. Before she took the study, she used to think about having sex such as what a wife has to offer when a husband asks, physical pleasure, or for procreation. After the Bible study, she changed her view on the conjugal act. She said:

At first, I didn't know about it, but as years went by, I felt closer to him and wanted to love him more. And the feeling of being loved! In the beginning of our marriage, I felt cumbersome about it and did it because my husband wanted. But as time has gone by, sometimes I have felt grateful and thankful through our sex . . . and at times when I felt the pleasure through the pure sexual act itself, and then I feel that I can get this feeling thanks to him, and that he truly put so much effort for me. I also try to care about his needs . . . And then, while talking about our orgasms, exchanging our thoughts about it and giving in for each other, I thank him. I have felt it a lot more and more, as we have gone through the time.

When I interviewed Jae-Sun, she was in menopause and she reported freedom from the fear of pregnancy when she had sexual relationship after menopause. Like other interviewees, she had been struggling with the fear of pregnancy, and practically, she experienced abortion due to the failure of NFP. After menopause and through the bible study, she seemed to have a new vision of the conjugal act in marriage. However, as mentioned before, physical problem like a vaginal pain limited her sexual life after menopause. Therefore, I learn that before menopause, a heterosexual woman has to struggle with mental and emotional stress like a fear of pregnancy, and after menopause,
she has to struggle with physical stress like a vaginal pain. Jae-Sun and Lina who were in menopause did not know about a remedy to resolve the vaginal dryness. Their lack of knowledge of sexual intercourse tells us that as mentioned in Chapter three, sex education in South Korea as well as the marriage preparation course in the Catholic Church does not appear to be working effectively.

Gi-Bi and Kyounghee had negative views on the conjugal act such as spousal duty. Namely, whenever their husbands wanted to have a sexual relationship, they had to do it without considering their own feeling or conditions physically and emotionally. Gi-Bi described that when she was in the age of 30s, she was struggling with avoiding sexual intercourse because she was always tired due to raising two children and working at the same time. Because of that, she had a conflict with her husband all the time. After she turned forty years old, whenever she had sexual intercourse, she felt a vaginal pain. On the question of the meaning of sexual intercourse, Gi-Bi stated:

I didn’t give any meaning to our sex. I thought I was simply offering my body . . . simply in order to live together. I hated it so much, that I even thought about a divorce. We had argued often and we didn’t get along . . . I think it hurt my husband a lot. I think he thought he was refused because I didn’t like him. In the beginning, he didn’t make any money, so I think we had a lot of arguments related to his pride. And now, we don’t have any things to argue about, and I win . . . At the time, I didn’t think I did sex because I loved him. So it was difficult. I did it because I had to live together . . . Not living with him was not an option . . . I remember that I did it regarding it as my sacrifice, since otherwise [He] get very upset. Now, I feel more relaxed and rather I sometimes feel like I want to do it. But my husband doesn’t feel that way any longer . . . On the other hand, now there are times when rather I feel like, I want to do it.

For Gi-Bi, sexual intercourse with her husband was a spousal duty, not an expression of their intimacy. She expressed it like “offering her body.” In fact, Gi-Bi had a tubal
sterilization after having two children, and she reported she has been suffering with a side
effect of the contraceptive surgery such as a backache. Even though she did not have to
worry about an unplanned pregnancy like other interviewees, due to her physical limit,
exhaustion from work and childcare, and a mental stress due to economic struggle, for
Gi-Bi sexual intercourse seemed to be one of the big challenges in her marital life.

Kyounghee also had a negative view on sexual intercourse with her husband. Regarding the question about sexual intercourse, Kyounghee described it as “just a duty”
between spouses. She said that “since I was now married, because I had to live in that
marriage, I had to have sex. . . But then as we live, it [sexual intercourse] becomes a duty
rather than love.” She confessed to a bad sexual relationship with her husband since marriage. Whenever she had sexual intercourse, she had felt a vaginal pain. In fact,
according to her, before marriage, her husband inserted a small ball inside of his penis to
make a woman increase sexual pleasure during intercourse. Because of that, she has
struggled with various vaginal and uterine diseases since marriage. She said she still had
to see a gynecologist very often. Due to the pain, Kyounghee has tried to avoid sexual
intercourse with her husband even though her husband continued to ask, so she and her
husband didn’t have a good sexual relationship. She described regarding the sexual
intercourse, “I’ve got sick of it.” In other words, for Kyounghee the conjugal act became
a duty to keep her marriage, and sometimes, it meant a pain and suffering for her rather
than intimacy with her husband or the union or love of him.

As an interviewee who was only working mom, Ga-Eun described the meaning of
sexual intercourse as an expression of love. Because this interview was open–ended and
was not limited in each particular question, unintentionally we talked about what the Catholic Church taught about the meaning of the conjugal act such as “self-giving.”

**Researcher:** Can I ask you what you think about the Church’s teaching “self-giving”?

**Ga-Eun:** There have been times I felt it . . . I felt like as if the two of us, really the two of us, became into one, not being willing to separate from each other . . . Yes, I have felt it [that kind of feeling] at times . . . Not each and every time, just at times . . . when I feel like since I gave myself to him, he should be able to feel it, things like that.

In other words, she reported that she felt self-giving during the intercourse, but not all the time. To Ga-Eun, the primary meaning of the conjugal act was an intimacy with her husband and expression of love. According to her, when she and her husband were tired and stressed from their jobs, sexual intercourse was helpful to them. When their relationship was good, they had more intercourse. When their relationship was bad, the frequency of intercourse was reduced. However, because they still used NFP along with *coitus interruptus* (sometimes during the fertile days), she stated that whenever her menstruation cycle was irregular, the fear of accidental pregnancy still limited their sexual relationship. Even though Ga-Eun was open to a possibility of unplanned pregnancy because she was not desperate to terminate childbirth, she expressed that openness to a new life still limited their full sexual intimacy.

In conclusion, according to my interviewees, in terms of the purpose of the conjugal act, most of them laid weight on the union more than procreation. In effect, after a certain period of time in marriage such as after terminating childbirth, the purpose of sexual intercourse changed to only for a couple’s union and sexual intimacy, not for procreation any more. Thus, openness to a new life all the time (even after terminating
childbirth) can limit a couple’s sexual intimacy because they are afraid of an accidental pregnancy and sometime, it can lead to an abortion. Only one interviewee, Teresa Chang who was waiting for a child, put the meaning on procreation. Kyounghee and Gi-Bi gave a negative meaning to sexual intercourse through their own experiences. Kyounghee described it as “just duty” and expressed as “I’ve got sick of it.” Gi-Bi had been struggling to avoid the sexual relationship with her husband due to her physical limit and emotional and mental stress, so she expressed it as “I hated it.”

During the interview, I learn that most my interviewees wish to be free from a fear of unwanted pregnancy, and the fear is one of the big challenges for their marital sexuality. In addition, after they had the number of children they wished, the conjugal act meant to them practically only for the union between spouses. In effect, after using artificial contraception or after menopause, my interviewees confessed to enjoying a new sense of freedom and they reported that finally they could enjoy their sexual lives.

In other words, unity and procreation as the two good purposes of marriage do not go together for my participants in most cases. Their fear of procreation, when they do not use contraception, blocks their feelings of unity. More bluntly, I argue that in effect, their sexual lives seem to be seriously harmed by a fear of pregnancy if they try to follow the church teaching. In other words, if they do not try to follow the church teaching and block procreation securely, then they could experience more unity. Therefore, what I learn from my interviewees about the purpose and goods of sexuality does not match the official teaching that is used to prohibit artificial contraception because unity and procreation cannot be separated. Namely, the core message from the Church teaching is
good, but, it is too idealistic and it blocks sexual intimacy between spouses and sometimes, it causes them to commit a sin like abortion. Therefore, the teaching does not work properly in the lived experiences of heterosexual married Catholics, at least for my ten interviewees.

**Theme 5: “The Catholic Teachings and the Religious Effect on Birth Control.”**

In regard of the last theme, I explore what I learn from my interviews regarding how the Church teachings on birth control work for their choosing a birth control method, how much they are familiar with the teachings, whether or not taking the marriage preparation course before marriage, how their religious faith /beliefs affect their sexual lives in everyday life. Most interviewees agreed that Catholics should follow the Church teachings. However, they confessed it would be difficult to use only Natural Family Planning for birth control without any secondary artificial methods.

In effect, none of my participants including people who used NFP and experienced failing had a correct information regarding what is a true NFP. In fact, six out of ten used NFP with a secondary method like condoms or *coitus interruptus*, but they did not know that the secondary method was not allowed by the Church. In addition, after failing, the six participants changed the method from NFP to an artificial method or kept using a secondary method along with NFP. Only one interviewee (Lina) used NFP without any secondary method and did not change to more effective one until her menopause. Ironically, Lina had multiple abortions with using only NFP.

Because most NFP users among my participants used a secondary method and they changed the method after failing, their practical experience with NFP did not seem
to be desperate (when I asked them about their experience with NFP). Their moral judgment on NFP as well as artificial contraception does not seem to be as strict as abortion. In other words, after having an abortion, they felt guilty and sinful seriously, whereas after changing from NFP to artificial or illicit contraceptives, they did not show same attitude or regrets as an abortion.

However, even though they believe that it is very hard to follow the Church teaching on birth control and they experience the flaw of NFP, they still seem to blame themselves on failing NFP. They did not seem to blame imperfection of NFP or the idealistic impractical Church teaching. Rather, they seemed to blame their lack of faith.\(^\text{39}\)

In this way, their attitudes on the idealistic Church teaching seem to be as even though they realize the hardship of following the Church teaching, they think that Catholics should follow the teaching and if they cannot make it, they blame their lack of faith rather than complaining about the hardship or idealistic teaching itself. They seem to believe the infallibility of the Church teaching. Because of that kind of attitude, they seem to blame themselves for the failure of NFP such as lack of knowledge how to use it correctly or their irregular menstrual cycle rather than the imperfection of NFP. Even though they reported the difficulty of using NFP only and after failing, they had to have an abortion, they still seemed to blame their lack of faith or lack of knowledge for their choice of artificial or illicit methods.

\(^{39}\) On my speculation, it could be under the influence of Catholic religious teachings, atmospheres, and backgrounds such as “Penitential Rite.” During the “Penitential Rite” in the order of Mass, Catholics acknowledge their sins humbly as “I confess to almighty God, and to you, my brothers and sisters, that I have sinned through my own fault (with striking their breast). According to The Order of Mass in the Roman Catholic Church, “Acts of prayer and penitence prepare us to meet Christ as he comes in Word and Sacrament. We gather as a worshipping community to celebrate our unity with him and with one another in faith.” *Korean-English Daily Missal* (California: North American Conference of Priests for Korean Ministry, December, 2007), 12-41.
In regard to Lan’s experience with the Church teaching, she did not take the marriage preparation course when she got married. But she was aware of the NFP through the bible study and faith programs in the Church. She always thought she should follow the Church teachings concerning the family planning, but she could not, so she always felt guilty in her sexual life as a Catholic. In terms of the sinful feeling, she expressed that “I shall pay the price of the sin.” Regarding the teaching on the openness to a new life during the sex, she said as follows:

**Lan:** If so [have to follow the teaching], we, [myself and my husband], would enjoy the pleasure by blocking it [God’s authority].

**Researcher:** What do you feel about the teaching?

**Lan:** If that part is a sin, I shall pay the price of the sin.

**Researcher:** What do you think about artificial contraception?

**Lan:** Yes, I think . . . [about artificial contraception] I feel much freer with my personal life and our spousal relationship. I don’t have to be scared of getting pregnant . . . much freer . . . I have become a lot more free. I don’t feel scared of getting pregnant anymore.

**Researcher:** Can you please tell me more about before and after your husband’s vasectomy?

**Lan:** As a woman, I could naturally jump into it [for sexual relationship]. Since I feel free from the fear of getting pregnant . . . In the past, I felt so nervous about it or had to avoid it . . . like I had to pretend I was tired [to make an excuse for avoiding sex] . . . my face color would turn yellow when I didn’t have periods, [because if she did not have menstruation, it could mean that she was pregnant], as to whether I might have to get another abortion in a larger scale . . . I was scared . . . I felt when undergoing with the vasectomy . . . thinking if it is a sin, then I would pay the price for the sin.

Even though she believed that the use of artificial contraception was an evil act, she thought it was necessary to avoid abortion. Also, she argued that using artificial
contraception would be better than avoiding sexual relationship. So, she said that even though she had to commit an evil act, contraception was a requirement for a married couple for a better relationship and for better communication between spouses. In terms of the relationship between religion and one’s sexual life, she said as follows:

**Lan:** I always live in His words. I always put so much effort into it . . . So, I have had a lot of conflict . . . because I have had to think of my measuring stick . . . of the center point to keep the balance . . . I was so much . . . I think I manage my life so much more to keep the balance.

**Researcher:** Then, what do you think about the priority?

**Lan:** An easier way would be, what if, if I suppress my need to become self-centered and rather to try to live for each other instead? . . . So, I think I am having a hard time managing it in my life. The need to show my ego is strong, but to kill it . . . in order to live for each other, I have to kill my own ego. And to do that I have to live in His words, all the time, so that is the reason I do the bible study continually, I think. I read the Daily Missal every day, I don’t attend mass every day, but I always read the Daily Missal every day. I send text messages if there is a good teaching. I think that is one of my pleasures.

**Researcher:** How about your sexual life in relation to the religion?

**Lan:** I pray [for the intercourse] . . . that we would become one united. Only doing so gives me pleasure . . . and becomes power.

**Researcher:** Then, How about your husband? Does he think of it in that religious way?

**Lan:** It has not been a long time since my husband started a religious life. At first, he thought it was a sensual thing from our body. But it is not like that now. I hold my husband’s hands and thank God for giving me this husband . . . I say half joking, half seriously . . . . Honey, you know this is my moment of prayer . . . to make us as one/united today.

**Researcher:** Then, when you become one/united through sexual relationship, is that also something related to God?

**Lan:** It is Gospel, I think. That way, it would look good, wouldn’t it? In this way . . . I think this way.
According to the interview with Lan, even though she has used artificial contraception, vasectomy, she put stress on the union between spouses and sexual pleasure more than following the Church teaching. In addition, while she seemed to try to match her everyday life carefully with her religious life, in terms of sexual life, she gave priority to her sexual intimacy with her husband than the religious teaching.

Even though she expresses her priority of sexual intimacy, through her statements, I take the point that she seems to feel like there is a deep contradiction between her religious faith and her sexual life. Also, she worried about her children’s sexual lives after their marriage because of the hardship of birth control with following the Church teachings. She said that “one of my concerns is that my children will have a same conflict [of birth control] with me.”

Unlike Lan, Anna has been abstinent for a long time to avoid unwanted pregnancy and at the same time, to follow the Church teaching. Before Anna had a nuptial mass, she and her husband took the marriage preparation course. However, I was told that the course was not helpful for her and she felt the course seemed to be the formal procedure before having a nuptial mass. On the teaching of the openness toward life during the sexual intercourse, she responded that even though it would be difficult to follow the teaching, Catholics should do so. In addition, due to the difficulty for following these teachings and also the fear of unwanted pregnancy, she has simply avoided sexual relations with her husband. However, if she goes through menopause, she described that her sexual life might be changed and she could be free from the fear and the religious
bondage. Nevertheless, she has laid weight on the following the Church teachings in her sexual life. She said:

I think we would feel freed, not scared. Right now, we decided rather to shut down each other . . . our hearts . . . but I have a feeling that it might not be that way, once it is changed. So, to give a clear answer about it right now is . . . it is hard for me.

In other words, Anna gave priority to following the Church teaching than her sexual intimacy with her husband. Even though she expressed a limit on communication with her husband due to the sexual abstinence, she seemed to choose freedom from the fear of pregnancy.

I also asked her: “If she could go back to her honeymoon period, how would she control birth”? She answered that she would still use NFP with correct information to prevent failing and that she wished she could enjoy her sexual life. She said:

If I [could] go back, I would do sex within boundaries to comply with it by exploring my conditions and pre-knowledge more thoroughly. At the time, I didn’t have any basic knowledge about it, things like that. If I have to do it again, I want to do it properly. I want to do both of them. Complying with it properly and having a good sexual life . . . while practicing Natural Family Planning very thoroughly . . . I don’t think I will do the artificial stuff.

Anna tried to blame herself for failing NFP rather than the difficulty for using NFP and its imperfection. Even though the religious teaching limited her sexual life and sexual intimacy, she still wanted to follow the Church teaching and she gave priority to religious life.

For her part, Lina, who had an abortion several times (more than two times), regarding this subject matter, she responded without any hesitation that Catholics should follow the teachings even though there were many difficulties regarding their actual
practice in daily life. She regretted the abortions in her past. She said she should have
given birth whenever she was pregnant no matter how many children she would have.
Due to financial difficulty, she stated she had to choose the abortions. Continuously, she
described that for her there was no separation or distinction between religious life and
daily life. She said she has always been trying to live with her faith and following the
Church teachings in her everyday life. At the end of the interview, she mentioned again
that the wound of abortion did not heal yet and it was the most regrettable and the most
painful story in her entire life. In other words, even though she had an abortion several
times and had struggled with feeling guilty, she emphasized the importance of following
religious teachings as a Catholic in everyday life. As mentioned above, like Anna, Lina
seems to try to blame herself for her multiple abortions due to failed NFP, not to blame
the Church teaching, and she regretted that she did not use NFP with a right way or did
not have more information or knowledge about NFP. Even though she expressed the
difficulty to use NFP, she did not complain or criticize the Church teaching.

In Gi-Bi’s case, she had a negative view of sexual intercourse itself due to her
prejudice against sexual intercourse itself. In terms of that, she said:

Well… I think I used to avoid sexual intercourse because I knew I
couldn’t be pregnant anymore [due to having tubal sterilization surgery],
so if I did it, I felt like I did it only for sensual pleasure. I feel like because
I am a Catholic and I go to church every week, I feel like I cannot do that
[only for sensual pleasure]. It seems like, I am not sure, but it may
be….due to sex education from my parents when I was young or due to
my prejudice against sex itself, I am not sure though… I had a negative
view of sexual intercourse itself. Furthermore, when I started going to
church, for me, priests and nuns looked like they were chaste and pure
[due to their celibacy]. So, whenever I thought about sexual intercourse, it
looked impure for me. I couldn’t even express sexual pleasure during sex
with my husband because I felt like that kind of expression sounded
obscene or filthy. I know it [such a conversation] is natural between spouses, but I used to think like that.

According to Gi-Bi, when she was young, she had sex education from her parents, which was sexist and distorted, and it made her have a negative view on sex itself. In addition, after starting go to the church, the celibate life of a priest and nun affected her to have a prejudice against sexual intercourse. After having the tubal sterilization surgery, whenever she had sexual intercourse with her husband, she had a negative feeling because she did it only for her sensual pleasure not for procreation. In other words, she did not understand her sexual pleasure in a positive way. Gi-Bi reported that those were the reasons why she could not enjoy her sexual life and has tried to avoid the relationship. In Gi-Bi’s case, not only from her prejudice against sex itself due to the distorted sex education from her parents, but also the admiration of the celibate life in the Catholic Church seem to affect her sexual life and limit her sexual intimacy in her marriage.

While most my interviewees noted that religious teaching or faith affected their sexual lives and they experienced the difficulty of following the teaching in everyday life, Ga-Eun reported that she had never thought about her religion in the context of her sexual life. She reported that her religion did not have a great impact on her everyday decisions. Because she was a busy working mom, she stated that she was not an active Catholic and was not able to volunteer for her church at all and she has barely attended mass on Sundays. She emphasized that the sexual intimacy with her husband and communication between spouses were more important to her than following Church teachings. She responded to this topic, as “No, I haven’t thought of a religion . . . I have never thought about God, God’s blessing, that kind of stuff? I have never thought about it.” In effect,
Ga-Eun took the marriage preparation course before her nuptial mass and she learned about the Church’s teachings regarding birth control.

However, according to her, the reason she used NFP was not because of her religion, but because she thought the more natural way would be better for her and husband’s health. Until the time of this interview, she thought that *coitus interruptus* was also a natural contraceptive method. So, she has used NFP along with *coitus interruptus*.

On the question of her view on Church teachings, she stated:

I can’t live that way. With a 100% Natural Family Planning . . . I don’t think I can live like that. It is possible for three days when you are more stabilized, but how can a person be so rational when you are not being in an un-stabilized period?

**Researcher**: Can I ask the reason why you think you have to use *coitus interruptus*? What do you think about Natural Family Planning without *coitus interruptus*?

**Ga-Eun**: Since I am a Catholic, I should naturally comply with its teaching. Oh well, if you only pay attention to those dates and focus yourself on them only, it will hurt a marriage relationship and a mistrust and misunderstanding will be construed, that’s what I think . . . If a couple needs each other, I believe, the two can do it even though they might slightly violate the teaching . . . yes, if it is for their sexual relationship.

Thus, according to her, if she had to deal with a lot of stress and concerns due to NFP, she argued that she might find it better to choose a sinful way in order to have a good relationship with her husband. Regarding the openness of a new life during the sexual intercourse, she responded as “No, I can’t. I can’t accept it.” In other words, she articulated that religion or religious teaching did not affect her sexual life. She put weight on the relationship between spouses more than following the Church teaching. She emphasized her realistic and practical reasons why she did not follow the teachings.
Unlike other interviewees, Lan, Anna, and Lina, she criticized the idealistic Church teaching, and she said “I can’t live that way,” but at the same time, she believed she should comply with the teaching. In other words, she expressed some ambivalence.

In order to explore one side of their perspectives of the Church teaching on birth control, I asked them a question, “what if you become pregnant at the age of sixty,” then, six out of ten (Sae-Hwa, Lan, Jae-Sun, Haebarray, Teresa, and Kyounghee) would give birth because it would be a gift from God. The interviewees (Lan, Jae-Sun, Lina, and Kyounghee) who had an abortion regretted their choice, and said that even though they had an abortion in the past, if it happened again to them, they would give birth no matter what kind of situation or hardship they might have. They reported that after they had a deeper religious faith or a mystical and spiritual religious experience, their views were changed and they regretted having an abortion in the past. Rather, they strongly emphasized that Catholics should follow the religious teachings. They confessed that when they were younger, they had to put weight on the concrete pressing realities of financial concerns and immediate family situations more than the Church’s condemnation of birth control.

In conclusion, most interviewees showed that Catholic teaching and parish participation has affected their everyday lives and they have tried to follow the Church’s teachings in their everyday lives. However, most interviewees confessed to the profound difficulties and struggles of following the Church’s teachings in their sexual lives, especially for birth control. Some of them had to act against the teaching or their beliefs
due to more realistic and practical reasons such as financial hardships, the lack of family support for rearing children, or her career.

In fact, in two of the four who had an abortion, one was a Catholic nun before marriage and the other’s husband was a Catholic priest before marriage. Because I had to protect my interviewees’ confidentiality and anonymity, I did not report this fact in the individual stories. Even though they used to be religious people and became active Catholic lay people after marriage, they had to have an abortion due to their practical hardships. I do not think that they had an abortion because their faith or beliefs was weak or they were not active Catholics. Even though they agreed with the Church teachings and believed the core message from the teaching, they could not ignore their practical struggles and needs in real life. Therefore, after choosing against the teaching, they had to struggle with feeling regret, guilty, and pain in their religious lives.

Conclusion

Most my interviewees were using artificial contraception or illicit birth control such as condoms, vasectomy, tubal sterilization, and coitus interruptus (an illicit method that the Catholic Church prohibits). Seven out of ten tried to use NFP in the beginning of marriage, but after an experience of the failed NFP and subsequent unplanned pregnancy or having an abortion, they changed their birth control approach to artificial methods or an illicit method. Many participants reported that they were affected by religion for choosing NFP in the first place, however, after their experience of failure, they felt that they had to opt for an artificial method or more effective one.
The stories from my interviewees suggest that even though they try to follow the Church’s teaching on birth control, eventually they have to negotiate with the realities of their economic situations, career, their family circumstances, or support for childcare. After they change to artificial way or have an abortion, some of them have to struggle with a sense of guilt in line with their faith and beliefs. Nevertheless, even though they realize and believe that it is very hard to follow the Church teaching on birth control – using NFP only, they articulate that Catholics should follow the teaching, and some of them try to blame themselves for failing NFP or having an abortion with reasons such as lack of faith or lack of knowledge of NFP.

On the meaning of marital sexual relationships, all interviewees have different views such as bodily communication, self-giving, a spousal duty, a stress reducer, and a mode of bringing on new life. Most interviewees (9 out of 10) laid weight on the unitive meaning of the conjugal act more than its procreative meaning. They report that their sexual intimacy is limited without any contraceptives due to a fear of unwanted pregnancy. Most of them expressed freedom from the fear after using artificial contraception or after their menopause.

Regarding the relationship between the Church teaching and marital sexual life, most interviewees showed that Catholic teaching and parish participation has affected their everyday lives and they have tried to follow the Church teachings in their everyday lives. However, most interviewees confessed to the profound difficulties, challenges, and struggles of following the Church’s teachings on birth control. Nevertheless, for the most part, they do not conclude that the Church teaching must be wrong. Rather, they conclude...
that they are sinning due to their lack of faith or negotiation with their practical situations. In other words, they try to blame themselves for their illicit acts related to the issue of birth control, not the Church teaching.

In short, through my interviews, I explore how difficult it is for ordinary women in ordinary marriages to get along without any use of birth control and how NFP is viewed by most as not a secure method to avoid unplanned pregnancy and for good reason. In addition, due to the unrealistic impractical teaching, some of my participants have lived with guilt feeling and regrets and nothing could staunch the hollow wound that grew within them.

As I noted earlier, many theologians and lay people argue that the voice of the laity is not just a voice that carries moral weight, but that it is an important theological datum and a resource for doing good theological reflection on the issue of proper Christian responsibility regarding sexual expression and reproduction. Almost four decades ago, even though the Papal Birth Control Commission already reported the significance of the real experiences and voices of the laity, *Humanae vitae* ignored their struggling and difficulties, and today, in the twenty-first century there are still many Catholics who have to confess to the profound difficulties and challenges of following the Church’s teachings in their sexual lives.
CONCLUSION
TOWARD THE DEVELOPMENT OF ROMAN CATHOLIC
TEACHING ABOUT CONTRACEPTION

Since the promulgation of *Humanae vitae* with its reaffirmation of the Church’s official condemnation of artificial birth control, exhaustive debate has been joined critiquing and defending the magisterial condemnation. This magisterial teaching is still a point of major contention between revisionist and traditionalist Catholics. Despite the Church’s condemnation of artificial contraception, many Catholic lay people choose to break with the condemnation and to use artificial contraception. According to quantitative studies, 55.0 percent of South Korean Catholic married people use artificial contraception. Among my interviewees, seven out of ten participants used artificial contraception or *coitus interruptus*, which remains defined by the Catholic Church as immoral birth control.

Indeed, I think that the fertility issue is one of the most significant societal issues globally in modern society. While some countries including South Korea are faced with a low fertility rate and a relatively high rate of abortion, some other countries struggle with a rapidly growing population. In fact, population growth globally and especially in developed or rapidly developing countries impacts heavily on the globe’s ecosystems and on climate stability. Clearly the issue of birth control related to family size and societal
fertility rates remains one of the most significant global issues not only in pastoral terms, but also in terms of concrete practice and practical policy.

My qualitative research data displays a disturbing dynamic in which some married South Korean Catholics who try to follow the Church's official teaching refrain from the use of artificial birth control and employ only NFP for birth control. But, very often, they get pregnant unexpectedly and they have to confront the impending reality of another child and unexpected sharply expanded economic and child care responsibilities. When faced with these challenges, a significant number adopt abortion to terminate the pregnancy. Ironically we see a dynamic in which it is often the most traditionally pious Catholics who try the hardest to follow papal teaching on birth control who when NFP fails feel compelled to resort to abortion.

In my dissertation I offer some demonstration regarding the lived experiences of some Catholic married couples as they struggle with the Church’s teaching and their recognition of their own limits to offer responsible care as parents. Likewise I argue that Catholic married couples need a more pastorally sensitive and practically responsible moral teaching from the Church regarding the use of birth control. The Church has taken seriously the reality of historical change and the lived experience of Catholic laypeople in the modern world as it has shaped its teaching on social ethics and social responsibility, but I agree with many other Catholic revisionists who note how any similar openness to the concrete realities of lived experience of Catholic families in the sphere of sexual and reproductive ethics has too often been sadly missing. I argue that the Church’s
condemnation of artificial contraception needs to be ended and a more practical understanding of the oftentimes responsible use of birth control should be enunciated.

In Chapter One of this dissertation, I examined the Catholic Church’s history and change in its teaching both regarding the understanding of birth control and the understanding of the ends and meanings of the conjugal act. As this Conclusion makes clear, throughout the Church’s long history, there have been efforts to develop and change the teaching on birth control. There have been different perspectives on and understandings of contraception among the popes across the centuries. While the Church had still in general consistently condemned artificial birth control, many quarters of the Church during the 1950s and early 60s believed that the Church needed to accept the moral use of birth control. Hope for change was raised as Pope John XXIII called for a Papal Birth Control Commission to study the question. I described the drama of this tremendously important episode in Church history. With hopes for change raised, John XXIII died and the new pope, Pope Paul VI was elected. The Papal Birth Control Commission first called by one pope now had to report their findings to a very different pope. In the Commission’s final report, now known as the Majority Report, they recommended that the Magisterium allow artificial contraception for “responsible parenthood.” However, the long journey of the Papal Birth Control Commission and the needs and hopes of Catholic laity were ignored by Pope Paul VI and the Church hierarchy through the promulgation of *Humanae vitae*.

Even though the birth control controversy was triggered over four decades ago, it still matters among theologians and ethicists as well as among Catholic lay people.
According to my quantitative and qualitative data, even though South Korean Catholic lay people understand the core message from the Church teaching regarding birth control, not many Catholics follow the teaching in their everyday lives. For example, according to my quantitative data, only 14.6 percent of South Korean Catholics reported using NFP. However, as revealed in my qualitative data, the true rate of NFP users would be less than the 14.6 percent because people might use NFP with other temporary contraceptive methods such as condoms and coitus interruptus. In addition, in my ten participants’ cases, despite knowing the condemnation from the Church, as mentioned above, seven out of ten used artificial contraception after experience with the failed NFP, and some of them felt a sense of guilt due to their disobedience to magisterial Church moral teaching.

Indeed as my interviewees attest those who try hard to keep faith with magisterial teaching and thus opt for NFP rather than artificial birth control often are faced with an unintended pregnancy that demands a decision. And as I report a number of such faithful Catholic couples ironically find that they feel they have no other choice but to opt for an abortion. These are the real and lived situations of birth control today among South Korean Catholic heterosexual married couples.

In this Conclusion, I join in agreement with many Catholic revisionist theologians and ethicists who have argued for the necessity of reforming the Church’s formal understanding of the meaning and purpose of the conjugal act and procreation. Most of the revisionist’s arguments have been shaped by attention to North American and European ranges of Catholic experience. My project—employing both qualitative and quantitative research data—has sought to contribute a study that draws upon the lived
experiences of South Korean Catholic lay people. I argue that the current Catholic Church teaching on birth control should be reshaped and reconsidered to give a concrete and practical ethical teaching to South Korean Catholic heterosexual married women including my ten participants as well as to Catholic women in other societies across the globe who have common experiences and needs.

**The Reformed Meaning and Purpose of the Conjugal Act**

For the past four decades, many theologians and ethicists have debated over the moral meaning and end of the conjugal act. The debate has been joined by those who accept Pope Paul VI’s logic in *Humanae vitae*, those whom I refer to as the traditionalist school, and those who dissent from the reasoning and conclusions of *Humanae vitae*, whom I call the revisionist school. I accept the general approach of the revisionists, which dissents from the reasoning and conclusions of *Humanae vitae*, and argue that the Church teaching on birth control can be revised. With accepting the general approach and perspectives of most revisionists, however, I articulate that my arguments regarding the reformed meanings and ends of the conjugal act are not identified with the primary revisionist arguments. In other words, I argue that the conjugal act is a mutual expression both physically and psychologically of intimacy, love, and union between spouses, and further, the unitive meaning and end of the conjugal act are not equal to the procreative meaning and end, and the two ends are separable. I argue that the unitive end of the conjugal act should be the primary and permanent whereas the procreative end of the conjugal act should be the secondary and contingent. In addition, in regard to the use of contraception, through the lived experiences of my ethnographic interview participants,
NFP for birth control is unreliable and has a high rate of failure. Therefore, if non-procreative sex is permissible morally, then the Church needs to allow more effective and affordable birth control method for non-procreative sex.

According to the Catholic Church teaching, the conjugal act has two meanings and purposes — the unitive and procreative — and they are equal and should always be open to each other during each and every sexual act. As one of my findings from my ethnographic interviewees, most my participants tried to follow the Church teaching with using only NFP in the first few years after marriage. However, after experiencing unintended pregnancies, they learned that NFP did not work well for them. Then, they used artificial contraception. Unexpectedly, most my participants tried to blame themselves on the failing NFP, not blaming the flaw of NFP, nor the idealistic impractical Church teaching. In other words, they blamed their lack of faith and the lack of knowledge of NFP. It tells that I think, despite their active beliefs/faith, they cannot ignore their real and practical hardships and needs. In other words, after realizing the gap between the Church teaching and their real lives, most of my participants laid weight on their practical needs. Therefore, it tells us that even though ethically the Church needs to give guidance, teaching, and moral view for the laity, for my participants the Church teaching on birth control seems to make them blame themselves for their lack of faith and feel a sense of guilt.

In regard to the purpose of sexual intercourse, most of my participants laid weight on the importance of spousal union more than procreation. Essentially, after a certain period of time in marriage (especially, after finishing childbirth), their purpose of sexual
intercourse changed primarily to the couple’s union and sexual intimacy, not for procreation any more. Openness to a new life all the time of sexual intercourse limits their sexual intimacy because they are afraid of an accidental pregnancy and sometimes, this can lead to an abortion. In fact, most married couples do not have a sexual relationship with the intention of having a child all the time. Even the Church does not demand that married couples should intend having a child whenever they have a sexual relationship (in the allowance of NFP). Thus, when they do not intend having a child, some married couples use birth control to avoid an unplanned/unwanted pregnancy. And, to avoid the failure of birth control, some married couples seek more effective methods.

As mentioned above, the problem of the Church teaching is that NFP has a high failure rate and it is an unreliable method.

According to my interview data, after my participants (seven out of ten) failed NFP, five out of them changed to artificial contraception, one chose abstinence, and one kept using only NFP. The participant who used only NFP had to have multiple abortions. In addition, three out of the seven experienced at least one abortion. The Church needs to take seriously such concrete data regarding the lived experience of Catholic laypeople. In other words, NFP does not work well for my participants’ birth control regime. If non-procreative sex (having sex without the intention of procreation) is not illicit, and it is permissible morally (due to the allowance of NFP), then the Church should offer more effective and useful methods for married couples.

After using an unreliable method, when an accidental pregnancy occurs, some married couples are faced with significant concern and worry. Essentially, many couples
have to deal with deeply practical issues when unplanned / unwanted pregnancies occur to them. Even though South Korean married lay people understand the Church’s condemnation of sexual intercourse with blocking the possibility of pregnancy, many couples have sexual intercourse while using artificial contraception according to my quantitative data regarding South Korean Catholics. There was no difference between the general population and Catholics regarding the use of artificial contraception. In fact, because NFP has high rates of failure, many couples who use the method have to suffer accidental pregnancies or abortion, and then change to adopting artificial contraception. These are the real lived situations among South Korean heterosexual married Catholics.

I am in strong agreement with Rosemary Radford Ruether’s feminist approach regarding the meaning of marital sexuality. Ruether argues that the sexual act exists on several levels of meaning and purpose. First, “it is a biological act whose purposive goal is the generation of a new human being,” and second, “it is an act of love in which the married couple expresses their union with each other.”¹ According to her, the sexual union does not merely exist on biological level, but it expresses “the mutuality of their union on all levels of their being, their total I and Thou with each other.”² In other words, as I mentioned above, after a certain period of time in marriage, in my interviewees’ cases, sexual intimacy and mutuality between spouses become the primary purpose of their sexual intercourse. Therefore, I argue that the spousal union should be the primary and permanent purpose of the conjugal act and should be protected from an unintended/unexpected pregnancy.

¹ Ruether, “Birth control and the Ideals of Marital Sexuality,” 140.
² Ibid.
My argument on the renewed meaning of the conjugal act is that the unitive meaning ought to be the primary and essential purpose of the conjugal activities in human sexuality, while human procreation ought to be a secondary and contingent purpose as a choice for it. Furthermore, if non-procreative sex in itself is moral as evidenced in the Church’s acceptance of NFP, then the use of birth control technology for non-procreative sex can be viewed as morally permissible.

The Developed Understanding of Procreation

In South Korean society, Roman Catholic magisterial teaching seems to only endorse sex and procreation as appropriate only for heterosexual couples who settle down and have sufficient economic resources to afford the significant expenses that child-rearing entails. South Korean married couples who enjoy middle-class incomes and financial security are able to deal with unexpected or unplanned pregnancies in ways that less financially secure couples cannot. According to my interviews, regarding the reasons for wanting/needing some kind of birth control, there were various reasons such as societal influence for population control, economic reasons, woman’s career aspirations, lack of family support for childcare, and no particular reason. However, the most common reason for birth control among my participants was the pressure of financial burdens.

After having a child, my participants (six out of ten) quit their jobs for childcare, and they were then faced with a serious financial challenge because they had to live with only the income from their spouses. In addition, as a distinctive South Korean societal characteristic South Korean parents push children hard educationally and they spend a lot
of money for their children’s private tutoring irrespective of their household income. Thus, these costs may limit the financial resources available for having a second or third child for many South Korean families. Therefore, for some South Korean parents including some of my interviewees, the financial burden for having a child and education of children seem to be one of the key significant influences for the low birthrate in South Korea today. Practically speaking, a family’s financial situation looms large in their family planning in South Korea today.

According to my experience as a mother, a child is a “gift of God”, and the gift gives me absolute joy and happiness. Likewise for some parents, a child can be the enormous joy and happiness granted by God theologically and ethically. At the same time, however, a lot of preconditions –emotional maturity, sense of duty and responsibility, good parenting, and economic resources –are required for parents to be able to responsibly sustain this gift in modern society. Because a child is a significant being to parents, many conditions are required of parents for taking care of the gift well. In addition, in my view, while the love between spouses is mutual and reciprocal, the love from parents toward children is sometimes unconditional and very demanding. Therefore, when a married couple is not ready to get the gift from God with those preconditions, having a child and the challenge of the rearing of a child would not be always a pleasant or happy experience for the married couples. A child in itself is the happiness whereas rearing a child without the necessary resources can be a burden for some parents, and sometimes it can make parents sad and miserable.
I think that the Roman Catholic sexual ethics seems to put the moral weight on an unborn life more than a child already born, and to stress too little the sort of life after birth such as the child’s well-being and responsible parenting and good environment for the child. Therefore, sometimes, responsible parenthood in Catholic ethics seems to mean primarily the “giving of birth to a child,” not the “giving of happiness to a child.”

According to Rosemary Radford Ruether, the procreative purpose of the conjugal act is related to not only having a child in itself, but also “extends to the nurture of the child; and it the continued use of the sexual act is necessary in order to maintain the union of the couple and their ability to carry out their continued responsibility to the child, then the primary purpose of marriage itself points to the use of the sexual act for its purely relational function.” In other words, Ruether argues that the official Catholic teaching should recognize that women’s situations socially, economically, psychologically, and culturally as well as the needs and interests of the children already born should be weighed against the value of a potential child. She suggests that Catholics should use effective and affordable birth control to avoid unintended pregnancy in the first place and to reduce abortion as much as possible. I support Ruether’s argument, and indeed, according to my interview data, when a woman gets pregnant unexpectedly, the woman’s practical situations affect her decision significantly how to deal with the unintended and unexpected situation. Sometimes, the pregnancy is connected to birth or sometimes, it is ended with abortion at least from the experiences of my participants. Therefore, as Ruether emphasizes, the marital sexual act should be viewed in the various

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3 Ibid., 143-144.

contexts and the relationship with various situations around the family, not the biological, natural, and physical realms of a husband and a wife, but the couple and whole family’s situations socially, economically, psychologically, and culturally.

Again, in regard to the purpose of the sexual act, the fact cannot be denied that the unitive and procreative ends of the conjugal act are connected to each other biologically and naturally. However, even though procreation is related to the marital act, the procreative end is not necessarily to be equal to the unitive end of the conjugal act. Rather, procreation is an occasional and contingent part of the conjugal act biologically and naturally. In addition, the unity and procreation during the sexual intercourse do not work together all the time practically for my participants in most cases. Essentially, when they do not use any contraceptives, their fear of the unintended and unwanted pregnancy blocks their feelings of unity and sexual intimacy. It reveals that the message from the Church teaching is too impractical for their real lives. Rather, it blocks the sexual intimacy between spouses and sometimes, it causes them to commit a more serious moral sin like abortion.

In addition, biologically and naturally, woman’s body has an infertile period and the infertile period is much longer than a fertile period. Thus sexual intercourse is not always open to a new life naturally and biologically, and pregnancy is occasional and contingent on sexual intercourse. Therefore, as mentioned above, if pregnancy is occasional and contingent on sexual intercourse, then the procreative purpose of the conjugal act is not necessarily to be equal and inseparable to the unitive purpose of the conjugal act. Then, procreation can be viewed as a choice, not as a necessity in marriage.
Therefore, I argue that the unitive end of the conjugal act is the primary and permanent whereas the procreative end is the secondary and contingent. In modern society, because a man and a woman love each other first, they marry, and then procreation is a contingent part on their marriage and it can be their choice, and their conjugal act is not necessarily to be open to a new life all the time.

In addition, if controlling birth in itself in the marital sexual relationship is morally allowed in the Catholic official teaching with Pope Paul VI’s endorsement of NFP, then non-procreative sex with using more effective birth control methods can be considered seriously by the Church. With supporting the real experiences of my participants, NFP does not work well for non-procreative sex, and many South Korean heterosexual married couples including my participants suffer from a high rate of failing. If so, the Church needs to take the lived experiences of the laity rather than hanging on for the sake of “the natural method and process.”

In regard to responsible parenthood in relation to procreation, both *Humanae vitae* and the Majority Report (one of the official documents from the Papal Birth Control Commission) articulate the moral understanding of responsible parenthood. As mentioned in Chapter One of this dissertation, Pope Paul VI responded to the Majority Report in his encyclical, *Humanae vitae*. Regarding responsible parenthood, there is a different understanding between *Humanae vitae* and the Majority Report, and I argue that the message regarding responsible parenthood from the Majority Report seems to engage deeply the lived experiences and practical contexts of a married couple and their family including my ten participants in South Korea.
Humanae vitae lays out responsible parenthood with the four realms of understanding: 1) the biological processes, 2) human innate drives and emotions, 3) physical, economic, psychological and social conditions, and 4) the objective moral order which was established by God and a right conscience (giving priority to a couple’s duties toward God). It describes that birth can be controlled for responsible parenthood, but it should be done with only NFP by keeping a right order of priorities, and it emphasizes, especially the fourth realm as an essential part of it as “husband and wife, keeping a right order of priorities, recognize their own duties toward God, themselves, their families and human society. From this it follows that they are not free to act as they choose in the service of transmitting life.” In other words, opening to a new life with corresponding to the Will of God is the essential part of and takes priority of responsible parenthood. Therefore, the core message of responsible parenthood from Humanae vitae seems to being open to a new life in the corresponding to the Will of God, and it is the duty of a married couple toward God. In other words, it describes that a husband and a wife can cooperate with God through the giving of birth to a child and the rearing of the child, and it is responsible parenthood.

Unlike Humanae vitae, responsible parenthood from the Majority Report is “to save, protect and promote the good of the offspring, and thus of the family community and of human society, the married couple will take care to consider all values and seek to

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5 Humanae vitae, no.10.

6 Ibid.

7 Ibid., no.8.
realize them harmoniously in the best way they can.”8 In other words, the Majority Report lays weight on the totality of married life as understanding and evaluating the morality of marital sexuality, the value of fertility, rearing and education of children, human sexuality, and Christian beliefs/faith in various contexts of material, psychological, cultural, and spiritual conditions in modern society. Unlike *Humanae vitae* such as keeping a right order of priorities, the Report understands responsible parenthood in the harmony of all authentic values of marriage in today’s practical situations such as conjugal love of a husband and a wife, the good of procreation, education of children, the family community, and human society. The Majority Report argues that the regulation of conception is necessary for many couples for “a responsible, open, and reasonable parenthood” in today’s circumstances, and it says “if they are to observe and cultivate all the essential values of marriage, married people need decent and human means for the regulation of conception.”9 In other words, the Report argues that responsible parenthood is required for the sake of the totality of marriage, and in order to keep the essential values of marriage in today’s circumstances, married couples can use artificial birth control methods to regulate conception. The Majority Report describes procreation as one of the essential authentic values of marriage, and it emphasizes that responsible parenthood is a fundamental requirement of a married couple’s true mission.

I support the Majority Report’s perspective and attitude on understating of responsible parenthood in the harmony of all essential values of marriage in today’s practical contexts. It views responsible parenthood on the totality of married life. I

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9 Ibid., Part I, ch. II, n. 2 and ch. III.
support one of the core messages of the Majority Report, which is that married couples may need artificial contraception for their responsible parenthood in the harmony of all significant values of marriage in their practical circumstances. According to the stories and experiences from my interviewees, most of them had to regulate birth because of their own significant reasons and for the importance of other values. Practically, none of them was free from an accidental or unintended pregnancy (except one participant who was infertile). If parents, at least for my interviewees, are not ready to accept changes and challenges after unplanned or unwanted childbirth, then to them, parenthood will be felt as a burden rather than as a joyful gift from God. Therefore, I argue along with many others of the revisionist school and the message of the Majority Report that procreation can be regulated for responsible parenthood with effective and affordable birth control means.

According to Barbara Andolsen, a Catholic feminist theologian, the key responsibility for the nurture of children and the well-being and flourishing of family members depends on the moral evaluation of sexual intercourse and procreation. Andolsen argues that in Roman Catholic sexual ethics, the fundamental evil should not be viewed as non-procreative sexual activity, but rather as “coercive sexual activity” which includes sexual violence, sexual assaults, sexual harassment, rape, and sexual intercourse with anger or dominance. While I support Andolsen’s argument, when we deal with the issue of procreation, I argue that we need to focus on various situations and contexts of the family, the relationship among family members, each family member’s well-being,

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and preconditions for a new life rather than the natural means and process itself, the biological and physiological realm of human body, and the unconditional giving of birth without any measures.

According to the practical experiences from my participants, when they considered family planning or they were faced with unintended/unwanted pregnancies, most of them laid weight on their practical situations and concerns such as their economic situations, childcare availability, or the well-being for the children already born more than their beliefs or faith such as the sanctity and dignity of human life or the teaching from the Church regarding intrinsically evil acts. In other words, there is a significant gap between the real lives of the laity and the Church’s moral teaching for the laity. The problem is that due to the gap, some lay people have to live with struggling between their religious beliefs/faith and their practical situations and sometimes with feeling guilt from their illicit acts like abortion. Therefore, the Catholic Church cannot ignore the practical situations and the lived experiences of lay people, their needs, and their struggles. The Catholic sexual ethical teaching for birth control and reproduction in marriage should be shaped in response to the lived experience of Catholic married couples and their families. It should not simply reflect the Church tradition and the views of the Church hierarchy, rather it should work for and help the laity in their practical needs and challenges.

**Toward the Developed Church Teaching for Birth Control and the Importance of the Role of Human Experience in Christian Sexual Ethics**

Revisionists argue that human experience matters greatly in the shaping of ethics. They argue specifically that Catholic sexual ethics needs to become more open to taking
seriously the lived experience of the laity even as Catholic social ethics has taken seriously the historical experience of changes and movements in society. I argue that closely listening to the experience of the laity is an important datum for constructing moral perspectives and understandings of moral responsibility.

My ethnographic interviews reveal that there is “a gap” between the official Church teaching for birth control and practical situations on birth control of the ten South Korean Catholic heterosexual married women. In fact, my participants understand the Church’s condemnation of artificial contraception and abortion, and some of them tried to follow the teaching (with using NFP) to keep their beliefs and faith as a Catholic and some of them used NFP for other personal reasons such as preference of natural means for their health or open to an unplanned pregnancy for a second child or third child. However, after trying NFP, they learned it did not work well for birth control, and they had to deal with unexpected situations. In effect, only one participant used only NFP all through her marriage, and she had multiple abortions. Due to the ineffectiveness of NFP, in two to three years of marriage, most my participants changed their birth control methods from NFP to artificial ways because they were open to a new life in the beginning of their marriage, but after they finished childbirth or did not want to have a child, they changed to artificial means. It reveals that most of my participants (except one who was infertile) did not intend having a child during the sexual intercourse after a certain period of time of marriage.

One of the emergent facts from my interviews was that most of my participants did not consider artificial contraception as an illicit or evil act as serious as an abortion.
Therefore, regardless of the condemnation of artificial contraception from the Church, they still use artificial means and they seem to think that using artificial birth control is better than having an abortion. Ironically, my research highlights how some South Korean Catholic couples in trying to keep their faith to the Church's teaching on birth control actually see higher rates of pregnancy, and then some of them reach to abortion to solve the problem. Keeping faith to the teaching on birth control seems, for some traditional South Korean Catholics, often to increase the need they feel to use abortion. Therefore, I am in strong agreement with Rosemary Radford Ruether’s suggestion that Catholics should use effective and affordable birth control to avoid unintended pregnancy in the first place and abortion should be reduced as much as possible.

Through my study, I hope I have successfully built on my findings to argue for the call for the Church to revise its teaching on birth control. While previous and current works and studies have been directed to how North American and European Catholic women are not following papal teaching on birth control, my study illustrates how even conservative South Korean women who are trying to follow papal teaching are being really hurt by this and often are resorting to abortion. Someone might indicate that my study is irrelevant because the Church cannot change her moral teaching for birth control, and the Church hierarchy does not pay attention to the experience of the laity as a significant datum for her constructing moral perspectives and teachings.

However, as I mentioned in the Introduction of this dissertation, over the centuries, the Catholic Church has changed her moral teachings on some practical moral issues such as usury, slavery, and freedom of conscience. Furthermore, regarding the moral issue of
divorce, a close examination of the change has been in progress in the Catholic moral teaching.¹¹ Thus, I agree with revisionists who note these important precedents for the Church’s moral teaching remain open to change when needed. Therefore, through the practical movements and longing for change on the morality of artificial contraception in the Church history, I argue that due to the Church’s idealistic and impractical teaching on birth control, ten South Korean Catholic heterosexual married women have struggled with the fear of an unexpected/unwanted pregnancy for their sexual lives and sometimes, they suffer with pain and guilt from their experiences with an abortion.

I hope that my ethnographic research with South Korean Catholic women supports other studies of North American and European Catholic laypeople who find it hard to keep faith with the Church’s condemnation of the use of birth control. In addition, my research develops a study of South Korean Catholics that supports the revisionists’ arguments and their position on the morality of birth control that have been based in good part on studying and listening to the experience of North American and European Catholic couples.

APPENDIX A

INTERVIEW RECRUITMENT LETTER, ENGLISH
To whom it may concern,
My name is Taeeun Kim and I am a doctoral student in Christian Ethics at Loyola University Chicago in the U.S. I have asked the administrative assistant to pass this letter to qualified members to inform them of an opportunity to participate in a research study I am conducting for my dissertation project.
I would like to listen to your experience of contraception, family planning, and sexual life in your marriage. Through this research I hope to better understand the ways in which the Roman Catholic sexual ethics have affected your life.
Participants for this study must satisfy the following criteria:

1) female over age 20
2) marital status as married
3) currently not pregnant
4) religious affiliation as Roman Catholic

This is a voluntary research study. If you fit the criteria for this study, I would like to carry out an interview at a location convenient to you. The interview will take approximately 60-80 minutes. All interviews will be audiotaped. I will also take notes during and after each interview session.
Your name and identity will not be used in my dissertation or in other presentations or publications. Pseudonyms, or false names used in research to protect an individual’s privacy, will be used in all field notes and reports in order to protect your confidentiality.
In order to participate in this study, you must be willing to sign a consent form. You will be given a copy of this signed consent form before the interview begins. To ensure your confidentiality all consent forms from interviews will be kept in a locked storage cabinet separate from interview audiotapes. After three years, all interview tapes will be destroyed.
In order to honor your time and contribution to this study, you will be given 20,000won ($20.00) at the conclusion of the initial in-person interview.
If you are interested in participating in this research study, please contact me directly at my mobile phone number, xxx-xxxx. Thank you for considering participation in this valuable study.

Best Regards,

Taeeun Kim
Loyola University Chicago
APPENDIX B

INTERVIEW RECRUITMENT LETTER, KOREAN
“자매님들의 이야기를 듣고 싶습니다”

shalom! 안녕하세요, 저는 미국 시카고 로욜라 대학교에서 그리스도교 윤리학 (Christian Ethics) 박사과정을 공부하고 있는 학생입니다. 또한 세살짜리 딸 아이를 키우고 있는 엄마이자 가정주부 입니다. 저의 박사논문 안에 한국 가톨릭 여성 신자분들의 이야기를 실고 싶어서 인터뷰에 함께해주실 자매님들을 찾고 있습니다.

자매님들의 결혼생활과 가족계획, 그리고 그에 관한 가톨릭 교회의 가르침에 대한 자매님들의 생각과 의견을 듣고 싶습니다. 개인의 인권, 신상정보, 프라이버시, 익명성이 철저하게 보장되는 인터뷰이기 때문에 관심 있으신 자매님께서는 개인적으로 저에게 연락을 주시면 감사하겠습니다. 너무 큰 부담 갖지 마시고, 그냥 저와 둘만이 이 시대를 함께 살아가는 여성으로서, 아내로서, 엄마으로서, 가톨릭 신자로서 편안하게 이야기를 나누시면 됩니다. 인터뷰 시간은 60-90분 정도로 예상하고 있습니다.

제가 찾고 있는 인터뷰 대상자로는 20세 이상 결혼하신 가톨릭 여성 신자분이시면 모두 환영 입니다. (단, 현재 임산부는 건강상의 이유로 제외하겠습니다.)

인터넷에 응해주신 분들께는 감사의 마음으로 작지만 2만원의 사례금을 드리겠습니다.

저의 작은 성의라고 생각해주십시오.
인터넷에 관한 더 자세한 사항들에 대해서는 저에게 개인적으로 연락을 주시면 상세히 알려드리겠습니다.

저의 연락처는:

이름: 김태은 (헬레나)
전화번호: XXX-XXX-XXXX
E-mail: XXXXXXXX

자매님들의 연락 기다리고 있겠습니다. 감사합니다.
APPENDIX C

CONSENT FORM, ENGLISH
Consent Form

Project Title: Toward the Development of Roman Catholic Teaching about Contraception in light of the Experience of South Korean Catholic Women

Researcher: Taeeun Kim
Faculty Sponsor: Dr. William French

You are being asked to take part in a dissertation research project being conducted by Taeeun Kim, a graduate student at Loyola University Chicago in the U.S. in the Department of Theology.

The purpose of this research is to survey Korean Catholic married women’s experiences and their actual condition of contraception, family planning, sex life, opinion or thinking of the Church teachings, and their religious faith. The researcher will be interviewing ten to twenty Catholic married women to learn from their experiences of birth control. If you agree to participate, you will be asked questions about your experience of contraception, family planning, sex life with husband, and your religious faith. The initial interview will take approximately 60-80 minutes. All interviews will be audiotaped and the tapes will be stored in a locked file cabinet in the researcher’s home office. To ensure your confidentiality all consent forms from interviews will be kept in a separate locked storage cabinet, to which only the researcher has access. It is possible that findings from this study will be published and/or presented at academic conferences. Your name and identity will not be used in the work; pseudonyms will be used in all writings, publications, and presentations to further protect your confidentiality. At the conclusion of the study, all tapes will be archived in the researcher’s home office in a locked file cabinet to which only the researcher has access. After three years, all interview tapes will be destroyed.

Participation in this interview is voluntary. If you do not want to be in this study, you do not have to participate. Even if you decide to participate, you are free not to answer any question or to withdraw from participation at any time without penalty. Furthermore, you may interrupt to ask questions concerning the research or research procedures at anytime. If you have any questions about this research interview after the interview, please feel free to contact Taeeun Kim at (xxx) xxx-xxxx or tkim6@luc.edu. You will also be provided with a copy of this consent form.

Even though there are no foreseeable risks involved in participating in this research beyond those experienced in everyday life, there might be a minor risk that you will feel negative emotions such as shyness or shame. If this occurs, the researcher will do her best to make the interviewees feel comfortable and make them have confidence in the researcher. You will be compensated 20,000 Won ($20.00) at the conclusion of the initial in-person interview.

If you have any questions about this research study, you may contact the researcher, Taeeun Kim of Loyola University Chicago, or the researcher’s faculty advisor, Dr.
William French of Loyola University Chicago. If you have questions about your rights as a research participant, you may contact the Loyola Office of Research Services at (773) 508-2689 or IRB@luc.edu

Your signature below indicates that you have read the information provided above, had an opportunity to ask questions, and agree to participate in this research study. You will be given a copy of this form to keep for your records.

Participant’s Signature _____________________________ Date _________________

Researcher’s Signature _____________________________ Date _________________
APPENDIX D

CONSENT FORM, KOREAN
인터뷰 동의서

논문 제목: 한국 가톨릭 여성 신자들의 경험을 통해 바라본 피임에 관한 로마 가톨릭 교회의 발전된 가르침을 향하여
조사자: 김태은
지도교수: Dr. William French

본 인터뷰는 미국 시카고 로욜라 대학교 박사과정 재학중인 김태은 학생의 박사논문을 위한 프로젝트의 한 일환으로 이루어질 예정입니다. 이번 프로젝트를 통해 한국 가톨릭 여성 신자들의 결혼생활, 가족계획, 성생활, 피임, 성에 관한 교회의 가르침에 대한 그들의 생각과 의견, 그리고 종교생활들에 관해 듣고자 합니다.

인터뷰는 일대일 개인적으로 이루어져야 할 예정이며, 60-80 분 정도의 시간이 소요될 것입니다. 인터뷰 내용은 음성 녹음을 할 예정입니다. 녹음된 테이프는 조사자 한명만 관리할 것이고, 개인 신상정보, 프라이버시, 익명성은 절대적으로 보장되어질 것입니다. 인터뷰 이후 모든 자료들 안에서의 가명이 사용될 것입니다. 이번 프로젝트가 끝난 후 녹음을 해도 되고 인터뷰에 관련된 모든 자료들은 폐기 되어질 것입니다.

만약 인터뷰에 응하신 이후에, 인터뷰 도중 대답하시기 힘든 질문이나 부담스러운 부분이 있다면 말씀하지 않으셔도 됩니다. 또한 인터뷰 이후에도 언제든지 조사자에게 하실 말씀이나 질문 또는 부탁하고 싶으신 말씀이 있으시면 언제든지 연락을 주십시오. 이 인터뷰 동의서의 사본은 인터뷰 대상자에게도 부여될 것입니다.

인터넷 도중 이나 이후에도 인터뷰 대상자께서 개인적인 프라이버시 측면에 있어서 전혀 걱정이나 염려하지 않으시도록 조사자는 최선을 다할 것입니다. 인터뷰가 끝나자 마자, 2만원의 사례금이 지급되어질 예정입니다.

조사자와 연락하실 일이 있으시면 언제든지 연락을 주십시오.
Tel: xxx-xxx/ 이메일: XXXX
시카고 로욜라 대학교 인터뷰 조사 관리 사무실: IRB@luc.edu 또는 Tel: 1-773-508-2689

인터넷 대상자 서명: ______________ 날짜: __________

인터넷 조사자 서명: ______________ 날짜: __________
APPENDIX E

INTERVIEW PROTOCOL
Interview Questionnaire

Demographic/Marital

1. What pseudonym would you like me to use?
2. How old are you?
3. How long have you been in married?
4. What is your and your husband’s occupation?
5. Do you have children? How many?
6. Were you raised Catholic? Or how long have you been Catholic? And how about your husband?

Contraception-specific

1. Have you or your husband used contraception?
2. What kind of contraceptives you and your husband used?
3. What is the reason for using contraception?
4. What is the main reason you chose the type of contraceptives?
5. Do you know the fact that some contraceptives are abortifacient methods (IUD and the Morning After Pill)?
6. When do you think life begins?
7. What was the most important factor for family planning to you and your family?
8. Do you know the fact that the Catholic Church is against artificial contraception and the Church allows using only Natural Family Planning (rhythm method) for birth control?
9. What do you think about the Church teaching?
10. Have you ever taken a Marriage Preparation Course in the Catholic Church or an organization related to the Church?
11. If yes in #10, did you learn about NFP in the course?

Marital Sex

1. Can you tell me about your sex life with your husband?
2. How would you describe the meaning of sexual relations with your husband?
3. When you had sexual relations with your husband, have you ever had a fear or a worry or frustration of pregnancy?
4. The Catholic Church gives a definition that the conjugal act has two meanings, “the union of a couple” and “procreation.” Regarding the unitive and the procreative meanings of the conjugal act, which one would be a primary purpose of your sex life?
5. Besides the two meanings, do you have any significant reasons for your sexual intercourse with your husband?
6. According to the Church, whenever you have a sexual intercourse with your partner, your conjugal act should be open to procreation potentially. What do you think about it?

**Faith**

1. How much do the Church teachings affect your daily lives?
   a. Specifically, “when” and “for what”?
   b. How about for your sexual life?
2. How would you describe the relationship between “your faith” toward God and the Church teachings?
3. Are you willing to follow the Church teaching regarding contraception?
APPENDIX F

DEFINING TERMINOLOGY
Contraception

Sometimes, the terminology “contraception” and “birth control” are used interchangeably. Strictly speaking, however, there is an important distinction between them. While contraception means “birth control methods that have prevention of conception (fertilization of an oocyte or egg by a spermatozoon) as their primary birth control action,” birth control means “any method used to prevent birth, including contraceptives, contragestives, and chemical or surgical abortion after implantation.”¹ In short, contraception is one method of birth control. In this dissertation, I define the following birth control methods as “artificial” methods of contraception: oral contraceptives (the pill), subdermal implants (such as Norplant), injectables (such as Depo-Provera and NET-EN), condoms for both males and females, diaphragms, cervical caps, contraceptive sponges, spermicides, IUDs, and postcoital forms of contraception (such as the Morning After Pill).

The last two types, the IUD and the Morning After Pill (Plan B)², are ethically controversial because while they may function contraceptive, they may also function as


² Judy Peres and Jeremy Manier, “Morning-after pill’s not abortion, scientists say,” Chicago Tribune, June 20, 2005, accessed September 10, 2010, http://articles.chicagotribune.com/2005-06-20/news/0506200177_1_emergency-contraception-morning-after-pill-regular-birth-control-pills. According to this article, “Whether emergency contraception, known as Plan B, works before or after fertilization is a crucial question only for those who believe life begins when sperm meets egg… Last July, a review of the scientific literature by experts at the Karolinska Institute in Stockholm concluded that the contraceptive effects of a one-time dose of levonorgestrel, the active ingredient in Plan B, ‘involve either blockade or delay of ovulation … rather than inhibition of implantation.’… Then, in December, Horacio Croxatto of the Chilean Institute for Reproductive Medicine reported that emergency doses of levonorgestrel interfered with ovulation 82 percent of the time in women who took it. Blood tests on those women showed that the drug suppressed the monthly surge of luteinizing hormone, which triggers ovulation. … Archer, a gynecologist and reproductive endocrinologist, also noted that emergency contraception generally doesn’t
an abortifacient, which means “an agent that produces an abortion.”

While other contraceptives prevent conception or fertilization, interceptive or contragestive methods (the IUD and the Morning After Pill) have a possibility of preventing transport of a conceptus (the product of conception) and/or implantation of a conceptus in a woman’s uterus after fertilization.

The debate regarding whether interceptive or contragestive methods are contraceptives or abortifacient hinges on the ethical and/or medical question of when life begins or when pregnancy commences. On the one hand, many in the Roman Catholic Church and many “pro-life” advocates define the start of life or pregnancy at conception or fertilization and they also believe that human personhood starts at that point. To them the IUD and the Morning After Pill should be termed abortifacients, because the methods may intervene after conception to prevent implantation of the fertilized egg.

On the other hand, there are various perspectives among physicians, ethicists, and the pro-choice movement on this question. Some physicians and pro-choice advocates define pregnancy as starting when the blastocyst (pre-embryo) implants itself to the uterine wall. It means that pregnancy occurs about a week (five to twelve days) after fertilization begins. A bioethicist and a Catholic Salesian priest, Norman M. Ford, argues in his book, *When did I begin?* that he cannot regard the pre-14-day embryo as a human work if it's given after ovulation, around the 14th day of the woman's menstrual cycle. …Anti-abortion doctors and lay activists argue that the Plan B pill doesn't always block ovulation, which would allow fertilization to take place. In such cases, they say, the pill would abort the early embryo--probably by causing changes in the uterine lining. …Some doctors opposed to Plan B on moral grounds now concede that it appears to work primarily by stopping ovulation…”

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individual because before 14 days after conception genetically human embryonic cells
could not develop into a human individual with a true human nature and a continuing
ontological identity. For instance, before 14 days after conception, there is a possibility of
two embryos or more such as identical twining, thus prior to 14 days after fertilization it
would seem to be unreal to speak of the presence of a distinct human individual. Even
though today’s Catholic Church affirms the beginning of human life at the moment of
fertilization (since the Second Vatican Council), historically the Catholic Church
accepted the view that the soul was not present until after the first few weeks. In other
words, the embryo was not a human being until several weeks after conception. For
instance, in the Middle Ages, the Roman Catholic Church’s greatest philosopher and
theologian, Thomas Aquinas argues that the conception of the male child is not
completed until the fortieth day, while that of the female child lasts until the ninetieth
day. To Aquinas, the unity of the soul (the intellective or rational soul) and the body is
required to complete the formation of a human being.

Thomas A. Shannon, an American Roman Catholic ethicist, argues that human
individuality (personhood) occurs around three weeks after fertilization. His reasons are
two-fold. First, from the blastocyst state to the completion of restriction or gastrulation

4 Ford investigates the theoretical, moral, and biological issues surrounding the debate over the beginning
of human life and he presents both the biological and philosophical point of view and answer with both
scientific evidence and the philosophical concepts of the human being. See Norman M. Ford, When I did
begin?: Conception of the human individual in history, philosophy, and science (New York: Cambridge
University Press, 1991); See also Ford’s book, The Prenatal Person: Ethics from Conception to Birth

5 Ford, When I did begin?, 57-64.

6 Thomas Aquinas, Summa Theologiae, Ia. QQ. 118.
the pre-embryo is capable of dividing into multiple entities such as twins, triplets etc. Implantation occurs about a week after fertilization. “The completion of the restriction (or gastrulation) process, which prevents individual cells from forming another individual,” occurs about three weeks after fertilization begins. So, Shannon argues that personhood and/or individuality as a physical and ontological human reality does not occur until “the completion of restriction or gastrulation,” which occurs about three weeks after fertilization. Second, biologically the fertilized egg can have a potency for neural development only about after three weeks after fertilization, and theologically, it would seem reasonable to conclude that a nervous system is required for immaterial individuality (traditionally known as ensoulment), which has been considered as a prerequisite for personhood in Catholic teaching throughout history.

I concur with Shannon that life begins not at the moment of conception, but at the moment of the implantation of the fertilized egg (between five and twelve days). Thus, in my mind, the IUD and the Morning After Pill can reasonably be considered contraceptive techniques because they work prior to the conclusion of the implantation of the fertilized egg. Therefore, I deal with interceptive or contragestive methods (the IUDs and the Morning After Pill) as contraceptives along with other forms of artificial contraception in this dissertation.

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8 Ibid., 603-626.
Natural Family Planning (NFP)

The terms “Natural Family Planning,” “periodic abstinence,” “fertility awareness,” and “rhythm method” are used interchangeably in this dissertation. According to one definition, “Natural Family Planning (NFP) is a general term that applies to various methods that have been developed to help women and men determine the fertile and infertile times of a woman’s menstrual (monthly) cycle. These methods can be used to achieve or avoid pregnancy. All of the methods rely on the interpretation of natural (biological) signs of fertility. The basic assumption of NFP methods is that couples abstain from intercourse and genital contact during the fertile time of the woman’s cycle if they are avoiding pregnancy. Use of any artificial means to interfere with fertility is not natural family planning.” ⁹ There are five basic methods of Natural Family Planning: Calendar Based Methods, Basal Body Temperature, The Ovulation Method, The Sympto-Thermal Method, and the Hormonal Fertility Monitoring. ¹⁰

_Humanae vitae (“On Human Life”) _drew intense attention to it understanding that these methods cohere with the order of natural cycles of fertility and thus correspond to the natural law and accordingly are morally licit or permissible. This sharp drawing of the line between the permissibility of Natural Family Planning and the so-called

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¹⁰ Ibid., according to the web article, “Calendar Based Methods” relies on counting cycle length and use of a simple formula to determine the beginning and end of fertility; “Basal Body Temperature” employs recording of the woman’s daily waking temperature and observing the changing patterns; “The Ovulation Method” involves observing and recording the patterns and changes of cervical fluids; “The Sympto-Thermal Method” consists of combining daily waking temperature, changes in cervical fluid, cycle length and other minor signs of fertility; “Hormonal Fertility Monitoring” uses ovulation test kits and electronic fertility monitors to measure reproductive hormones in the urine.”
“artificial birth control” methods that in Pope Paul VI’s reasoning artificially obstruct a natural process lies at the core of the on-going heated debates across the world’s Roman Catholic community — all one billion of us — regarding birth control and population growth issues.
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VITA

Taeeun Kim received a Bachelor of Arts degree from the Catholic University of Korea, where she majored in Religious Studies. She holds a Master of Arts degree from the Catholic University of Korea, where she majored in Catholic Theology. Her professional interests include Roman Catholic moral theology, Christian ethics, sexual ethics, biomedical ethics, health care ethics, and theological ethicist feminism.