THE ETHICS OF CONTRACEPTION: A CRITIQUE OF THE “CONTRALIFE THESIS”

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DECLARATION

I, the undersigned, declare that this project is my original work and that it has not been presented in any other University or institution for academic credit.

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ABSTRACT:

This study set out to investigate whether the argument presented by the advocates of the contralife thesis that artificial contraception is morally unacceptable because it’s “contralife” always and everywhere, and that natural family planning (NFP) is morally acceptable because it is “not contralife” is philosophically viable. The main focus of the study was to discount the moral argument presented by Grisez, Boyle, Finnis, May, Smith and Anscombe on the moral difference between artificial contraception and NFP. Their argument is that artificial contraception is contralife because it is an active choice of preventing conception and that NFP is not contralife because it is a passive choice of preventing conception.

Using deontology ethics which focuses more on the moral rightness of intentions that drive acts, this study has demonstrated that there is no moral difference between NFP and artificial contraception. Deontologists argue that humans by their very nature are moral agents and are guided by a will or intent in making a choice. The choice of either natural or artificial methods of contraception may be morally good or morally bad depending on the intent of the actor. In our analysis, we have established that both artificial and natural methods of contraception are chosen out of inclination that conception does not occur. They are thus both active acts of contraception and both involve choices and intentions. The study findings indicate that the contralife argument that artificial contraception is necessarily evil because it involves the act of “doing” to prevent the beginning of a life of a possible person and that NFP is not evil simply because it involves the act of “not doing” to prevent the beginning of a life of a possible person is morally flawed.

The study therefore concludes that none of the two methods is morally better than the other and either can be used as an acceptable method of contraception.
DEDICATION

This study paper is dedicated to Virginia, Francis Mwongela, my mum, dad, brothers and sisters for their immense support and encouragement. This is for you.
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DEFINITION OF TERMS

1. **Natural law**: The unwritten body of universal moral law principles that underlie the ethical norms by which human conduct is sometimes evaluated and governed.

1. **Natural law theory**: In this study it’s a moral theory which commands people to do good and avoid evil. What is good and evil, according to Aquinas (Aquinas 1274), is derived from the rational nature of human beings. Good and evil are thus both objective and universal.

2. **Contraception**: “Contraception” is a deliberate way, method or choice (natural or artificial) that prevents conception.

3. **Intention**: A situation where an agent deliberately or freely cause an action to take place.

4. **Contra-life Thesis**: It holds that artificial contraception is in itself always and everywhere morally wrong since it involves a choice to impede new human life. It is normally associated with (or its chief proponents include) Germain Grisez, John Finnis, Joseph Boyle, and William E. May among others.
LIST OF ACRONYMS

HV: Humanae Vitae
NFP: Natural family planning
HVGL: Humanae Vitae, a Generation Later
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CHAPTER ONE
GENERAL INTRODUCTION

1.1 Research Background

Most of the available literature on ethical arguments about contraception is based on the natural ethical theory following the teachings of Thomas Aquinas, who was largely influenced by Aristotle’s philosophy (Grady 2001). Aristotle’s view was that every object in the physical universe possesses an intelligible structure, a form that is composed of an intrinsic end and the means to realize that end (Ramsey 1994). Aquinas believed that the intrinsic end of all sexuality is procreation. If that intrinsic aim is subverted either by substituting pleasure for procreation as the aim or by introducing artificial devices or means to prevent procreation, then sexuality violates God’s natural law and is sinful (Voss, 2012).

The Catholic position on contraception is influenced by the natural law theory of Aristotle and Aquinas, which deems that sexuality has as its end purpose as procreation and to interfere in this end would be a violation of the natural law, and thus, a sin. This view is maintained by some Anglicans, Evangelicals, Christian fundamentalist denominations and philosophers like Karol Wojtyla, Elizabeth Anscombe, Virginia Held, Grisez, John Finnis and Janet Smith among others. The Catholic Church sanctions only the Natural Family Planning method (NFP) as suitable techniques for birth control (Smith 2000).

Immanuel Kant on the other hand believed that certain misuse of one’s sexuality constitute “criminacarnis contra natrum” (crimes against nature). Morality according to Kant applies to all rational beings, and a moral action is defined as one that is determined by right reason, not by our sensual impulses. Because an action is moral on account of its being reasoned, the moral worth of an action is determined by its motive, or the intent behind the action, not by its
consequences. Therefore the use of natural family planning (NFP) and artificial contraceptives as methods of regulating birth may be both contrary to nature since they have the same intention or motive following the ethics of Kant (Infield 1963, p341).

On her part Elizabeth Anscombe (1981), notes that the sexual act as a physical act is open to procreation if it is intrinsically generative. A sexual act in which the couple uses artificial method is not intrinsically generative and a certain difference in intentions can be noticed. There is a difference in the intention to intervene into the sexual intercourse by using artificial devices that can prevent pregnancy and the intention to use the rhythm method to prevent pregnancy. She argued that, even if behind both artificial and natural methods there is the same desire and intention to avoid conception and pregnancy, only artificial methods need to be forbidden. She further argues that active intervention in sexual intercourse makes a morally relevant difference between the allowable act and the improper act. When a couple uses contraceptives, the intention of avoiding conception is an integral part of the sexual act. At the same time, the same intention is only furthered in the case of relying on natural methods (Anscombe 1981). However, no matter how we interpret Anscombe words, it seems that any conscious and intentional prevention of conception (natural or artificial) equally disregards the spirit of openness to procreation.

With the increase in use and acceptance of contraception in modern society, even among averred Catholics, there appears to be a greater need for clear and sound argumentation as to the morality of contraception. It is to this end that Germain Grisez, Joseph Boyle, John Finnis and William E. May wrote their famous article, “Every Marital Act Ought to be Open to New Life: Toward a Clearer Understanding” in the July, 1988 edition of The Thomist (Grisez et al. 1988).

The principle thrust of their article was to argue that artificial contraception is morally evil primarily because it is “contralife” and that Natural family planning is not “contralife.”
The contralife argument showing that artificial contraception is morally evil is formulated in the following manner:

1) Artificial contraception always involves the intention that a prospective life ought not to begin.
2) Artificial contraception is a choice which is contrary to reason.
3) Choices which are contrary to reason are morally evil.
4) Therefore, artificial contraception is morally evil always and everywhere.

On the other hand the contralife theorists argue that Natural family planning is tolerable since:

1) Natural family planning (NFP) does not involve the intention that a prospective life ought not to begin.
2) NFP is not contrary to reason.
3) Choices which are not contrary to reason are not morally evil.
4) Therefore, NFP is not morally evil.

If artificial contraception is wrong, according to the contralife argument because it is contralife always and everywhere, and if NFP is to remain morally non-blameworthy, then NFP and contraception must significantly differ with respect to future possible life. This difference, however, has not been successfully shown. The difference, according to Grisez, Finnis, May and Boyle is that NFP is not an action which prevents conception; rather, it is a passive acceptance of the effect, namely, no conception. But to consider abstinence merely as a passive acceptance of effects is incorrect, for abstinence cannot always be considered simply as “not doing”. In NFP, it is an active disruption of an otherwise regular (and possibly life-giving) sexual routine.

1.2 Statement of the Research Problem

The contralife argument against artificial contraception is that the latter is always and everywhere morally wrong because it involves a contralife choice to impede new human life. In simple terms, for contralife theorists, artificial methods are morally wrong, natural methods are morally good. This study therefore sought to address the following issues that arise from the contralife thesis: (1) That, the contralife argument seems to fail to show adequately what is wrong with impeding new human life, this is because the choice is present in NFP as well as in artificial contraception which they judge as morally wrong. If the choice and intention is acceptable when NFP is chosen, why do the contralife theorists condemn artificial contraception in which the intention and choice is the same? (2) The contralife argument that NFP is not an action which prevents conception rather it is a passive acceptance of the effect, namely, no conception. Finally, (3) how to determine using the contralife argument the moral character of artificial contraceptive use for non-contraceptive reasons e.g. for medical reasons to prevent sexually transmitted diseases and for pleasure?

Our study findings indicate that the proponents of the contralife argument are mistaken in arguing that there is any significant moral difference between NFP and artificial contraception and that the intention and choice involved is different. NFP may not be a “passive action” as the contralife theorists argued but an active disruption of an otherwise regular and possibly life-giving sexual routine. “NFP is not an action which prevents conception; rather, it is a passive
acceptance of the effect, namely, no conception” (May 1990, p224). In any form of contraception whether natural or artificial, the intention and choice is to impede the baby's coming to be as a means to an end, which is to realize the goods which accompany the choice to use artificial contraception and/or to avoid the evils which would accompany not choosing to use contraception.

Therefore “not doing” cannot be the significant attribute which distinguishes the artificial contraceptive act from the non artificial contraceptive act because the so called “contraceptive NFP” would then be equated with non-contraceptive NFP on the grounds that it also is a “not doing.” This, however, would be a contradiction, for “contraceptive NFP” would then be non-contraceptive NFP. “Contraception, by definition, is a choice to do something to prevent the beginning of a life of a possible person. Yet, NFP is defined as simply to abstain, or not do something” (May 1989). Therefore the conclusion by Grisez et al that artificial contraception is morally evil because it is “contralife,” seems, prima facie, to be counter-intuitive. Therefore the contralife argument that artificial contraception is necessarily evil because it involves the act of “doing” to prevent the beginning of a life of a possible person and that NFP is not evil simply because it involves the act of “not doing” to prevent the beginning of a life of a possible person is morally flawed.

1.3 Objectives of the Research

The main objective of this study was to access and analyze the moral viability of the arguments on the moral difference between artificial contraception and NFP. Specifically, this study sought to:

1. Demonstrate that both NFP and artificial contraception involve the intention and choice to impede new life, hence there is no moral difference between the two.
2. Demonstrate that artificial contraception by its very nature does not always aim at impeding new human life.

3. Examine the morality of artificial contraception.

1.4 Research Questions

1. Does the contralife argument reveal what is morally wrong with impeding new human life through artificial contraception?

2. Is the morality of contraceptives solely determined by how it prevents or fails to prevent potential new life?

3. How do we determine using the contralife thesis the morality of artificial contraceptive use for non-contraceptive reasons e.g. for medical reasons to prevent sexually transmitted diseases and for pleasure?

4. Is there any significant moral difference between the intention involved in artificial contraception and natural family planning?

1.5 Justification and Significance of the Study

The contraception choice is morally controversial. Most arguments which have been advanced seem to conclude that artificial contraception is different from NFP because it is contralife and that artificial contraception is always and everywhere morally wrong. The contralife theorists have however failed to significantly demonstrate why they prefer NFP to artificial contraception.

The argument that artificial contraceptives are always wrong and everywhere because they are contralife excludes those who prefer contraceptives for other reasons. Other than procreation more challenges come through the practice of sexual activities like sexually transmitted diseases (HIV, AIDS and others). On the other hand sex may be practiced for pleasure even during pregnancy when procreation is impossible. These practices among others have not been
addressed by the proponents of the contralife thesis. The natural law theory employed is inadequate because it is based on the nature of man and things not on the intention of a given choice (the choice to contrasect). To analyze the distinction or the relationship between NFP and artificial contraception, and whether contraception (artificial or natural) is morally right or morally wrong the ‘contralife thesis’ need to be revised. Therefore, the study sought to employ a different view in order to revise the contralife thesis in an attempt to demonstrate whether there is any moral difference between artificial and natural contraception.

1.6 Scope and Limitation

The study focused on the debate and ethical issues around contraceptive (natural and artificial). The main concern was to analyze whether there is a significant moral distinction in the choice of either natural or artificial contraception. In particular, this work focused on the supposed moral valuation by contralife proponents, that it is morally wrong to use artificial means, because these actively impede new life, whereas the natural method seems to be morally right simply because it doesn’t involve ‘active’ impediment of life. The study sought to evaluate the precise sense in which they use the term ‘contralife’ in regard to artificial contraception and NFP. It is this aspect which was brought under closer scrutiny.

The study employed the works of ethical philosophers on sex and researchers in the area of sexual ethics and contraception.

1.7 Literature Review

The total prohibition of artificial birth control methods by the Roman Catholic Church, declared by Pope Pius XII in his 1930 encyclical, Casti Connubii states: “No reason, however grave, may be put forward by which anything intrinsically against nature may become comfortable to nature
and morally good. 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” (Smith 2000).

According to St. Thomas Aquinas, it follows, that depositing the sperm elsewhere other than inside a human female’s vagina is unnatural: it is a violation of God’s design, contrary to the nature of things as established by God. For Aquinas the purpose of sexual activity and the sexual organs in humans was procreation, as it is in the lower animals. Everything else in Aquinas’ sexual philosophy follows more-or-less logically from this. (Aquinas 1274, vol. 43, 148-154). Aquinas theory seems to emphasize more on procreation than the unitive aspect. Our argument in this study is that both aspects are equally important and a theory which regards both may be necessary.

Pope Paul VI (1968) insists that the conception of natural law in *Humanae Vitae* contains a deterministic understanding of human marital and sexual life. In his works he argued that any and every intervention in the biological processes of human beings constitutes a violation of God’s law for humanity (*Humanae vitae* 1968, 14).

Section 18 of *Humanae Vitae* (1968) states: “Since the Church did not make either of these laws, she cannot change them. She can only be their guardian and interpreter; thus it would never be right for her to declare as morally permissible that which is truly not so. For what is immoral is by its very nature always opposed to the true good of Man.” “Contraception as a practice is all things considered, in conflict with human welfare, both with altruism in deed and with altruism in motive and therefore it is unethical. Contraception leads to harmful depopulation.” Paul VI on
the other hand refers contraception to the inseparability of the unitive and procreative meanings of intercourse (Pope Paul VI 1968, 15-18).

Pope John Paul II (1981) contends that the deliberate attempt to prevent conception by artificial means entails a refusal to accept this possibility; artificial contraception is immoral and violates the personalistic norm—this shows that man dominates nature not by "violating its laws" but "through knowledge of the purposes and regularities which govern it." His principal claim seems to be: "Acceptance of the possibility of procreation in the marital relationship safeguards love and is an indispensable condition of a truly personal union. The union of persons in love does not necessarily have to be realized by way of sexual relations. But when it does take this form the personalistic value of the sexual relationship cannot be assured without willingness for parenthood." Indeed, he claims, "If there is a positive decision to preclude this eventuality sexual intercourse becomes shameless." Consequently, the only solution to the problem regarding the legitimate regulation of birth within marriage according to John Paul II is continence, which demands control over erotic experiences. He then stresses that the only morally correct method is the natural means of birth control (which is not contraceptive), used not as a mere technique but as an exercise of the virtue of continence (Wojtyla 1981, 228-233). Here John Paul II seems to agree with the proponents of the contralife thesis (Anscombe, Smith, Grisez, Boyle, Finnis and May) though with the introduction of the term continence and differentiates contraception and NFP but nevertheless the natural law theory he employs is defective.

John Paul II in George Weigels’ biography (1983) defended the church’s position from philosophical standpoint. He argued that “men rightly observe that a conjugal act imposed on one’s partner without regard to his or her condition or personal and reasonable wishes in the matter is no true act of love, and therefore offends the moral order in its particular application to
the intimate relationship of husband and wife. Hence the use of divine gift while depriving it, even if only partially, of it is meaning and purpose, is equally repugnant to the nature of man and woman and is consequently in opposition to the natural plan of God and His holy will. But to experience the gift of married love while respecting the laws of conception is to acknowledge that one is not the master of the sources of life but a minister of the design established by the creator” (Weigel 1981, 49). This also raises a question whether NFP do respect the law of conception. Avoiding sex during fertile period and using barrier methods logically and morally has no difference if the intended goal is to prevent conception.

It is evident that artificial contraception (as also NFP) can be subjectively contralife. Paul II speaks in Evangelium Vitae of what is perhaps most likely to underlie this, saying that “contraception and abortion are often closely connected, as fruits of the same tree. In very many instances such practices are rooted in a hedonistic mentality unwilling to accept responsibility in matters of sexuality, and they imply a self-centered concept of freedom, which regards procreation as an obstacle to personal fulfillment. The life which could result from a sexual encounter thus becomes an enemy to be avoided at all costs, and abortion becomes the only possible decisive response to failed contraception” (Paul II 1995, 12-14). It might be added that the very actualization of contralife selfishness by the practice of contraception could probably exercise it, so to speak, making it a stronger disposition, and so make people more accepting of its more radical actualization in abortion.

Balthasar (1984) writes: "And there is all the difference in the world between utilizing one's awareness of the periods of infertility, and arrogating to oneself the right to impose radical restrictions on fertility by the use of artificial contraception. For in using the infertile days they are not setting bounds to their love. Otherwise, one would have to say that intercourse in the full
Christian sense is impossible after a woman's change of life. Married persons who think as Christians set no barriers between the two objects of marriage: procreation and the expression of mutual love. They let the two stands together, the physical side with its own proper laws, and the personal side. One's awareness of the opportunities provided by nature does not mean that one is imposing calculation on the inner spirit of love." (Balthasar 1984, p72-3) Let us notice that when von Balthazar says "For in using the infertile days they are not setting bounds to their love" he supports this statement by invoking not the essentialistic tradition, but the existential one in terms of the use of the conjugal act after menopause. It is clear that married people who practice rhythm do set barriers between procreation and mutual love. That is the whole point of the exercise. And "opportunities provided by nature" should not be taken as "opportunities provided by nature to have non-physically procreative sexual intercourse" because then we cannot assert procreation and mutual love must always stand together.

Hildebrand (1969) condemns artificial contraception in this way: "The sinfulness of artificial birth control is rooted in the arrogation of the right to separate the actualized love union in marriage from a possible conception, to sever the wonderful, deeply mysterious connection instituted by God" (Hildebrand 1969, p35).

Then he goes on to try to distinguish this situation from rhythm:

"This irreverence, however, is exclusively limited to active intervention severing the conjugal act from its possible link with procreation. "The conjugal act does not in any way lose its full meaning and value when one knows that a conception is out of the question, as when age or an operation for the sake of health, or pregnancy excludes it. The knowledge that a conception is not possible does not in the least taint the conjugal act with irreverence. In such cases, if the act is an expression of a deep love, anchored in Christ, it will rank even higher in its quality and purity than one that leads to a conception in a marriage in which the love is less deep and not formed by
Christ. And even when for good and valid reasons conception should be avoided, the marital act in no way loses its raison d'etre, because its meaning and value is the actualization of the mutual self-donation of the spouses. The intention of avoiding conception does not actively interfere in order to cut the link between the conjugal act and a possible conception. "Nor is the practice of rhythm to avoid conception in any way irreverent, because the existence of rhythm - that is to say, the fact that conception is limited to a short period - is itself a God-given institution" (Hildebrand 1969, p37-8). Again we notice how arguments based on the existential tradition appear, intercourse during pregnancy and it is not clear why in contraception the couple cannot will the "actualization of the mutual self-donation of the spouses." Nor is it clear in what way we can call the existence of rhythm "a God-given institution". In a later section von Hildebrand amplifies this last thought: "...it is definitely allowed expressly to avoid conception when the conjugal act takes place only in the God-given infertile time - that is, only by means of the rhythm method and for legitimate reasons. We see that only during relatively brief intervals has God Himself linked the conjugal act to the creation of a man. Hence the bond, the active tearing apart of which is a sin, is realized only for a short time in the order of things ordained by God Himself" (Hildebrand 1969, p47). We may respectfully ask, did God decide in 1930 that He would finally make this institution known through Ogino and Knaus so men could find His will in calculations of time and temperature? And did He decide to make it known in the rather unsuccessful calendar rhythmic form? And did He decide that for many couples He would make it very difficult to really know how to make use of His institution because of irregular cycles?

Brian Shanley (1987) wrote: "What distinguishes an act of contraceptive intercourse from an act of non-contraceptive intercourse is that the former involves the choice to do something before, during, or after the act which destroys the possibility of conception precisely because it is believed that such a choice will indeed negate the possibility of conception." (Shanley 1987,
And a little later, "The act of contraception embodies the intention of avoiding conception and so makes the coital act a different kind of act (anti-generative) from that which would result if that intention were not operative" (Shanley 1987, p51). Then he distinguishes this contraceptive act from natural family planning: "Non-contraceptive intercourse reveals a different structure. It is an intrinsically generative kind of act both physically and intentionally. There may be a further intention to avoid conception as could be the case in NFP, but the act itself does not embody the present intention to avoid conception as is the case when there is interference by artificial birth control. When the author says, "the further intention to avoid conception does not cause infertility since the act is found to be infertile on its own" (Shanley 1987, p51), we might note that in actual fact the act is infertile, but this is different from saying nature intends the act to be infertile so we can use the conjugal act in a way it will be infertile. The days that are infertile in a woman's cycle are days in which nature is working diligently to prepare the egg and move it to the proper place and after the fertile days remove it so a new egg can be prepared. Should we call these days devoted to preparing for fertility days which nature intends to be infertile, as if she wants to thwart her procreative designs, or should we call them days which are accidentally infertile because of the nature of human fertility?

Sex, says Kant, “makes of the loved person an Object of appetite taken by itself it is a degradation of human nature” (Infield 1963, p384). “For the natural use that one sex makes of the other’s sexual organs is enjoyment, for which one gives oneself up to the other. In this act a human being makes himself into a thing, which conflicts with the right of humanity in his own person” (Kant, 1785, p62). The question we ask Kant is whether sex is to be avoided by all means? Virginia Held also holds that a person who proposes an irresistible sexual offer to another person may be exploiting someone made weak by sexual desire, (Held, 1972, 58).
Grisez locates the evil of artificial contraception in its “contralife character.” He holds that the act of contraception is contralife by definition: “Contraception can be defined only in terms of the beliefs, intentions, and choices that render behavior contraceptive. To contracept one must think that (1) some behavior in which someone could engage is likely to cause a new life to begin, and (2) the bringing about of the beginning of new life might be impeded by some other behavior one could perform. One's choice is to perform that other behavior; one's relevant immediate intention which may be sought for some further purpose is that the prospective new life not begins." He state further that “Since contraception must be defined by its intention that a prospective new life not begin, every contraceptive act is necessarily contralife” (Grisez et al., 1988, p. 370).

In their book Beyond the New Morality, Grisez and Shaw speak of “the good of life” in the following manner: The goods themselves are not abstractions, existing “out there” beyond us and other people. Rather, they are aspects of human beings, ourselves or others—aspects which either already exist in actuality or have the potential of being realized. To act directly against one of the fundamental goods is therefore to violate an actual or possible aspect of the personhood of a real person or persons: to violate “life” means violating somebody's life for instance means killing or mutilating someone, (Grisez 1989, 132-135).

In his critique to Grisez and May, Grondelski (1995) and Kelvin (1997), argue that NFP involves even more immediately the choice of certain methods which provide a couple with the information needed to time intercourse to avoid fertility. It is not clear that choosing not to have recourse to naturally fertile acts qua fertile, in order to avoid further consequences of fertility, is any less “contralife” than choosing to render a naturally fertile act infertile, to the same end. So if in fact artificial contraception was evil because “contralife,” NFP would also be evil. NFP does,
however, differ from contraception with respect to its relation to the natural potentialities of the acting persons. NFP does not modify these potentialities *vis-à-vis* intercourse as doe’s contraception. Here again is a matter for moral evaluation. (Grondelski, 1995, P13-97)

Finnis (1970) holds that artificial contraception can be considered as an active interference while the rhythm method only makes sexual partners temporary sterile. Finnis emphasizes that procreation and raising children is a basic human good such as, for example, life and knowledge. Finnis raises the question of what actions, according to their causal structure, include a choice that is appropriately open to the fundamental values, and what actions, according to their causal structure, assume a choice against the fundamental values. He, himself, concludes that the choice that excludes the possibility of procreation in a sexual relationship is clearly and unambiguously (there is no requirement for further arguing about Christian values) directly opposite to the basic good (Finnis 1970). From this Finnis’ attitude it could be concluded that the use of any method of contraception is not an option because sexual behaviours should always be open to conception. However, he differentiates the moral statuses of the choices in which someone actively takes steps to prevent procreation from those when they are not taken, but the circumstances are such that it is impossible to conceive.

Smith (1991) argued that Grizez, Boyle, and May understand contraception to be a choice that defines ones act, whereas the tradition considers artificial contraception to be an act that defines ones choices. Grizez understand contraception to be a choice that never ought to be made; the tradition understands contraception to be an act that ought never to be chosen. Grizez and May believe contraception to be evil, wrong, because it entails contralife will; she argues that their understanding of what constitutes the contralife nature of contraception differs considerably from
tradition. In the final analysis, in spite of the many merits of Grisez, Boyle and May's argument, she thinks there argument are strong to the extent that they mimic, albeit very implicitly the very natural law argument against artificial contraception that they seek to replace. They are weak insofar as they depart from the traditional moral analysis (Smith 1991, p 178-179). Though Smith’s challenge to Grisez and May seems valid in terms of act and choice; she seems to be in support of traditional natural law whereas Grisez, Boyle and May support new natural law but both laws (natural law and new natural law) are against artificial contraception. Whether traditional or new the contralife argument appears to be counter intuitive in their approach and this will be the issues which will be clarified in this study.

Heterosexual coitus is the mechanism designed by the Christian God to insure the preservation of animal species, including humans, and hence engaging in this activity is the primary natural expression of human sexual nature. Further, this God designed each of the parts of the human body to carry out specific functions, and on Aquinas's view God designed the male penis to implant sperm into the female's vagina for the purpose of effecting procreation. For Smith, to do otherwise is to violate God’s design. Smith offers a systematic examination of the moral and theological implications of the arguments against the present Catholic prohibition on artificial birth control methods, and argues that the Church ruling on birth control is a logical extension of its traditional teachings on morality and the family (Smith 2000, 14-16). While this is a conservative text that supports the ban on contraception it nevertheless offers the most detailed historical information on the arguments against birth control in the Catholic Church to date and why it supports NFP.

Lowery (2006) together with Smith differ with Grisez, Boyle, Finnis and May. While arguments by Grisez, Boyle, and May are vital, they should follow upon explanations of the intrinsic
difference between artificial contraception and NFP—for artificial contraception is not wrong because it has bad consequences; it has some bad consequences because it is wrong. Likewise, NFP is not right because it has good consequences; it has some good consequences because it is right (Lowery 2006, P341-2). Mark Lowery continuous to argues; in the use of natural family planning, the couple is like the people in our analogy who are headed toward the mysterious mountain, watching for it to appear. They are watching for the “sacred space” to appear, aware that this will be a time either to ascend the sacred interplay between this space and coition, or not to so ascend. They are not so much watching for the “danger zone” or the “unsafe time”—common terminology used by teachers of NFP—as they are watching for a unique time of sacred mystery (Lowery 2006, 346). The question we ask Lowery is whether the consequences alone can determine if an act is morally good?

Mahatma Gandhi in Harijan (1935) said, “When a man and a woman want to satisfy animal passion without having to suffer the consequences of their act it is not love, it is lust. But, if love is pure, it will transcend animal passion and will regulate itself. Love become lust the moment you make it a means for satisfaction of animal needs—why must people be slaves of passions?” Sanger’s argument is different; she agrees with Gandhi that sex expression is a spiritual need but claim that the quality of this expression is more important than the result, for the quality of the relationship is there regardless of the result (Harijan 1935, 48).

Härning (1993) argues that Humanae Vitae marks an advance over earlier teaching by its acknowledgment of the true meaningfulness of the marriage act even when childbirth is not desired as with the NFP method, but it remains adamant in the assertion that a marriage act bespeaks genuine love only when biological laws and rhythms are fully observed and respected (Härning 1993, 153-67).
However, Noonan asks, “Was the commitment to an absolute prohibition of artificial contraception more conscious, more universal, more complete, than to . . . now obsolete rules against intercourse in menstruation, intercourse in pregnancy, and intercourse in other than the ‘natural’ position?” (Noonan 1986, 550)

This review forms the basis of this study; the study will seek to analyze and make clarification of the issues raised by the philosophers mentioned and others to be employed in the study whether they are morally right and later draw a conclusion based on the stated hypothesis. From this literature review it comes out clear that NFP and artificial contraception are positive acts since they involve active means of preventing conception. Therefore, those who practice NFP method cannot be said to be practicing a passive choice or ‘not to be doing something’. NFP and artificial contraception by definition are active prevention strategies to the transmission of life and their intention involves both means and ends of making procreative potential impossible. Therefore these two acts of contraception (natural and artificial) may be against the good of life and can be said to be contralife. This means that there is no significant moral difference between artificial contraception and NFP. The argument therefore, by the contralife theorists that there is a moral difference between NFP and artificial contraception may not true. The study will confirm this.

1.8 Research Hypotheses

This research set out to consider the following hypothesis

1. There is no significant moral difference between artificial contraception and natural family planning.

2. Both artificial contraception and natural family planning involve the intention and choice to impede new life.

3. Artificial contraception is not always and everywhere contralife.
1.9 Theoretical Framework

To achieve the stated study objectives, this study used the deontology ethics. Deontology ethics is non-consequentialist and judge actions to be right not based on their consequences, but on the intention or motive of the actor. The choice to use contraceptives (natural or artificial) is either good or bad on deontological terms regardless of whether the actions bring good results or bad results. With this theory, the means is not what matters but the intention of the actor. Therefore behind the two acts of contraception (artificial and NFP) lies an intention of preventing conception. If the intention of contraception is to prevent conception and if preventing conception is not morally wrong in NFP then, the act of artificial contraception is not morally wrong using deontology ethics.

Humans are autonomous agents and have a free will to choose actions which are in conformity with right reason. This is contrary to the natural ethical theory which state that humans are animals and as such are governed by certain natural drives and instincts, for example to eat, drink, sleep, procreate and survive. Immanuel Kant, a key proponent of deontology ethics believes that humans are guided by a will, an intention or a motive to act. Contraception therefore, whether by use of natural or artificial methods may be morally good or morally bad depending on the intent of an actor. Thus, according to the deontology ethics, if the intended goal to contraception is to prevent conception, then NFP as well as artificial contraception have a contralife will. All actions that prevents conception therefore have a ‘contralife will’ following the ethics of Kant.

Deontology ethics places a great deal of stress on the intention behind the action, something completely overlooked by consequentialist ethics. Morality is an obligation to all moral agents at all times and everywhere. An act has a moral worth if and only if it; (1) is done out of respect for
moral law, (2) is not performed merely from inclination regardless of whether or not the inclination be selfish or benevolent and, (3) is performed from respect for the moral law. The contraceptor who out of inclination does not want to have a child is not morally worth. On the other a contraceptor who is not inclined to some further good is morally worth. Deontology ethics was therefore the best suited theory to demonstrate that, since NFP and artificial contraception are chosen out of inclination that conception does not occur, and then they are both contralife. Hence, the contralife theorists are mistaken to draw any moral difference between the two.

1.10 Research Methodology

The study relied mainly on library research to collect secondary data. The study was expositional and analytical in its approach. Using the expositional approach it brought to fore the contralife thesis and the various responses in ethics especially on NFP and artificial contraception. Using the analytical approach, the study critically established the claims brought forward by the various natural law theorists to establish the extent to which they address the issue of contraception. The study employed conceptual analysis in its search on the intention of contraception so as to reveal its nature and ethical relevance in responding to the contralife theorists approaches. In all, critical reflection informed the development of concepts in the study to establish the distinction or the relationship that exist between NFP and artificial contraception. The study reviewed philosophical literature in applied ethics, natural law ethics, deontology, moral ethics and contraception.
CHAPTER TWO
THE MORAL BASIS OF THE CONTRACEPTION DEBATE

2.1 Introduction

The development of medical and scientific technologies has led to the usage of artificial methods of contraception (barrier methods, hormonal and chemical methods, intrauterine devices, surgical methods) that can prevent conception with the goal of postponing and planning the birth of a child. Individual autonomy in deciding whether to have children, how many and when has been given an alternative to natural family planning (NFP). As a result, the debate about the ethics of contraception is opened in a way that some participants (the contralife theorists) argued that the use of artificial methods as morally unacceptable and the use of NFP as morally acceptable. This chapter therefore, focuses on the basis of contraceptive debate from the bioethical standpoint and the traditional arguments on contraception. The study will do a moral evaluation on the natural law ethical arguments on contraception to verify whether they are philosophically viable.

2.2 The Contraception Debate

The moral state of contraception and birth control was primarily derived from the broader procreative theory of human sexuality. More precisely, the moral prohibition of contraception was directly associated with the stance of the Catholic Church as an institution that supports a more restrictive view of sexual ethics and especially reproductive autonomy. However, the views on contraception that were set out in the Encyclical Letter *Humanae Vitae* of Pope Paul VI and that were defended by reputable Catholic philosophers such as Germain Grisez, Joseph Boyle, John Finnis, William May, Smith and Anscombe are the main target of our questioning (Grisez et al. 1988, May (1989), Smith 1990-1, 2000, 2010, Pope Paul VI 1968, Finnis 1970, Anscombe 1975, 1981).
Even though the general view on procreative autonomy was specified in the words, “each and every single married couple must be open towards creating life”, the so-called natural methods of birth control or the methods known as the rhythm method of fertile and infertile days were allowed. At the same time, all artificial methods of contraception were thought to be morally wrong (contralife) always and everywhere. Every action specifically intended to prevent procreation is forbidden, including both chemical and barrier methods of contraception because all these were held to directly contradict the natural and moral order which was established by God (Grisez et al. 1988, Pope Paul VI 1968, Smith 2000 and Anscombe 1981).

It has to be noticed that the moral status of contraception is closely connected with the issues that appear in bioethics debates about the moral status of abortion, medically assisted conception or in-vitro fertilization, surrogate motherhood and similar topics. The ethics of contraception received deserved attention in the seventies and the eighties of the last century in the debates about human sexuality. Consequently, we will investigate the ethics of contraception, the philosophy of sexuality in the framework of which the contralife theorists offer their proposals.

Contraception as well as abortion or in vitro fertilization imposes the dilemmas concerning the intrinsic value of life or the value of ‘humanity as an inviolable end’ (Masek, 2008). We believe that a premature death is bad in itself, even when it is not bad for any particular person. Many people believe this about suicide and euthanasia that a terrible thing has happened when someone takes his own life or when his doctor kills him at his own request even when death may be in that person’s own best interests. We believe the same about abortion: that it is sometimes wrong not because it violates a fetus’s right or harms its interests, but in spite of a fetus’s having no rights or interests to violate. The life of a human organism has intrinsic value in any form it takes (Dworkin 2001). Contraception truly prevents the creation of life or decreases the number of people that would exist if contraception was not used. There are several argumentation lines that
appeal more or less directly to the potentiality. It is wrong to prevent the existence of any potential person who would naturally become a rational and conscious person which would be able to think and feel pain or it is a serious mistake to intervene in a process that has some degree of potentiality in terms of the creation of a new person.

However, it seems that the majority of participants in the discussion about potentiality deny the possibility of applying this argument to the case of contraception. For instance, Laura Purdy stresses the non-identity problem claiming that there seems to be no reason to believe that possible individuals are either deprived or injured if they do not exist. If we had not been created, we would not exist and there would be nobody to be deprived of anything (Purdy 1996). Don Marquis holds that his ‘deprivation argument’ cannot be applied here because the wrongfulness of contraception cannot be deduced from the argument of damaging the future person like us, simply because there is not a subject that we can non-arbitrarily identify as one of those who suffer any harm. Nothing at all is denied such a future by contraception, he writes (Marquis 1989 p201). Further, John Noonan noticed that the probability that the sperm and egg will, after sexual intercourse, develop into new life is not sufficiently high to talk about a potential person and her potential rights. Contraception needs to be permissible because of the small likelihood that spermatozoa will develop into thinking and feeling moral agents (Noonan 1970). Besides, to this potentiality argument a certain slippery slope objection can be set out, if not being brought into existence was an injury and we were committed to a principle of minimizing harm, this would imply the absurd conclusion that failing to reproduce at a maximal rate is a moral wrong (Card 2007).

From a bioethical perspective, it seems that there is no proper reason to prohibit contraception; it does not violate the intrinsic value of life, or the humanity as an inviolable end. It is essential to note that the participants in the discussions (bioethical debate) do not perceive any morally
relevant difference between artificial and natural methods of contraception. If, for the sake of birth control, sexual relations are practiced only during the infertile days when it is impossible to conceive, the creation of a new person is prevented in the same way as is in the case of usage of artificial contraception during the fertile days. In other words, the stances presented in the Encyclical Letter *Humanae Vitae* according to which the rhythm method is admissible while artificial contraception cannot be supported with the arguments that are offered in bioethical debates.

### 2.3 Natural Law Ethical Arguments on Contraception

The argument about contraception was based on the natural law theory following the teachings of Thomas Aquinas, who in turn was influenced by Aristotle’s philosophy (Grady 2001). Natural law theory operates on the premise that nature is good; that is, that the way things naturally are is good for them to be. It holds that the operations of things and parts of things contribute to the good of the whole. Aristotle’s view was that every object in the physical universe possesses an intelligible structure, a form that is composed of an intrinsic end and the means to realize that end (Ramsey 1994). So, in regard to sexual behavior, to sexual moral health, so to speak, what qualifies as acting in accord with nature, with reason? How do we determine what it is? Aquinas believed that the intrinsic end of all sexuality is procreation. If that intrinsic aim is subverted either by substituting pleasure for procreation as the aim or by introducing artificial devices or means to prevent procreation, then sexuality violates God’s natural law and is sinful (Voss, 2012). Sexual intercourse has two-fold natural purpose that must be respected according to Aquinas; the purpose of bringing forth new lives and the purpose of uniting men and women together. Whoever participates in sexual activity must do so in a way so as to protect these natural goods of sexual intercourse. Otherwise, it is a violation of the right reason (Smith 2000).
All Christian churches were united in their opposition to contraception until as recently as the early decades of the 20th century. It was not until 1930 that the Anglican Church went on record as saying that contraception was permissible for grave reasons within marriage. It was also at this time, however, that Pope Pius XII issued the Encyclical *Casti Connubii*, generally translated as "On Christian Marriage," in which he reiterated what has been the constant teaching of the Catholic Church; contraception is intrinsically wrong. A book entitled *Contraception*, written by John Noonan (1970), provides a comprehensive history of the Catholic Church's teaching against contraception. It clearly documents that the Church has been "constant" in its position on contraception, throughout the whole history of the Church.

The Catholic position on contraception is influenced by the natural law theory of Aristotle and Aquinas, which deems that sexuality has as its end purpose, procreation; to interfere in this end would be a violation of the natural law, and thus, a sin. The Church, however, does not condemn the use of contraception because it is an act that has bad consequences. Rather, it teaches that since contraception is an intrinsically evil action, it is predictable that it will have bad consequences. The Church teaches that contraception is evil because it violates the very purpose and nature of the human sexual act, and therefore violates the dignity of the human person. The experience of the last several decades has simply served to reinforce the wisdom of the Church's teaching. But it is not only on a practical level that we have a better understanding of the Church's teaching; our theoretical understanding has also been much advanced. Often if happens that the Church does not know very fully the reasons for what it teaches until it is challenged. The Church's condemnation of contraception went unchallenged for centuries. In attempting to explain its condemnation, the Church has deepened its understanding of marriage and the meaning of sexual act (Smith 2000).
Pope Pius XII (1930) from his article the \textit{“Casti Connubii”} (the article of the Catholic Church) speaks of artificial contraception. He writes:

\begin{quote}
No reason, however grave, may be put forward by which anything intrinsically against nature may become conformable to nature and morally good. 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.
\end{quote}

He continues:

\begin{quote}
Any use whatsoever of matrimony, exercised in such a way that the act is deliberately frustrated in its natural power to generate life is an offense against the law of God and of nature, and those who indulge in such are branded with the guilt of a grave sin (Pius XII, 1930).
\end{quote}

According to the \textit{casti connubii}, then, artificial contraception is an unnatural act; an act that prevents the natural \textit{telos} of sexual act. Tradition speaks of bad consequences that accompany artificial contraception.

Pope Paul VI (1968) in the \textit{Humanae Vitae} puts it this way:

\begin{quote}
But the Church, which interprets natural law through its unchanging doctrine, reminds men and women that the teachings based on natural law must be obeyed, and teaches that it is necessary that each and every conjugal act remain ordained to the procreating of human life (Pope Paul VI 1968, 14).
\end{quote}

Further on it, Paul VI states:
The doctrine which the Magisterium of the Church has often explicated in this: There is an unbreakable connection between the unitive meaning and the procreative meaning of the conjugal act, and both are inherent in the conjugal act. This connection was established by God and cannot be broken by man through his own volition (Pope Paul VI 1968, 14).

In teaching that artificial contraception always is morally excluded, Pope Paul VI defines it in terms of intention as “any action which either before, at the moment of, or after marital intercourse, is specifically intended to impede procreation whether as an end or as a means” (Pope Paul VI 1968, 16). He could not have accurately defined contraception in any other way, for only intentions can render the various things people do any action contraceptive.

In both documents (Humanae vitae and Casti Cannubii) and elsewhere, the Catholic Church understands artificial contraception to be an act that violates nature. The church understanding follows the Thomistic mode of categorizing action. One intends to do something that will help one achieve one’s end (here, limit one’s family size). The something that one intends to do (here, to contracept) is either in accord with nature, having right reason or not. If one intends to do something that violates nature (artificial contraception and NFP is), one acquires an evil will. Thus contraception (artificial contraception and NFP) is unnatural act that one can either choose to do. If one knowingly chooses to do something bad, one sin, but one can (say, out of ignorance).

The morally crucial aspect of people is their ability to make rational choices. Kant calls this their autonomy. Ethics for Kant is designed to protect and foster this ability. A choice is rational if it is: voluntary (not coerced or restrained) and knowledgeable: if the person making the choice must know all the relevant facts necessary rational: clear-headed, sane, not overcome by
emotion, not drugged and so on (Kant 1788). Artificial contraception and NFP are adopted out of inclination that a prospective life ought not to begin and this therefore is anti-rational and contralife. Therefore, according to Kant both natural and artificial methods of birth control are chosen with intent that a possible life to be conceived is prevented.

Traditionally, some acts are considered intrinsically evil or intrinsically wrong apart from the act of the will (Paul VI 1968). Intrinsically evil or intrinsically wrong act is a kind of act that ought never to be chosen directly. While there is no question that sin refers to an act of the will, the Thomistic tradition holds that the external act can also be evil, without reference to the will, insofar as it violates right reason.

Pope Paul VI defended a purely Augustinian position in which every conjugal act ought to be animated by the actual intention of procreation, and therefore would be open to the transmission of life, and keep the two dimensions of the conjugal act united. But this, of course, was not possible. Paul VI had to deal with centuries long existential tradition (Augustinian and Aquinas), and so had the unenviable task of defending both aspects of the tradition, and doing it with the same kind of language.

Surprisingly or not, more systematic argumentation about the moral status of contraception can be derived from the field that deals with the issue about the nature of human sexuality. The Christian doctrine has, from its very beginning, connected human sexuality with the fallen human nature that cannot control its sexual urges and lust and, consequently, recognizes sexuality as wrong and shameful (St. Augustine 1966). However, it is clearly realized that sexual relations are the only way of conception and procreation. The resulting stance of the procreative theory about human sexuality was that sexual intercourses are legitimate and morally permissible only if they lead to conception, or, in other words, if they fulfill their procreative potential. Pre-reformed Christianity, consequently, assumed that artificial contraception converts natural sexual
intercourse between spouses into non-natural; it is not aimed at procreation, which means that it is a deviant and morally unacceptable act. They rely on the Aristotelian terminology and theory, arguing that the natural function of sexual organs is conception and procreation, that is, that procreation or childbirth is a natural function of human sexuality (St. Thomas Aquinas 1975). In other words, the authority of the wise creator of nature determines procreation as the ultimate purpose of sexual relations.

Consequently, it is an articulated moral imperative according to which sexual intercourse is legitimate and moral only if there is a possibility to conceive. Procreation, we need to be more precise, is not just about conception and the birth of a child, but also includes raising children and the community of men and women in the indissoluble marriage, which is conceived as an optimal framework for this task. So, the fundamental attitude of Aquinas’ sexual ethics is that morally permissible are only the sexual relations between spouses in which it is possible to conceive. Marital sexual relations in which it is not possible to conceive are contrary to the natural law and the creator. Pleasure itself should not be the aim of sexual relations and the aim of procreation should not be sacrificed to pleasure (St Augustine 1966, St. Thomas Aquinas 1975). Contraception, that is, any method that prevents conception converts the natural intercourse between spouses into an unnatural, deviant and morally unacceptable act.

It should be noticed that Humanae Vitae presents a remarkable declination from this traditional procreative theory because sexuality is understood here as a necessary part of marital closeness, love and care. It is true that, according to Humanae Vitae, every action specifically intended to prevent procreation is forbidden; “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” (Pope Paul VI 1968: 14). However, NFP method, in which there is no active interference in the sexual intercourse, is allowed as a birth control method. 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” (Pope Paul VI 1968: 16). “Consequently, unless we are willing that the responsibility of procreating life should be left to the arbitrary decision of men, we must accept that there are certain limits, beyond which it is wrong to go, to the power of man over his own body and its natural functions limits, let it be said, which no one, whether as a private individual or as a public authority, can lawfully exceed” (Pope Paul VI 1968: 17).

Other natural law ethicist argue that, when it is the question of harmonizing married love with responsible transmission of life, it is not enough to take only the good intention and the evaluation of motives into account; objective criteria must be used, criteria drawn from the nature of the human person and human action, criteria which respect the total meaning of mutual self-giving and human procreation in the centre of true love (Grady 2001).

From this passage, is it right that the intention or the motive of the agent that determines the morality of an action her criteria to only be drawn from the nature of human person and human action? The Catholic Church teaches that some actions are intrinsically evil a part from the will of the agent, are intrinsically against the nature of the person and human action. The church recognizes that an individual may choose to do an action out of ignorance, and if they are not responsible of being ignorant they would not be guilt of a bad will; they would not be guilt of sin, but they would be the agents of an evil act. They would be doing something wrong, something that ought never to be done (Smith 1991, 184). Here the church do not seem to be clear; if the motivation is to render procreative act infertile there may be no ignorance between choosing to use artificial contraception or natural contraception. Therefore, the autonomy of the will of a rational agent is enough to determine the morality of an action and it must not only be
drawn from the nature of human person and human action but out of free will with the right intention (Kant 1788).

The claim that the external act can have a good or evil aspect of its own; a part from the will is carefully explained by Aquinas in Summa Theology, I-II, Q. 20, art 1. There, to the question “is goodness or evil in the act of the will first or in the external act?” The response makes it clear that the external act can “derive” its goodness or evil from the will (willing the ultimate end of the act), but that it also may have a goodness or evil in itself, a part from the will.

External acts can be called good or evil in two ways. First, according to the kind of acts they are and the circumstances connected with them; for example, to give alms under the right circumstances is good. Second, an act can be good or bad in relation to the end sought; for example, we say giving alms because of vainglory is evil. Now since the end is the proper object of the will, it is evident that the nature of good or evil, which the external act has from its ordering to an end, is found first in the will, then derivatively in the external act (Kant 1788).

However, the good or evil the external act has of itself, as being concerned with due matter and due circumstances, is not derived from the will, but rather from reason. Hence, if we consider the goodness of the external act as it is in the ordering and apprehension of reason, it is prior to the goodness of the act of the will, but if we consider it as it is found in the carrying out of a work, it is subsequent to the goodness of the will, which is its principle.

The will becomes evil because of the kind of act it has chosen. In the order of execution the evil of the will is prior, for the actual act of murder flows from the murderous will; the act is evil because it is the perfection of an evil act of the will (Kant 1788).

John Paul II (1981) had provided an argument that might be stated in the following version:
1. It is wrong to destroy the power of human sexual intercourse to represent objectively the mutual, total self-giving of spouses.

2. Artificial contraception destroys the power of human sexual intercourse to represent objectively the mutual, total self-giving of spouses.

3. Therefore, artificial contraception choice is a wrong act.

John Paul II does not think that the sexual act can represent the mutual, total self-giving of spouses if the acts are deliberately rendered infertile. What is most important to note here is that, again, contraception is defined as an act evaluated as evil apart from what the spouses will when they participate in this act. Though he prefers NFP to artificial contraception, it is very clear from the argument above that both NFP and artificial contraceptive are willed by an agent and are positive acts that render procreative potential infertile.

To use the phrase of Pope John Paul II, that the couple using NFP is not telling a lie with their bodies; they are still allowing sex its full, natural meaning. In short, the naturalness of NFP is obvious. It recognizes fertility as a good and does nothing to deny this good; it operates fully in accord with the laws of nature, which are the laws of God (John Paul II, 1981). Is it true that NFP recognize fertility as good when it renders it infertile during fertility days? Is this being open to procreation as the natural law demands? If it operates fully in accord with the laws of nature when her intention is similar to those of artificial contraception, why do they only see artificial contraception as having a contralife will and not NFP? The answer to all this questions can be drawn not only from the definition of contraception but also from the nature of the act itself, NFP as well as artificial contraception do not recognize fertility nor are they open to procreation.

This, though, is not quite the Pope Paul II's line of reasoning. In line with his personalistic philosophy, he emphasizes the positive effects of NFP for the human person. John Paul II puts
great stress on the power of responsible use of periods of abstinence to aid man in regaining the mastery of him which was his before original sin. He argues that the use of artificial or technological means allows him to avoid this mastery, and thus diminish the dignity of man. Man relies upon technology to do for him, what he cannot or will not do for himself. Self-restraint or continence is not a means of birth control in the same way that artificial means are, for continence does not require artificial devices; it requires strengthening the powers and virtues of the human person. John Paul II tells us that mastery of the self is indispensable for the human person. He insists that NFP helps us learn to control our desires; it helps us acquire virtue and strength. On the other hand, artificial means of birth control do not help us develop interior strength. Paul II continues to develop the theme of language of the body along with this theme of self-mastery. Those who do not have self-mastery are not able to use their bodies to express exactly what they wish to express. They are unable to perceive or express the profounder values of love (Pope John II, 1981).

In short, the acts must remain open even if the subjective intention is closed. The spouses may do nothing to deprive the act of its ordination or destination to procreation. They may do nothing to ‘close off’ the possibility of the act achieving its natural ordination. And here is the point. At certain times, procreation is simply not available to spouses for reasons beyond their control. Although their marital acts will be no less infertile than those of a couple practicing contraception, their acts have not by their own will been deprived of their proper ordination (John Paul II, 1981)

This is a very interesting passage. If a couple undertakes to carefully plot by temperature and time when the marital act will be infertile because they will and intend the act to be infertile, can we say that they have done nothing to close off’ the possibilities of the act achieving its natural ordination? Can we say that procreation simply not available to spouses for reasons beyond their
control? They know or fervently hope they know when procreation is available and when it is not, and they are precisely trying to eliminate procreation.

2.4 Moral Evaluation of the Natural Law Ethical Arguments on Contraception

The condemnation of artificial contraception is based squarely and firmly on the nature of the marital act, as illustrated by the foregoing authors (Aquinas, Augustine, Pope Pius XII, John Paul II and Pope Paul VI). Unfortunately, the arguments against artificial contraception which I believe are valid as far as they go are equally effective against natural family planning. Let us call this analysis of the marital act and the condemnation of contraception, the essentialistic tradition of the Church – meaning nothing more by this than an analysis that focuses on the essence of the marital act and this is a long and venerable tradition. But the initial approval of use of the infertile periods as a form of natural family planning by Pius XII in his address to the midwives was not based on such an analysis of the marital act, and it is a document that would repay the kind of careful attention that Janet Smith has given to *Humanae Vitae*. In it Pope Pius XII asserts the legitimacy of NFP for a variety of different concrete reasons like health and economics, but despite the common impression, he never directly compared the morality of artificial contraception with the morality of NFP. What he compared artificial contraception to is the case of a couple who use the conjugal act also in the days of natural sterility "ancheneigiorni disterilitá naturale", and therefore, do not impede or prejudice in any way the consummation of the natural act and its further natural consequences (Pius XII, 1930). For example a couple that acts with procreative intent without picking and choosing days. They have sexual intercourse "also in the days of natural sterility", but not only in the days of natural sterility, and this certainly is different from artificial contraception, and natural family planning, as well. Does Pius XII approve NFP because of an analysis of the nature of the conjugal act? I think not. He does so drawing and developing in a new way an equally venerable tradition in the Church which
we can call the existential tradition on the use of the conjugal act which said that various reasons can allow the use of the conjugal act even when there is no possibility of procreation.

If we are ever going to find a solution to this debate on contraception, we have to let both traditions (essentialist and existentialist) finally have their say. Then, we can finally escape from the impossible task of trying to explain how we are really open to procreation when we do not wish it and carefully plan to avoid it.

If these intelligent men haven't succeeded in demonstrating a distinction, we may rather safely say it is because there is no way to do it within the essentialistic framework (analysis that focuses on the essence of the marital act). Why is NFP defended? The principle reason is because it represents in a hidden way the existential tradition, and there is virtually no one who advocates going back to a purely Augustinian position.

But perhaps there is an even more esoteric reason for these impassioned defenses. Certain modern studies have indicated that a woman's sexual desires may peak at the time of fertility - hardly a remarkable finding if true and women often have physical indications of fertility in the form the cervical mucus takes. Some uncompleted work of John Rock hints, as well, at male pheromones attracting women at the time of ovulation (McLaughlin 1998, p. 52). So it is possible that the use of the conjugal act could follow NFP patterns of attraction to sex at fertile times.

Any defense of the encyclical cannot ignore the fact it is based on natural law arguments and consider the validity of these arguments irrelevant. Is this argument from consequences itself valid? It would only be valid if there were a necessary causal connection between contraception and, for example, premarital sex. And this connection would have to be based on the severing of the unitive aspect of the conjugal act from any relationship to procreation. But as we have seen,
the unitive dimension is itself procreative. In the case of premarital sexuality, is it valid to say that contraception is a direct cause of it? If we examine the nature of the conjugal act we can see why premarital sex is wrong. If the couple has a child, they are not in a position to adequately care for it. They do a disservice to the child and to themselves, for they may be forced to take on responsibilities they are not ready for, and they run the risk of disorienting their lives. If they do not have a child, is it valid to argue that they have harmed no one? No. They are, in the exercise of the conjugal act, either activating or suppressing its unitive dimension. If they are suppressing the unitive dimension with its mutual love, they are trivializing this sacred mystery of union, and reducing their capacity to enter fully into it later. If they are willing this unitive love, they are binding themselves together in a special shared life in view of the child to come. They are intimately knitting their lives together to create the optimal situation in which the child ought to be born. If they leave each other, even if they intended to from the beginning, they rip this shared life apart which can be both painful and psychologically harmful (McLaughlin 1998, p53-60).

“We should not make the current widespread problems in sexual morality a new argument from totality that runs. Pope Paul VI feared bad consequences from the use of artificial contraceptives, and bad things have, indeed, occurred. Therefore, artificial contraception is rightly condemned. We must demonstrate that artificial contraception directly causes the bad consequences. Otherwise, if natural family planning is continually perfected as a way of contracepting and becomes more accurate, simpler in application and with less time of abstinence, then someday someone could argue that it too leads to bad consequences, for it has the capacity to be abused” (McLaughlin 1998, p58).

Nor is it appropriate to link abortion to contraception, as if the large numbers of Catholic married people who use contraceptives are incipient abortionists. This is loose language which is both inaccurate and offensive. It is entirely possible to agree with the Church's teaching on most
points of sexual morality and still disagree with its condemnation of artificial contraception. The intention of artificial contraception is also the intention of NFP (Kant 1788).

John Noonan (1986) argued that at most, only four days a month is the union of intercourse and fertility normal. If we seek to understand the divine plan from what nature has given humanity, we must infer that it is for a brief part of any life that fertility is intended, and that nature has designed man so that many acts of intercourse will be sterile. If sterility is secured at all times save the fertile time intended by nature, the natural design is secured (Noonan 1986, p. 549)

It is not possible to take literally "every conjugal act whatsoever must be intrinsically (per se) open to the transmission of life" (Paul VI 1968, 11) because the encyclical says, "In fact, as is known by usage, new life does not arise from every conjugal coupling. For God has so wisely disposed natural laws and the times of fecundity that they themselves intrinsically (per se) put intervals between acts of generation"

Noonan also comments that according to the encyclical then, there are times which are intrinsically sterile, but every conjugal act must be intrinsically open to transmitting life. Is a conjugal act at a time which is intrinsically sterile intrinsically open? Not in any literal sense. Are the conjugal acts of spouses whose sterility has been established, or the conjugal acts of a pregnant spouse, intrinsically open to the transmission of life? Literally, no. They are closed from transmitting life by physical causes. Yet they are entirely lawful. It is clear then that, concretely, not every act need to be open to the transmission of life; and it is inferable that to preserve the sterility of times which are intrinsically sterile is unobjectionable. To secure such sterility is not to act against the divine design but to cooperate with it (Noonan 1986, p. 550-52).

Does the real issue of contraception boil down to four days of fertility that must at all costs be "respected" while we try as hard as possible to make sure they will not be fertile? This kind of
solution is more symbolic than real. It is a sign that there is an irreducible procreation meaning inscribed in the very nature of the conjugal act. But it would be better to frankly admit that avoiding the fertile days is meant to thwart the physically procreative aspect of the conjugal act. Otherwise, we will sink deeper and deeper into a semantic morass, and a biological view of natural law which becomes what we discover with advanced techniques rather than the clearly generative nature of the conjugal act.

It is important not to confuse good qualities of artificial contraception with its morality in relationship to other means of avoiding conception. A couple, who with prudent medical advice, choose another non-abortive method of avoiding conception, should not be made to feel that they have violated the moral law any more than those who use natural family planning. In both cases the emphasis should not be on the means to avoid conception, but the love that the conjugal act is meant to help grow.

Rhythm and certain other means of contraception are not related to each other as the natural means to the unnatural, but rather both are subordinated to the original integrative nature of the conjugal act and the life to come in which there will be no exercise of the conjugal act. The abstinence that rhythm entails can allow us to glimpse these other realities, but it is only a partial and inverted reflection of them because it too uses the conjugal act in deliberately non-physically procreative ways. Even if we discover an ideal means of avoiding contraception which is safe, effective and morally approved by the Church, we are still faced with the struggle to create a good marriage and find the appropriate way to exercise the conjugal act here and now. The physical possibility of exercising the conjugal act without conceiving a child and the general moral licitness of acting in this way only set the stage for a married couple's decision that for them here and now it is either better to exercise it or better to abstain from it. The sexual act, as central as it is to married life; possesses no automatic efficacy and must be subordinated to the
love between the spouses. It is true that the use of certain contraceptives can lead to self-indulgence and a deadening of spiritual values, but NFP holds out the same possibilities. “The ultimate solution to the problem of contraception lies not only in the proper means, but the subordination of these means to psychological and spiritual values” (Noonan 1986, 561).

Another way of putting the matter is that abstinence often appears as a rather poor solution, and that every choice of a way of avoiding conception has its drawbacks, and finally when the non-procreative exercise of the conjugal act does become possible, it does not always have the good effects we would hope for. We are left with our slow pilgrimage in this fallen-redeemed world during which we try to love our spouse and children as best we can.

2.5 Conclusion

This chapter discussed the basis of contraception debate following arguments drawn from the natural law ethics. Are these arguments morally justifiable? The arguments were based on the natural law theory of Aristotle and Aquinas. This theory deems that sexuality has as its end purpose, procreation. To interfere in this end would be a violation of the natural law, and thus, a sin. Unfortunately, the arguments put forward against artificial contraception which I believe are valid as far as they go are equally effective against natural family planning. Any defense of the Encyclical cannot ignore the fact it is based on natural law arguments and consider the validity of these arguments irrelevant. The argument focuses on consequences brought about by the use of artificial contraception. This argument would only be valid if there were a necessary causal connection between contraception and, for example, premarital sex. According to the Encyclical then, there are times which are intrinsically sterile, but every conjugal act must be intrinsically open to transmitting life according to natural law ethicists. It has also been noted that a conjugal act at a time which is intrinsically sterile intrinsically is not open to procreation as natural law
ethicists tend to argue. Are the conjugal acts of spouses whose sterility has been established, or the conjugal acts of a pregnant spouse, intrinsically open to the transmission of life? They are not; they are closed from transmitting life by physical causes. Yet they are entirely lawful. It is clear then that, concretely, not every act need to be open to the transmission of life; and it is inferable that to preserve the sterility of times which are intrinsically sterile is unobjectionable. NFP often appears as a rather poor solution, and that every choice of a way of avoiding conception has its drawbacks. Finally, when the non-procreative exercise of the conjugal act does become possible, it does not always have the good effects we would hope for.
CHAPTER THREE
CONTRACEPTION AND THE CONTRALIFE THESIS

3.1 Introduction
This chapter seeks to analyze whether the contralife thesis whose argument that artificial contraception is morally more questionable than the natural methods of birth control is philosophically sound. The main issue of the study is to demonstrate that both NFP and artificial contraception involve an intention and a choice that conception is impeded. Therefore, both have a contralife will. The group in question is the new natural law theorist; Grisez, Boyle, Finnis and May who in trying to revise the natural law theory of Aquinas leave the question of the morality of contraception still wanting. Our focus will be to examine if philosophers and theologians since *Humanae Vitae* have fared better in showing that NFP is not contralife and that artificial contraception is contralife. This study will target the argument of (Grisez, Boyle, and May 1988, 1989), (Pope Paul VI 1968), (Anscombe 1975, 1981), (John Finnis 1970, 1988), (Janet Smith 1990, 2000, 2010).

3.2 The Contralife Approach to the Act of Contraception

Contraception act can be defined as a procedure or a method of preventing conception with the goal of planning the birth of a child or simply as a method of pregnancy control (Prihvaćeno 2013). The contralife theorists argue that only artificial methods of preventing conception are contralife and that natural family planning is not contralife (Grisez et al. 1988, Smith 2010 and Anscombe 1981). In this study the notion of contraception will be used in a broader sense in which natural methods as well as artificial methods should be treated as acts of contraception following the definition of contraception.
Considered as a technological intervention in a biological process, contraception act need only prevent the fertilization of an ovum by a sperm. From that point of view, eliminating the possibility of a conception by successful contraception does not bear on any human individual’s life. It is not as if a possible baby were waiting somewhere to be conceived. However, considered as a moral act that is, considered in moral terms, whether as morally good or as evil contraception carries out a choice specified, just as other choices are, by a possible future state of affairs which the agent intends to influence by means of his or her act. Those who choose to contracept often also intend some further good, for example, not to procreate irresponsibly, with bad consequences for already-existing persons. But in choosing contraception as a means to this further good, they necessarily imagine a new person coming to be if he or she is not prevented, they want that imagined person not to be, and they efficaciously will that he or she never be. That ‘will’ is a ‘contralife will.’ Therefore, considered as a moral act, each and every contraceptive act (natural and artificial) is necessarily contralife.

Grisez and May (1988) held that artificial contraception is necessarily immoral because it is necessarily contralife and that NFP is not necessarily immoral because it is not necessarily contralife. First of all, they admit that the artificial contraceptive intent and the natural contraceptive intent may involve the same reasons. The essential way in which they differ, is in the choices which each involves and the relation of those choices to the benefits and burdens which accompany them. In artificial contraception, the choice is to impede the baby's coming to be as a means to an end, which is to realize the goods that accompany the choice to use contraception and/or to avoid the evils which would accompany not choosing to use artificial contraception. In NFP, on the other hand, the choice is not to impede the baby's coming to be; rather, the choice is to abstain from sexual intercourse which could result in; (a) the baby's coming to be and the loss of goods and/or avoidance of evils which accompany that baby's
coming to be, in order that (b) the goods represented by that reason be realized and/or the evils
represented by it be avoided (Grisez et al. 1988, 369-72).

They describe how natural family planning can, itself, be contralife if a couple chooses it as
another form of contraception; "they project the coming to be of another baby, want that possible
baby not to come to be, and act accordingly" (Grisez et al 1988, p385). How then, does the
practice of NFP differ from the use of artificial contraception in such a case, when the reason not
to have another baby is exactly the same? In their reply they argue “even when based on good
reasons, the artificial contraceptive choice by its very definition is contralife always and
everywhere; it is a choice to prevent the beginning of the life of a possible person. It is a choice
to do something, with the intent that the baby not be, as a means to a further end; that the good
consequences of the baby's not-coming-to-be will be realized and the bad consequences of the
baby's coming to be will be prevented” (Grisez et al. 1988, p386).

The choice of NFP differs from artificial contraception. 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 consequence of his or her not-coming-to-be. In
this choice and in the acceptance of its side effects, there is no contralife will. The baby who
might come into being is never projected and rejected (Grisez et al. 1988, p386-87), a little later
they say, "Couples who choose to practice NFP do consider what the future will be like if they
have another baby. They foresee certain bad effects for example, they will not be able to fulfill
both their present responsibilities and their new ones, and so judge that they should not assume
new ones, so, they choose to abstain" (Grisez et al. 1988, p387).
Later they say, in the choice of NFP, the intent 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 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. Thus, there is a real and very important difference between not wanting to have a baby. And not wanting the baby one might have (Grisez et al. 1988, p388-9).

In other words, the difference between the two choices, according to the contralife thesis is that artificial contraception is the choice to do something which will impede the coming to be of a baby, whereas NFP is a choice not to do something while accepting the side effects, i.e., the baby's not coming to be, as well as the goods, and/or avoidance of evils, which follow. William May claims that artificial contraception, by definition, is a choice to do something to prevent the beginning of a life of a possible person. Yet, NFP is simply to abstain, or not do something. The difference, according to May, is that NFP is not an action which prevents conception; rather, it is a passive acceptance of the effect, namely, no conception (May 1989).

To consider abstinence merely as a passive acceptance of the effects may not be true, for abstinence cannot always be considered simply a “not doing”; in NFP, it is an active disruption of an otherwise regular and possibly life-giving sexual routine. Abstinence, therefore, is not simply a “not-doing.” It is an active deterrence of what one ordinarily would otherwise do. The couple practicing, NFP abstain for some intended purpose similar to those using artificial contraception whose intent is to render the procreative potential infertile. They carefully calculate when to abstain, and they choose to put forth the effort to abstain for a reason. The project intentionally altering a regular pattern of sexual relations is organized for an end, viz., to prevent the couple from causing a new life. Likewise, in artificial contraception, one takes certain measures at the proper time in order to prevent the sperm from meeting the ovum. Thus,
artificial contraception and NFP are, in a relevant sense, positive acts and both involve choices and intentions that conception is prevented. Just as the serious abstainer understands that sperm could possibly reach the ovum and thus takes measures to prevent it, so the contraceptor sees the possibility that the sperm could reach the ovum and takes measures to prevent it. They are both motivated to take precautionary means in order to ensure that the sperm will not meet the ovum. Therefore, in both, the intentions (means and ends) are the same. Hence the two choices of contraception (artificial and natural) are not morally different because they both involve choices and intentions that the supposed new human being does not come to life.

“Not doing” cannot be the significant difference which distinguishes the contraceptive act from the non-contraceptive act because so called “contraceptive NFP” would then be equated with non-contraceptive NFP on the grounds that it also is a “not doing.” This, however, would be a contradiction, for “contraceptive NFP” would then be non-contraceptive NFP. Therefore there is no difference between contraceptive natural family planning and non-contraceptive NFP because both involve the act of ‘not doing’. The study thus focuses on NFP not as contraceptive NFP or non-contraceptive NFP since the two are the same on the ground of ‘not doing’.

The crux of their argument seems to reside in the differences between those who choose to do something and those who choose not to do something. The couple choosing NFP rightly "choose to abstain", but the heart of NFP is not when couples abstain but when they do not abstain and choose to use the conjugal act for non-physically procreative purposes. Nor is it clear why "not wanting to have a baby" is different from "not wanting to have a baby one might have", or how we can call the not coming-to- be a side effect when it is the purpose of practicing NFP to begin with.

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The couple practicing NFP abstains for some intended purpose. They carefully calculate when to abstain, and they choose to put forth the effort to abstain for a reason. One cannot, according to Kant, do the right thing for the wrong reason. This is because Kant believes that whether we are good and deserve credit or bad and deserve blame should be under our control. Therefore NFP cannot be good (not contralife) if its intention is to prevent conception. Kant argues that the only thing of absolute value is a good will that is to have the right intentions (Kant 1788, 30-40).

Grizez locate the act of contraception in its “contralife character.” He holds that the act of contraception is contralife by definition:

Contraception can be defined only in terms of the beliefs, intentions, and choices that render behavior contraceptive. To contracept one must think that (1) some behavior in which someone could engage is likely to cause a new life to begin, and (2) the bringing about of the beginning of new life might be impeded by some other behavior one could perform. One's choice is to perform that other behavior; one's relevant immediate intention which may be sought for some further purpose is that the prospective new life not begins (Grizez 1990).

Further, he states that “Since contraception must be defined by its intention that a prospective new life not begin, every contraceptive act is necessarily contralife or has a contralife will” (Grizez 1990, 139) The principle thrust of his article was to argue that artificial contraception is morally evil primarily because it is “contralife.” And that natural family planning is not evil because it is not “contralife”.

It should be noted that since Grizez and May define artificial contraception as contralife, we should not expect to find them presenting an argument to demonstrate the contralife character of contraception, for to do so would be to beg the question. Thus, to contracept a person must think that prospective sexual intercourse might cause a new life to begin, and that this possible effect
can be impeded by some other behavior he or she could perform. The choice is to perform that other behavior; the relevant immediate intention which may or may not be directed toward some further purpose is that the new life not begins (Grizez et al. 1988, 371). Here and in what follows, begin and come to be refer both to the initiation of the life of a person and to the person’s continuing existence. So, artificial contraception is a choice which aims to impede both the initiation of life and the being of the individual whose life might be initiated if it were not impeded (Grizez et al. 1988, p372).

May argued that contraception is not a sexual act, but is the choice and in this sense an intent to do something prior to such sexual act, during it, or subsequent to it, to prevent the coming to be of a new human life (May 1989). Here May defines contraception as a choice, though certainly a choice to do something. There is some lack of clarity about what May is describing, for if contraception were simply a choice, speaking of choosing to contracept, of choosing a choice would not be intelligible. But Grizez and May do speak this way. Consider this statement by William May:

One can choose to contracept for a good end, but the act of contraception, this position holds, is always and everywhere morally bad, and it is morally bad because someone choosing to contracept is adopting by choice the intelligible proposal to oppose the good of human life in its transmission (May 1989).

According to May, artificial contraception is the choice to do something which will impede the coming to be of a baby, whereas NFP is a choice not to do something while accepting the side effects, for instance, the baby's not coming to be, as well as the goods, and/or avoidance of evils, which follow. He argues that artificial contraception, by definition, is a choice to do something
to prevent the beginning of a life of a possible person. Yet, NFP is simply not doing something to impede the coming to be of a new life.

Grisez says this about a choice, “it is possible to make a choice and then act on it. Hence morality, which is centered in choice, is not so much in one’s behavior as is one’s inner self” (see Mathew 15: 10-20; Mark 7: 15-23; also Summa Theological, 1,11, Q 20). In these Grisez seems clear because one’s motivation or intention is prior to one’s act. “Nevertheless free choices cannot be separated from action” (Kant 1788, 48). One chooses to do something. What is in view is generally a positive and appealing fulfillment of some capacity, whether of inner activity or outward behavior. Having chosen, one usually proceeds to do what was chosen. The outward performance though may not share in and completes the goodness or badness of the choice.

Grisez talks about the choice “to do something” but he does not talk about choosing to do something that is “a positive and appealing fulfillment of some capacity”; perhaps what he means by this that one chooses something good, something in accord with nature, something in accord with the right reason. But the last line suggests something different. Grisez speaks of the act not to do something that specifies ones choice as good or bad, but something that shares in and completes the goodness or badness of the choice. Thus it would seem that the act becomes evil because of one’s will rather than the will becomes evil because of the evil that one has chosen to do.

Grisez describe the artificial contraceptive choice in this way:

Even when based on good reason, the artificial contraceptive choice by its very definition is contralife always and everywhere. It is a choice to prevent the beginning of the life of a possible person. It is a choice to do something, with the intent that the baby not be, as a means to a further end. That the good consequences of the baby’s coming to be will be realized and the bad consequences of the baby’s coming to be will be prevented (Grizez et al. 1988, p379-80).
The contralife theorists speak of the choice to do something but it is not the something that one does that defines one’s act, rather it is one’s intent, an intent that a baby not come to be, defines one’s act. “Choice” refers to a selection of some means to an end, but to the decision “to prevent the coming to be of a baby” which then leads a couple to engage in a contraceptive behavior. They argue that a couple using artificial contraception are doing evil, wrong, not because they are using contraceptive, but because they intend that a child not to come to be (this is their choice and what makes the act immoral) and that leads them to do something contraceptive (Grisez et al. 1988, p384-7). Their position serves to provide an explanation though perhaps not the best explanation why a choice to contraccept is a sin, but do they have the means to demonstrate that the act of artificial contraception is always and everywhere evil? The question is raised; does their analysis provide the resources for demonstrating that contraception is an intrinsically evil action a part from what is willed by the agent? How do they approve NFP to be a good choice?

If Grisez and May are speaking only of the order of execution, their portrayal of the dynamics of the moral act has some plausibility, but they seem, then, to provide only a partial description of the moral act. Grisez and May tell us precisely what they mean by a contralife will; they (contraceptors) look ahead and think about the baby whose life they might initiate. Perhaps for some further good reason, perhaps not, they find the prospect repugnant; “we do not want that possible baby to begin to live.” As the very definition of contraception makes clear, that will is contralife, it is a practical though not necessary an emotional hatred of the possible baby they project and reject, just as they will to accept the coming to be of a baby is a practical love of that possible person (Grisez et al. 1988).

It seems possible to object to the description of all contraceptors as having contralife will of the type described above. It is true that all contraceptors “look ahead and think about the baby whose
life they might initiate” and then find the thought of this “possible baby” repugnant. The language becomes even stronger.

The wrongness of artificial contraception rests most vitally in the will. If acts are not evil because of their nature or because of their consequences, then it would seem they must be evil because of what the agent wills (Grisez 1988). The contralife theorists claim that artificial contraception is wrong because it proceeds from a contralife will, serve to establish one criterion by which many decisions to contracept may be faulted. I don’t believe, however, that it works as a proper description of many decisions to contracept. If it is possible to contracept without a contralife will, then their claim that what is wrong with artificial contraception is that it entails a contralife will fails. Would they then have any means to demonstrate that contraception is intrinsically evil? Furthermore, as we shall see, even the argument that artificial contraception is wrong because it proceeds from a contralife will depends to some extent on an understanding of the physiological end of sexual intercourse of the end of procreation as being definitive of the nature of sexual intercourse and thus normative for sexual ethics. Without this understanding I don’t believe that Grisez, and May’s argument has sufficient grounding.

Still, for all their interest in the will, and in spite of their rejection of nature as normative for ethics, in their argument Grisez and May seem to come close to granting that artificial contraception violates the nature of sexual act. Let us look again at their description of the decision to contracept:

To contracept one must think (1) that some behavior in which someone could engage is likely to cause a new life to begin, and (2) that the bringing about of the beginning of new life might be impeded by some other behavior one could perform. One’s choice is to perform that other behavior; one’s relevant immediate intention which may be sought for some further purpose is that the prospective new life to begin.
A key word here is the word “likely” in the first sentence. What do they mean by likely? Do they mean statistically probable? Most likely they do not, since it is not statistically probable that intercourse will result in conception. It seems more likely that they mean something like “by nature this act will result in a new life beginning.” If so, then the first premise above would be equivalent to; “to contracept one must think that some behavior in which someone could engage is by its nature conducive to the bringing forth of new life….?” (Grisez et al. 1988, 381) If this is a proper reading of their first premise, then they would be allowing that the act of sexual intercourse has a nature and that what is wrong with artificial contraception is that it violates the nature of sexual act.

But Grisez and May do not speak this way; indeed, they deny that contraception is a sexual act. “….. The definition of contraception neither includes nor entails that one who does it engages in sexual intercourse, much less marital intercourse” (Grisez et al. 1988, 381).

A dictator who wanted to control population might contracept by having a fertility reducing additive put in public water supply. Certainly, he is guilty of denying spouses their fundamental right to have children. He is causing others to engage in contracepted acts, against their will; they are contraceptors (albeit innocent contraceptors); he is the facilitator.

It would be seen right, though, to say that although Grisez and May’s dictator is not guilty of the act of contraception, he is guilty of the sin of contraception. This is not because he has contracepted but because he is morally responsible for the contracepted acts of those who drink the water. His guilt is a remote guilt wherein he becomes responsible for the contracepted acts of others. Although he, himself, does not contracept in putting the additive in the water, he is rightly held accountable for the sin of contraception, much as one who pays a murderer is morally responsible for the murder. Those who drink the water and engage in acts of sexual intercourse
may not be guilty of having a contraceptive will, though they have performed contracepted acts. Also a woman who has taken a contraceptive pill but who has not yet engaged in an act of contraception intercourse has not yet contracepted. Yet she is fully intending to do so, even if she is thwarted from doing so, she is guilty of the sin of contraception. Her act parallels that of a murderer who has loaded his gun with the full intention of murdering; he has not yet murdered until he pulls the trigger and kills his victim; yet if he is thwarted from doing so, he is guilty of the sin of murder. Celibates for example may be accused of contraception if their intention is to render procreative potential infertile viz. not to participate in the procreative process. Celibates do abstain from procreative activity, since abstinence is a part of natural birth control and that natural birth control involves active natural intervention of the procreative process, then celibacy is also contralife.

Boyle (1991) argues that NFP achieves its purpose in a way that is essentially different from artificial contraceptive intercourse. In practicing NFP a couple adopts a policy to have sexual intercourse at infertile times and to avoid it at fertile times. This policy involves no intention to prevent an act of intercourse from being procreative. Refraining from intercourse is not contraceptive intercourse, since it is not intercourse at all. Moreover, refraining from intercourse has a different intentional relation to the good of procreation than artificial contraception intercourse has. In the latter case one does what one believes to be a potentially procreative act and also acts to insure that the procreative potential is not realized. This is acting against the procreative good. In NFP, however, one achieves one's intention to avoid children by foregoing the act that one believes would be procreative; one does not necessarily act against this or any other good by refraining from acting for it (Boyle 1991, p311-314). Thus, the refraining from intercourse that is involved in NFP does not involve the anti-procreative intention of contraception intercourse. Neither do the acts of intercourse in which a couple engage during
infertile periods have this intention. Since these acts are believed not to be fertile, nothing is done to any of them to render them infertile. The other goods of marriage are quite legitimately pursued in these acts (Boyle 1991, p313-15).

If natural family planning “involves no intention to prevent an act of intercourse from being procreative” (Boyle 1991, p313), just why do people practice it at all? Certainly, "refraining from intercourse is not contraceptive intercourse”, but the real purpose of natural family planning is not refraining, but insuring that the conjugal act is not procreative. How can an act of intercourse in the infertile period not have an anti-procreative intention, since that is why the act was chosen for that time?

Although John Finnis (1970, 1988) does not directly consider the issue of contraception, but the general question of unnatural and morally defective sexual intercourses; it is clear that he holds that artificial contraception can be considered as an active interference while the NFP method only makes sexual partners temporary sterile. Finnis emphasizes that procreation and raising children is a basic human good such as, life and knowledge. The basic human goods are not morally good in themselves, which would mean that they are not a moral obligation for all but they must be chosen when we are faced with a choice between some of these goods and other personal aims. For instance, according to Finnis, procreation and raising children is not an obligation for all, but in sexual relations between spouses, they always have to choose the sex in which it is possible for a woman to become pregnant. Finnis raises the question of what actions, according to their causal structure, include a choice that is appropriately open to the fundamental values, and what actions, according to their causal structure, assume a choice against the fundamental values. He concludes, that the choice that excludes the possibility of procreation in a sexual relationship is clearly and unambiguously (there is no requirement for further arguing about Christian values) directly opposite to the basic good (Finnis 1970). From this Finnis’
attitude it could be concluded that the use of any method of contraception is not an option because sexual behaviours should always be open to conception.

However, he differentiates the moral statuses of the choices in which someone actively takes steps to prevent procreation from those when they are not taken, but the circumstances are such that it is impossible to conceive. The natural family planning method in spite of the fact that the ‘full’ sexual relation is not fulfilled respects the value of procreation, because sexual intercourse is appropriately open to the basic good. For example, sexual relation between naturally sterile spouses cannot end in procreation, but it is not considered as a choice against the fundamental goods. It is appropriately open to the value of procreation. It follows undoubtedly that artificial contraception can be considered as active intervention in sexual intercourse while sexual intercourse during infertile days can be treated as sexual intercourse of temporary sterile partners (infertile days can be regarded as a kind of natural temporary sterility). Indifference toward procreation in cases of natural contraception is not a serious problem as long as their sexual intercourse is natural in the sense of the lack of any active intervention into sexual intercourse (Finnis 1988).

3.3 Attempts to Defend the Contralife Thesis by the Catholic Philosophers

*Humanae Vitae* presents a remarkable declination from traditional procreative theory because sexuality is understood here as a necessary part of marital closeness, love and care. It is true that, according to *Humanae Vitae*, every action specifically intended to prevent procreation is forbidden. “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” (Pope Paul VI 1968: p14). However, the NFP method, in which there is no active interference in the sexual intercourse, is allowed as a birth control method.
Such a position is much more elaborated in the articles of Elizabeth Anscombe, in which she explicitly argues in favour of the moral admissibility of the rhythm methods and against artificial methods (Anscombe 1975, 1981). She argues that, even if behind both artificial and natural methods there is the same desire and intention to avoid conception and pregnancy, except only artificial methods need to be forbidden. Similarly to Finnis, she claims that active intervention in sexual intercourse makes a morally relevant difference between the allowable act and the improper act. When a couple uses artificial contraceptives, the intention of avoiding conception is an integral part of the sexual act. At the same time, the same intention is only furthered in the case of relying on natural methods. Sexual intercourse in the infertile days is identical to sexual intercourse when it is possible to conceive. The first differs from second only in the time frame of the cycle of fertile and infertile days. Although sexual intercourse during the infertile days is de facto a non-generative act in which it is not possible to conceive, such an act is intrinsically generative because there is no difference between such an act and an act in which it is possible to conceive. On the other hand, the use of artificial contraception transforms a natural sexual act into a perversion of the natural order because it changes the nature of the sexual act in a physical sense. The act that is naturally open to conception becomes non-procreative due to human intervention (Anscombe 1975).

What can be derived from Anscombe’s words is that a responsible attitude toward sexuality for an ‘honest and responsible’ person always involves openness to procreation of children, where ‘openness’ can be interpreted in two ways: (i) the sexual act is open to procreation if there is a spirit open to procreation (ii) the sexual act as a physical act is open to procreation if it is intrinsically generative. Natural birth control, according to Anscombe, satisfies both conditions of moral conduct. However, no matter how we interpret her words, it seems that any conscious
and intentional prevention of conception (natural or artificial) equally disregards the spirit of openness to procreation.

What distinguishes an act of contraceptive intercourse from an act of non-contraceptive intercourse is that the former involves the choice to do something before, during, or after the act which destroys the possibility of conception precisely because it is believed that such a choice will indeed negate the possibility of conception (Shanley 1987, p50). "The act of contraception embodies the intention of avoiding conception and so makes the coital act a different kind of act (anti-generative) from that which would result if that intention were not operative" (Shanley 1987, p51). Like Anscombe, Grizez and May, Shanley distinguishes this artificial contraception act from natural family planning. Non-contraceptive intercourse (NFP) reveals a different structure. It is an intrinsically generative kind of act both physically and intentionally. There may be a further intention to avoid conception as could be the case in NFP, but the act itself does not embody the present intention to avoid conception as is the case when there is interference by artificial birth control. The further intention to avoid conception does not cause infertility since the act is found to be infertile on its own. The intention to avoid conception is manifested in the determination to avoid intercourse during the woman's fertile period, but this choice does nothing to the sexual intercourse that is chosen during infertile periods to render it anti-generative (Shanley 1987, p51-52).

It is puzzling how an act in natural family planning which we intend to be non-procreative and is, indeed, because of our planning non-procreative, can be called an intrinsically generative kind of act both physically and intentionally. And when the author says, "the further intention to avoid conception does not cause infertility since the act is found to be infertile on its own," we might note that in actual fact the act is infertile, but this is different from saying nature intends the act to be infertile so we can use the conjugal act in a way it will be infertile. The days that are
infertile in a woman's cycle are days in which nature is working diligently to prepare the egg and move it to the proper place and after the fertile days remove it so a new egg can be prepared.

Should we call these days devoted to preparing for fertility days which nature intends to be infertile, as if she wants to thwart her procreative designs, or should we call them days which are accidentally infertile because of the nature of human fertility?

Janet Smith (1990) presents in a forceful way the central arguments of *Humanae Vitae*:

"Of particular interest will be the claim that each and every act of marital intercourse must remain "open" to procreation and the claim that the unitive and procreative meanings of marital intercourse are inseparable." (1) But naturally it is important to look carefully at these clearly stated arguments to see if they succeed in further justifying the reasoning of *Humanae Vitae*. The critical point of the encyclical is found in "each and every marital act must be open to procreation", and Janet Smith asks, "Is there an inconsistency in permitting sexual intercourse during a woman's infertile period and also insisting that each and every marital act must remain open to procreation?" Are not couples who confine their acts of sexual intercourse to the infertile periods "closed to procreation?" (2) In answer, first, she admits that people who use the infertile period in this way may be subjectively no more open to having children than people who use artificial contraceptives. This admission is unavoidable less we end up saying we are deliberately using the infertile period because we want children which, of course, would make no sense at all.

She continues that *Humanae Vitae* is not talking about subjective openness but, "it is speaking about their (the spouses') objective acts of sexual intercourse." (3) In short, the acts must remain open even if the subjective intention is closed. "The spouses may do nothing to deprive the act of its ordination or destination to procreation. They may do nothing to "close off" the possibility of the act achieving its natural ordination. And here is the point. At certain times, procreation is simply not available to spouses for reasons beyond their control. Although their marital acts will
be no less infertile than those of a couple practicing artificial contraception, their acts have not by their own will been deprived of their proper ordination." (4) This is a very interesting passage. If a couple undertakes to carefully plot by temperature and time when the marital act will be infertile because they will and intend the act to be infertile, can we say that they have done nothing to "close off" the possibilities of the act achieving its natural ordination? Can we say that "procreation simply not available to spouses for reasons beyond their control"? They know or fervently hope they know when procreation is available and when it is not, and they are precisely trying to eliminate procreation. The author continues, "Still in spite of this important distinction between subjective desire and objective act, perhaps all is not clear," (5) which is a sentiment I can certainly endorse. "What can it mean to say the acts of sexual intercourse during the infertile periods are "open to" or” (per se destinatus") to procreation...

In answer Janet Smith argues "that the sexual organs are naturally ordered to procreation", a point which is well taken and which I agree with. And she continues; "Is there not a difference between the situation where an organ cannot perform its function because of some defect and a situation where some agent deliberately deprives the organ of its ability to perform its function?" (6) And to this I agree, as well. And in contracepted acts of intercourse "acts of sexual intercourse are performed but they have been kept from achieving the end of procreation to which they are ordained." (7) This, too, is correct, and the author continues; "the above analysis should help us understand what Humanae Vitae means by stating that every marital act must remain per se destinatus to procreation. It means that couples must not tamper with the natural ordination of their marital acts. It does not mean that couples must desire children with each and every act of intercourse. Nor does it rule out sexual intercourse during a woman's infertile period, for acts of sexual intercourse during these periods, as we have seen, do meet the criteria of being
ordained to procreation." (8) In this passage we are given three meanings of this central point in *Humanae vitae*:

(i). "It means that couples must not tamper with the natural ordination of their marital acts."

(ii). "It does not mean that couples must desire children with each and every act of intercourse."

This is not clear. If the act is to be open to procreation, then they cannot intend and act not to procreate. They must be open to this possibility, whether it is in the forefront of their minds or not. They cannot say I do not want a child, and take means to avoid procreation, and then in any meaningful way say that they have respected the procreative nature of the marital act.

(iii). "Nor does it rule out sexual intercourse during a woman's infertile period, for acts of sexual intercourse during these periods, as we have seen, do meet the criteria of being ordained to procreation." Here we have to distinguish. If a couple has sexual intercourse with an openness to procreation they realize a child can be conceived, and they take no steps to prevent this conception and the act is infertile because, unknown to them, they did it during the infertile time, then they have left the act open to procreation. But if they intend not to have a child, and they deliberately act so as to have sexual intercourse when they know or hope the act will be infertile, how can we say the act is still open to procreation? Subjectively by their intentions and objectively by their calculations they strive to close the act to procreation.

A little later, Janet Smith argues that, "...God has so designed human fertility and human sexuality that humans are sometimes fertile and sometimes not. It is permissible for spouses to enjoy marital intercourse at any time, whether they are infertile or fertile. God seems to have designed the human system this way to foster union and happiness between spouses." (9) "They are pursuing the good of union when another is not available." (10) Women by nature are certainly sometimes fertile and sometimes not. But this does not mean there is a God given
natural method of family planning, for then we have to ask why God waited until the time of Pius XII to reveal it. It is easier and more correct, I think, to argue that the patterns of human fertility are designed to aid procreation, and not as a natural means of avoiding procreation. The patterns of fertility are per se ordered to procreation and per accidens infertile. And in natural family planning the good of procreation is not available because we will it to be not available.

Next, Smith deals with the debate about the ends of marriage. Again, *Humanae Vitae* short-circuits this debate by asserting that the unitive and procreative significances of the sexual act are knit together in an indissoluble nexus. This means not just that spouses should not seek one without the other, but that indeed, they cannot achieve one without the other. Indeed, to seek one without the other is to violate the very meaning of the act. Thus, for a conjugal act to be unitive, it must in some sense by procreative as well (that is, at least per se destinatus to procreation), and for it truly to be procreative it must also be unitive hence one of the major objections of the Church to artificial insemination even for spouses.

Therefore, she concludes that contracepted sexual intercourse yields neither the good of procreation nor the good of spousal unity. (11) Can this serve as a way to distinguish certain artificial contraceptives used by married people from the use of natural family planning? She continues to argue that sexual intercourse should not be robbed of its procreative meaning to create the bond that is proper to spousal intercourse, for spousal union requires that the spouses give full of themselves to one another. Theirs is to be a total self-giving. But by using contraception they are withholding their fertility and all that being open to child-bearing entails. Being open to child-bearing is an essential feature to spousal intercourse. (12) But just what is the content of this total self-giving that can be found in a couple practicing natural family planning and not in one using certain artificial contraception? It can't be the generation of new life, for that takes place in neither, nor can it be a subjective giving in love in view of the
children they have or will have in the future, for that can happen in both cases. But Smith responds “being open to child bearing" does not mean that the couple must intend to have a child in each and every act of sexual intercourse. Rather, it means that the couple has done nothing to deprive an act of sexual intercourse of its baby-making possibilities.

Thus, those who are infertile whether through age or physical abnormality or through the periodic infertility all women experience by nature have not negated the procreative meaning of sexual intercourse. If engaging in sexual intercourse in a spousal way, they are still expressing the desire for a union appropriate for spouses, a union that would accommodate children if children were a possibility. The meaning may be present in sexual intercourse only symbolically but it is there nonetheless. (13) We have already looked at this kind of reasoning. I don't see how “a couple practicing natural family planning can be said to have done nothing to deprive an act of sexual intercourse of its baby-making possibilities". They are certainly not expressing or intending a desire for a child, which child is for them a very real possibility or else they would not be going to all this bother to avoid having this baby. And what does a symbolic baby-making possibility mean? It would only make sense if we intended to have a child and forces beyond our control prevented us. This is very different from intending not to have a child and acting on this intention.

Although it is by no means the only approach she takes in attempting to establish that certain acts (artificial contraception) ought to be avoided, it is certainly one of the approaches she takes. In *Humanae Vitae* a Generation Later, (Smith 2010) for example, Smith claims that there is a moral difference between using natural family planning (NFP) and artificial contraception, and that couples ought to avoid using artificial contraception. In the course of attempting to substantiate these claims, she points out the following: (a) the divorce rate among couples who use artificial contraception is over 50 percent whereas divorce is extremely rare for couples who use NFP; (b)
there is evidence that the increase in the divorce rate in the mid seventies can be attributed to the use of artificial contraception; (c) the use of NFP can lead to an improvement of communication between married couples; (d) the use of NFP can lead to an increase in respect for women and a lowering in objectification of women; (e) the self-mastery gained by couples using NFP can lead to greater harmony in one’s relationships both in and outside the home; and (f) when couples are motivated and well informed, NFP is as effective as artificial contraception as a method of family planning. Smith also provides a testimonial of a woman who used various types of artificial contraceptives and found the results to be far less desirable than the results of using NFP. Smith’s general assertion is, if you want to increase your chances of having a long-lasting and healthy marriage, you ought to avoid using artificial contraception.

Although Smith's derivation may seem to be consequentialist insofar as she focuses on the consequences of artificial contraception versus those of using NFP, she elsewhere asserts that artificial contraception is not wrong because it has bad consequences, but … because artificial contraception is wrong, it will have bad consequences. She likewise argues that artificial contraception is wrong because it violates the dignity of the human person rather than merely because it has bad consequences (Smith 2010). Assuming acts that violate the dignity of the human person can be equated with acts that damage or go against human nature, Smith’s specific assertions can be formulated as follows: Contraception is wrong because it damages or goes against human nature, Because it damages or goes against human nature, it leads to bad consequences. If you want to avoid these bad consequences, you ought to avoid using it.

These specific assertions can be understood as instantiations of both the ontological and sanctions claims of natural law theory. They are instantiations of the former insofar as human nature is the grounding for the Ought; and they are instantiations of the latter insofar as it relies on the principle that acting contrary to the way one ought leads one away from flourishing. If
one were to ask why ought I to avoid artificial contraception? The answer would be; because doing so results in undesirable consequences. In turn, if one were to ask why it has undesirable consequences, the answer would be; because it is contrary to your nature and, hence, it is damaging. Autonomy of the will is not respected here, according to Kant it is our duty to choose a right intention not focusing on the consequences. NFP and artificial contraception are chosen out of inclination that conception does not occur then, they are both contralife regardless of the consequences (Kant 1788).

3.4 Conclusion

This chapter has illustrated that the contralife thesis has failed to make a case for distinguishing between artificial contraceptives and natural family planning in contralife terms, and *Humanae Vitae* and its defenders were also unable to make such a distinction. The reason that these attempts have failed is because there is no moral case so far stated which can distinguish NFP and artificial contraception. Since the intention of avoiding pregnancy is present as both the integral and as an end in cases of natural and artificial methods. If this intention of avoiding pregnancy is not generally wrong, it does not matter whether it is integral to the act or not. In any form of contraception whether natural or artificial, the intention is to prevent conception as a means to an end, which is to realize the goods which accompany the choice to use artificial contraception and/or to avoid the evils which would accompany not choosing to contracept. It is clear therefore, that both natural and artificial contraception have a choice and an intention to impede conception.
CHAPTER FOUR
THE MORALITY OF CONTRACEPTION

4.1 Introduction

This chapter will seek to examine whether the acts of contraception (natural and artificial) are morally right or morally wrong following the contralife argument that artificial contraception is morally unacceptable and that natural birth control method is morally acceptable. The study also tries to propose some critical remarks that arise from the contralife thesis as a way of trying to provide a solution on the debate on contraception.

4.2 Openness to the Transmission of New Life

The contralife theorists argue that a sexual act is open to procreation if there is a spirit that is open to procreation (Grisez et al. 1988, p381-8, Smith 1991). It is pretty mysterious what ‘a spirit open to procreation’ is. However, no matter how we interpret their words, it seems that any conscious and intentional prevention of conception by either natural or artificial equally disregards the spirit of openness to procreation. Anscombe (1975) did not consider that a couple should have as many children as they possibly could and she holds that abortion is far more wrong than contraception. So, the mere intention of avoiding conception is not opposed to the spirit of procreation. She writes that it is undeniable that married couples, for acceptable reasons, are perfectly clear in their intention to avoid children (Anscombe 1975). Moreover, she refers to the words of Pope Paul VI in *Humanae vitae* that it cannot be denied that a marital couple is perfectly justified in their intention to control conception and the birth of a child. “It cannot be denied that in each case the married couple, for acceptable reasons, are both perfectly clear in their intention to avoid children and wish to make sure that none will result” (Pope Paul VI 1968: 16).
If the intention to avoid conception is morally legitimate, it does not matter whether it is integral to the act, or only furthered. So, from the perspective of the spirit open to procreation, artificial contraception is open to procreation just as much as natural birth control; any prevention of conception disregards the openness to procreation and consequently, natural birth control contravenes to the spirit open to procreation in the same way artificial contraception does.

Secondly, if the intention of avoiding pregnancy is not morally wrong in itself then the intention behind the choice of artificial methods is morally acceptable as well as the intention behind the NFP method. It seems that the intention of avoiding pregnancy is present as the integral intention both in cases of natural and artificial methods, but if this intention of avoiding pregnancy is not generally wrong, it does not matter whether it is integral or not to the act.

Although, Anscombe also writes that the sexual act as a physical act is open to procreation if it is intrinsically generative, a sexual act in which the couple uses artificial method is not intrinsically generative and a certain difference in intentions can be noticed. There is a difference in the intention to intervene into the sexual intercourse by using artificial devices that can prevent pregnancy and the intention to use the NFP method to prevent pregnancy. Therefore, the only relevant difference between these two legitimate intentions to avoid conception and pregnancy is the intention to use an artificial device. Moreover, she writes that a sexual intercourse is defective and shameful if, before, during or after the act the couple does something that assumes the prevention of conception (Anscombe 1981). We realize now that ‘does something’ refers to the use of artificial devices.

**4.3 Natural and Artificial: Are They Morally Permissible?**

What is morally wrong with the use of artificial devices? The contralife thesis hold that artificial contraception is necessarily immoral because it actively make procreative potential infertile and therefore contralife, on the other hand, NFP is not necessarily immoral because it is a passive act
of making procreative potential infertile and therefore not necessarily contralife (Grisez, et al. 1988). Anscombe on the other hand explicitly states that she is not against the use of artificial means in general and that the mere use of artificial means is not contrary to natural law. There are permissible interferences in the natural order of things, but the use of artificial contraceptives is not; it opposes to the natural law, which is understood as the moral law in a similar way in which conception without sexual intercourse opposes to the natural law (Anscombe 1981). So, we can ask her a question: how can an act that is essentially correct (the use of artificial devices in general) become wrong because a part of its character involves an intention to avoid conception that is also correct? (Teichman 2003)

If someone wants to claim that sexual intercourse with artificial devices is morally distinctive from a sexual intercourse without them, it is necessary to provide further explanation why the usage of artificial devices in this specific case is not morally appropriate. Namely, it implies that only the sexual intercourse without artificial contraception could be treated as natural behaviour, while the other one is not natural and hence it is defective and shameful. Firstly, it is crucial to define what ‘natural behaviour’ is and why such behaviour excludes intercourse with artificial devices. Secondly, it is necessary to explain why natural behaviour in a ‘physical sense’ is exclusively moral or, even if we accept that only the sexual intercourse without artificial devices is physically natural, why is such natural behaviour exclusively moral?

Some philosophers argue that there is no sense in talking about the natural and the unnatural in sexual relations because there is no sexual behaviour that is not natural (Slote 1975). Contrary to such a stance based on the authority of nature, Catholic philosophers ground their stance on the authority of the creator. However, it is worth noting that it is possible to separate the view, which claims that procreation is the primary function of a sexual relationship from the religious or theistic assumptions; for instance, from the perspective of evolutionary theory of human
sexuality, a sexual relationship in which it is not possible to conceive due to artificial devices is unnatural and deviant. However, the qualifications need to be understood exclusively in a biological sense. Such behaviour opposes to the natural purpose or function of sexual intercourse, but it does not mean that such behaviour is morally defective. In other words, even if we accept that the use artificial contraception is not natural in a biological sense, this claim cannot be extended without any further explanation, into a position that the use of artificial contraception is immoral (Ruddick 1984). It is seriously misleading to identify the biological (physical) structure of sexual act with the moral structure of a sexual act.

Secondly, if we identify ‘natural behaviour’ with behaviour that is in accordance with the natural law conceived as an ethical cogito, there is also no reason to classify sexual intercourse with artificial contraception as unnatural behaviour. Namely, there are two basic kinds of arguments which might be offered in defence of the position that artificial contraception should be classified as unnatural behaviour as opposed to natural law; the analytical argument and the empirical argument. There is no analytical (conceptual) relationship between a sexual intercourse with artificial contraception and the idea of the natural law, which is understood as an ethical imperative about the full realization of human nature (Ruddick 1984).

The biological (physical) structure of any act cannot determine the moral status of the act, and no reason is offered to think that a sexual act is an exception. Also, there is no empirical evidence in favour of correlation between artificial contraception and the alleged ‘evil effects’ against nature or the natural law such as; the high divorce rate, infidelity, hostility towards children, the lack of self–control, selfishness, sterility, race extinction, or even adultery and abortion. The same reasons that are used to justify the natural family planning method as consistent with the natural law—medical, eugenic, economic, and social may also justify artificial contraception. The principles of natural law, in certain circumstances, may even demand the usage of artificial birth
control as well as they demand NFP (Beis 1965, 277-284). Contrary to the objection that sexual relations with artificial contraception are a manifestation of morally suspicious, self-centered and egoistic ethics, altruistic ethics could require the use of artificial contraception in the circumstances of overpopulation (Cooper 1931).

We can now conclude that nothing concerning artificial contraception can possibly make a sexual act unnatural in any morally relevant sense. If there isn’t anything wrong in the intention not to conceive during sexual intercourse, if there isn’t anything wrong with artificial devices and if intercourse with artificial devices is not unnatural in a morally relevant sense, the only question left to consider is whether active intervention with artificial devices is morally relevant distinction.

4.4 Active Intervention

According to the contralife theorists, NFP is not an action which prevents conception; rather, it is a passive acceptance of the effect, namely, no conception. The couple practicing NFP abstains for some intended purpose. They carefully calculate when to abstain, and they choose to put forth the effort to abstain for a reason. The project intentionally altering a regular pattern of sexual relations is organized for an end, viz., to prevent the couple from causing a new life (Grisez et al. 1988, p389).

Likewise, in artificial contraception, one takes certain measures at the proper time in order to prevent the sperm from meeting the ovum. Thus, artificial contraception and NFP are, in a relevant sense, positive acts. Just as the serious abstainer understands that sperm could possibly reach the ovum and thus takes measures to prevent it, so the contraceptor sees the possibility that the sperm could reach the ovum and takes measures to prevent it. They are both employing intended precautionary means in order to insure that the sperm will not meet the ovum.
It could be said that active intervention with the use of artificial contraceptives into a sexual intercourse with the aim to prevent conception is morally defective behaviour while the NFP method is not because there is no active intervention with any devices. Active interference in the procreative process is impermissible while passively letting things happen in the procreative process is, on the other hand, permissible. Such a stance can be comparable with the anti-abortionist stance that abortion is wrong because it is an active interference that kills a person (a fetus) while letting a person (a woman) die due to pregnancy is not. Also, in a debate about euthanasia, active killing is morally far more severe than passive not-saving someone’s life.

It needs to be realized that there is no analogy between these debates about abortion and euthanasia on the one side and the debate about contraception on the other. As we could previously see, contraception is not a question of killing or letting die, since there is not a person or a human being here. Some other debates about the moral distinction between killing and letting die stress the questions about responsibility and intention. However, as we tried to show above, none of the arguments succeeded in showing the distinction in intentions that could imply a distinction in responsibilities.

Finally, the natural family planning method cannot be classified as passively letting things happen because a couple actively counts the fertile and the infertile days using a calendar or measuring the basal temperature. A couple intentionally and actively takes part in sexual intercourse during the infertile days in which they are temporary infertile just because they are infertile. It is not the case that sexual intercourse happens to them during a period in which they are temporary infertile. So, both natural and artificial contraception are certain prevention strategies. The difference between the artificial and natural birth control methods can eventually be in the difference between the ‘passive’ and ‘active’ prevention strategies to avoid risk.
However, no prevention strategy can be considered passive behaviour. In other words, active interference as a trait of solely artificial contraception cannot be a morally relevant distinction.

**4.5 Pleasure and Contraception**

I will try to propose a possible hidden assumption in this stance about what is the morally relevant distinction between the sexual intercourses in which a couple uses natural and the sexual intercourses in which the couple uses artificial methods of birth control. Also, I will try to demonstrate that, even under such an assumption, there is not a morally relevant difference.

If artificial contraception was morally permissible it would imply that all sexual intercourse conducted solely by the desire for pleasure is right. According to the procreative theory of sexuality, however, pleasure in itself may not be the goal of sexual intercourse. While *Humanae Vitae* legitimizes pleasure in marital sexual relations in a sense that it is not condemned, pleasure still may not be the purpose of sexual relations. Since the acceptance of artificial methods of birth control can result in sexual intercourse purely motivated by pleasure, it would result in ‘the general lowering of moral standards. “Not much experience is needed to be fully aware of human weakness and to understand that human beings and especially the young, who are so exposed to temptation need incentives to keep the moral law, and it is an evil thing to make it easy for them to break that law. Another effect that gives cause for alarm is that a man who grows accustomed to the use of artificial contraceptive methods may forget the reverence due to a woman, and, disregarding her physical and emotional equilibrium, reduce her to being a mere instrument for the satisfaction of his own desires, no longer considering her as his partner whom he should surround with care and affection” (Kant 1963, Paul II 1981, Paul VI 1968: 17).

Such an interpretation could be supported by Anscombe who maintain that the use of artificial contraceptives by a married couple is worse than adultery and that it is contrary to the idea of
marriage itself (Anscombe 1975). A marriage in which there is an intention to enjoy sexual relations while also avoiding the full intention of conception is incorrect. Therefore, the approval of artificial contraception legitimizes and allows invalid marriages that are based purely on pleasure.

From this perspective, we can now interpret the previously elaborated distinction between natural and unnatural sexual relations. For example, Donald Levy defined ‘unnatural’ in terms of the basic human goods: the basic human goods are those which are necessary and those anyone wants regardless of circumstances, such as life, health, control of physical and mental functions, the ability to acquire knowledge, love and the capacity to love (Levy 1980). The basic human goods are those that define humanity in a way that the lack of such goods can be identified with inhumanity. It is unnatural for human beings to reject their own or others’ basic human goods except in some extreme cases in which the basic goods themselves are in conflict. Pleasure is not a fundamental human good. When someone sacrifices their own or other people’s fundamental human goods to pleasure, it can be said that it is an unnatural or deviant act.

So, we can now offer a possible answer to our questions about what is wrong with artificial birth control or what is the morally significant difference between the natural and the artificial birth control methods than can justify the different treatment of these methods:

1. It is wrong that pleasure is the purpose of sexual relations;
2. Artificial methods of birth control can result in sexual relationships motivated purely by pleasure;
3. Therefore, artificial contraceptives are not acceptable.

I have no intention to claim here that this interpretation is correct; such a hypothesis definitely requires further investigation. However, I would like to stress that even under this interpretation
there is no valid reason not to allow artificial contraception if a natural method has already been approved.

I agree with Igor Primoratz, who claims that pleasure is not morally valuable in itself, but it is also not immoral in itself either. Pleasure can be good in a sense that is not amoral, so pleasure does not have to seek moral legitimacy. Pleasure is not subject to moral judgment unless it involves violence or other forms of coercion and manipulation, in which case it can, naturally, be immoral (Primoratz 1999, Kant 1788).

4.6 Conclusion

From the study findings, it is evident that any prevention of conception disregards the spirit of openness to procreation, and consequently, natural birth control contravenes to the spirit open to procreation in the same way artificial contraception does. Therefore, if the intention of preventing pregnancy is not morally wrong in itself, then the intention behind the choice of artificial methods is morally acceptable as well as the intention behind the choice of NFP method.

Nothing concerning artificial contraception can possibly make a sexual act unnatural in any morally relevant sense. If there isn’t anything wrong in the intention not to conceive during sexual intercourse, if there isn’t anything wrong with artificial devices and if intercourse with artificial devices is not unnatural in a morally relevant sense the only question left to consider is whether active intervention with artificial devices is morally relevant distinction. However, no prevention strategy can be considered passive behaviour. In other words, active interference as a trait of solely artificial contraception cannot be a morally relevant distinction. Finally, if artificial contraception is morally permissible it would imply that sexual intercourse is conducted solely by the desire for pleasure but Pleasure is not subject to moral judgment unless it involves
violence or other forms of coercion and manipulation. Thus, there is no proper way of justifying that artificial contraception is morally wrong and that NFP is morally right.
CHAPTER FIVE
GENERAL CONCLUSION

The analysis in this study has illustrated that the contralife approach has failed to significantly differentiate artificial contraception from NFP. Not only does the contralife approach fail to adequately distinguish the two, but the contralife theorists seem to have an unorthodox understanding of NFP. According to Grisez, Boyle Finnis and May, the sin of artificial contraception would be evil in the same respect as the sin of using NFP without a good reason. Artificial contraception, however, seems to be a different kind of act than the misuse of NFP. Artificial contraception is always an attack upon the nature of the sexual union; NFP never is. The use of NFP without good reasons may be a selfish abuse of marriage, but it is not morally equivalent to artificial contraception. Furthermore, the contralife theorists claim that one may not will that a possible person not come to be, yet one may emotionally not want a baby which might be conceived while using NFP. This is an odd conception of NFP, for it would seem, to the contrary, that those using NFP may positively will that a possible person not come to be, but, apparently, they should never emotionally, or otherwise, not want a baby actually conceived in their sexual union. In other words, they should not be using NFP if they are not intending to joyfully receive any child with which they might happen to be blessed. Considering the other conclusions which follow from the contralife thesis, it seems that such an approach actually leads to a more confused understanding of the contraception issue.

So, both natural and artificial methods of birth control are certain prevention strategies. The difference between the artificial and natural birth control methods can eventually be in the difference between the ‘passive’ and ‘active’ prevention strategies to avoid risk. However, no prevention strategy can be considered passive behaviour. In other words, active interference as a trait of solely artificial contraception cannot be a morally relevant distinction. They are both
employing intended precautionary means in order to ensure that the sperm will not meet the ovum.

Additionally, most people do not use artificial contraception in order to fully avoid procreation but as a method of family planning that is more reliable than the NFP method. Sexual relationships with artificial contraception are motivated by the seeking of pleasure just like the sexual relationships in which the couple relies on natural methods. Moreover, it is possible to imagine that couples that ‘sacrifice procreative potential to pleasure’ rely completely on natural birth control methods. So, there is nothing essential in natural contraception that prevents ‘invalid marriages based purely on pleasure’. Also, there is nothing in artificial contraception that implies that sexual relations with artificial contraceptives necessary signify the indifference to the (alleged) fundamental good of procreation. Therefore there was no way to distinguish natural family planning from certain artificial contraceptives on the basis of the nature of the conjugal act, that is, its physical procreativeness and its spiritual or unitive procreativeness.

An examination of the contra-life thesis and post-*Humanae Vitae* literature lead us to reaffirm the conclusion that there is no way to distinguish NFP from artificial contraception in their motivation, agency or intention to regulate birth, and that this motivation should serve as a clarification and reconciliation of the principles enunciated in *Humanae Vitae*, the contra-life thesis and Kantian ethics on motivation. Married people ought to have the freedom to use the conjugal act to express and develop the love they have for each other. At the same time, with this freedom, even if it is expressed by means of NFP, comes responsibility. This responsibility embraces their vocation to be parents, their need to subordinate the use of the conjugal act to the love they have for each other, and the growing realization that the conjugal act is not some eternal absolute, but stands in tension to its integral beginnings and its transformation in the life to come.
The findings of this study are thus summarized as follows:

1. Contraception (natural or artificial) is an active act intended to prevent the coming to be of new human life. Any active contraceptive act involves a choice of doing something to ensure that procreative potential is impossible, therefore contraception choice whether natural or artificial is contralife.

2. Most people do not choose artificial contraception in order to fully avoid procreation but as a method of family planning that is more reliable than the NFP method.

3. Choices of preventing conception have intent that conception does not take place, artificial contraception and natural contraception are choices of preventing conception, and therefore, natural and artificial contraception have intentions and choices that conception do not occur.

4. Any method of preventing of conception disregards the spirit of openness to procreation and, consequently, natural birth control contravenes to the spirit open to procreation in the same way artificial contraception does.

5. There is no proper way of justifying that artificial contraception is morally wrong and that NFP is morally right since, both involve active choices of preventing conception and are not open to the spirit of procreation.

Therefore, the practice of natural family planning, or the use of other forms of contraceptives, is not the conclusion to the question of contraception, but one step on a journey in which we see in the use of the conjugal act, reflections of the original state of justice, the fall, the slow working out of redemption and the life to come. However, I would like to stress that even under this interpretation there is no valid reason not to allow artificial contraception if a natural method has
already been morally approved. Hence, none of the two methods is morally better and either can be used as an acceptable method of contraception.


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