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# Is Using Contraceptives Always Sinful?

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**D**uring a Feb. 18, 2016 press conference on a flight from Juarez, Mexico, to Rome, a reporter questioned Pope Francis about the Zika virus. “Holy Father, for several weeks there’s been a lot of concern ... regarding the Zika virus,” the reporter said. “The greatest risk would be for pregnant women. There is anguish. Some authorities have proposed abortion, or else to avoid pregnancy. As regards avoiding pregnancy, on this issue, can the church take into consideration the concept of ‘the lesser of two evils?’”

Pope Francis unequivocally condemned the abortion option.

“Abortion is not the lesser of two evils. It is a crime,” he said. “It is to throw someone out in order to save another. That’s what the Mafia does. It is ... an absolute evil.” He then added, “On the ‘lesser evil,’ avoiding pregnancy, we are speaking in terms of the conflict between the Fifth and Sixth Commandment. Paul VI, a great man, in a difficult situation in Africa, permitted nuns to use contraceptives in cases of rape.”

Critics of the Pope’s remarks raise grave concerns regarding his opinion. They most often cite *Humanae Vitae*, which in Part II, section 14, prohibits “any action which either before, at the moment of, or after sexual intercourse, is specifically intended to prevent procreation.” The critics conclude that using condoms to reduce the likelihood of Zika transmission amounts to directly intending contraceptive acts of intercourse as a means to a good end. Consequently, “the Pope has asserted something that is false and contrary to salvation.”

In light of Pope Francis’ comments and the criticisms they have received, I offer a modest review of cases that raise questions about the use

of contraceptives and, I hope, situate the Pope’s remarks.

## THE BELGIAN CONGO CONTROVERSY

Moral and pastoral concerns arose in the early 1960s regarding the plight of religious sisters and other women caught up in Belgian Congo uprisings. These women were given anovulant drugs by “doctors on the mission” in order to ward off pregnancy that might otherwise result from rape, which was a constant threat in that chaotic time. The physicians and their moral advisers did not consider their action either contraception or direct sterilization, in the sense in which the church stood against such interventions to prevent pregnancy.

Eminent Roman moralists Monsignor S. E. Pietro Palazzini, Francesco Hürth, SJ, Monsignor Ferdinando Lambruschini and Marcellino Zalba, SJ, addressed this plight by asking whether or not a nun or any woman who reasonably fears she may be raped can take progesterational drugs to induce temporary sterility to prevent a possible conception. The nuns, of course, had no intention of consenting in any way to violent action imposed on them. These theologians gave posi-



tive replies by appealing to the principle of legitimate self-protection.

Zalba was a strong defendant of *Humanae Vitae*, and along with John Ford, SJ, persuaded Pope Paul VI to reject the recommendations of the majority opinion of the papal commission on contraception. On the issue at hand, however, he wrote, “the intention ... is not the interruption of ovulation but the prevention of the consequences of a ... violation of chastity.” The nuns were protecting themselves from physical and emotional disorder created by fear. Due to this “good motive,” the moralists concluded that the medical intervention constituted only “indirect sterilization.” Consequently, the nuns incurred no moral culpability, as all the blame and responsibility rested on the shoulders of the persons violating them.

The theologians explained that direct sterilization condemned by the magisterium as intrinsically evil is the direct sterilization ordered to prevent procreation in persons who want to exercise their sexual function. The nuns under threat of rape acted morally by ingesting progestational drugs because they had no intention of voluntarily exercising their sexual capability.

Zalba concluded, “We can assert with full conviction that pontifical doctrine does not exclude the putting of physical functions, even those which as functions are quite normal, at the service of the legitimate interests of the acting person. This may be done in order to ward off from the body itself hardships which are being imposed upon the person contrary to the person’s will. Or it may be done to deliver the soul and the spirit from calumny, rejection, social difficulties, etc. Or it may be done so that the person may enjoy simply the condition of liberty which the person does not want to give up.”

Zalba is advocating an application of the principle of self-defense.

In his Apostolic Exhortation *Familiaris Consortio* (1981), St. John Paul II insisted that the conjugal act is both a sign (openness to procreation) and a language (“We love each other as only a husband and wife can”). When the internal commitment to conjugal love is revoked or made inoperable, the

conjugal act itself is counterfeited and bereft of moral dignity. When a conjugal act is forced upon a woman, the language of love is not present and thereby contradicted.

This moral tradition amounts to what is called “solidly probable opinion” that a woman who cannot escape sexual oppression may licitly resort to artificial means to avoid a pregnancy from sexual acts forced upon her. In their extensive study of this question, Ambrogio Valsecchi, in *Controversy: The Birth Control Debate*, and Edward Bayer, in *Rape Within Marriage*, conclude, “This acceptance ... has been carefully reviewed by the teaching authority of the Church without any objections whatsoever.”

#### HIV/AIDS AND THE USE OF CONDOMS

At the time of Pope Benedict XVI’s 2009 visit to Africa, about 30.8 million adults and 2.5 million children worldwide were living with HIV. Sub-

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Saharan Africa was the region most affected. Even though the region has just over 10 percent of the world’s population, it is home to 68 percent of all people living with HIV/AIDS. An estimated 1.8 million adults and children became infected with HIV during 2009, contributing to a total of 22.5 million people living with HIV in sub-Saharan Africa. Southern Africa accounts for around 40 percent of the global total of women living with HIV.

In an interview with reporters during the pope’s flight to Cameroon, a French journalist commented that among the many ills that beset Africa, “one of the most pressing is the spread of AIDS.” The journalist asked the pope if he agreed that “the position of the Catholic Church on the way to fight it is ... unrealistic and ineffective?”

The pope replied, “Just the opposite.”

Benedict pointed out that “the most efficient [and] truly present player in the fight against AIDS is the Catholic Church herself.” He went on to say that the “problem of AIDS” cannot be overcome merely with money; “if there is no human dimension, if Africans do not help [by responsible behavior], the problem cannot be overcome by the distribution of prophylactics.”

In *Light of the World: The Pope, the Church, and the Signs of the Times*, German journalist Peter Seewald’s 2010 book of conversations with Pope Benedict XVI, the pope returned to the subject of HIV/AIDS and condom use. He re-emphasized the importance of the “humanization of sexuality” as the foremost way of combating HIV/AIDS.

“We cannot solve the problem by distributing condoms,” he added. “Much more needs to be done,” as the distribution of condoms is not “a real or moral solution, but, in this or that case, there can be nonetheless, in the intention of reducing the risk of infection, a first step in a movement toward a different way, a more human way, of living sexuality.”

Federico Lombardi, SJ, director at that time of the Holy See press office, explained that the pope’s remarks “cannot be defined as a revolutionary shift” in church teaching. He pointed out that “numerous moral theologians and authoritative personalities have sustained, and still sustain, a similar position.”

On Dec. 21, 2010, the Congregation for the Doctrine of the Faith issued a “Note on the Banalization of Sexuality Regarding Certain Interpretations of ‘Light of the World.’” It explains that Benedict’s remarks were aimed at rediscovering “the beauty of the divine gift of human sexuality” and do not represent “a change in Catholic moral teaching or in the pastoral practice of the Church.”

“Those who know themselves to be infected with HIV and who therefore run the risk of infecting others, apart from committing a sin against the Sixth Commandment are also committing a sin against the Fifth Commandment — because they are consciously putting the lives of others at risk through behavior which has repercussions on public health,” stated the Congregation for the Doctrine of the Faith. The note concludes

that “those involved in prostitution who are HIV-positive and who seek to diminish the risk of contagion by the use of a condom may be taking the first step in respecting the life of another — even if the evil of prostitution remains in all its gravity.”

The 2001 pastoral letter of the Southern African Catholic Bishops Conference similarly asserted that in a case of a married couple in which one spouse was HIV-positive and the other was not, the use of “appropriate” protection to prevent the spread of HIV was acceptable. They defended

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their position by affirming that everyone has a right to defend one’s life against mortal danger.

Fr. Martin Rhonheimer, professor of ethics and political philosophy at the School of Philosophy of the Pontifical University of the Holy Cross in Rome, has upheld this same understanding, particularly in his 2004 article “The Truth about Condoms.” He argued that “a married man who is HIV-infected and uses the condom to protect his wife from infection is not acting to render procreation impossible, but to prevent infection. If conception is prevented, this will be an — unintentional — side-effect and will not therefore shape the moral meaning of the act as a contraceptive act.”

### **THE ZIKA VIRUS AND CONTRACEPTION**

The Zika virus, first discovered in Uganda in 1947, was confined to the equatorial belt in Africa and Asia and thought to cause little more than mild, flu-like symptoms. In 2007, physicians on Yap Island in Micronesia noticed an outbreak of the virus. In 2013, an outbreak in French Polynesia may have infected as many as 19,000 people, and for the first time, the virus was associated with neurological disorders. At some recent point, perhaps during the 2014 World Cup held in Brazil, an



infected traveler brought the virus to Latin America where it has exploded, spreading to more than 20 countries and likely infecting hundreds and thousands of people. The virus has catapulted from obscurity into the spotlight.

Of central concern is what the virus seems to be doing to pregnant women. Since the first case of Zika in Brazil in May 2014, the country has reported some 4,000 cases of microcephaly, a severe birth defect that causes an abnormally small head in infants and minor to major brain damage. The causal relationship of the Zika virus to cases of microcephaly has been under intense investigation.

There is a growing number of Zika cases in the U.S. in travelers who became sick elsewhere and brought the disease home. There is no vaccine for the Zika virus and no cure for microcephaly. On Feb. 1, 2016, the World Health Association declared the Zika epidemic an international public emergency.

Over the coming decades, global warming is likely to increase the range and speed of the life cycle of the mosquito *Aedes aegypti*, which can carry the Zika virus. *Aedes aegypti*, also the carrier of dengue fever, yellow fever and other viruses, is present across the southern tier of the U.S. Recent research suggests that the number of people exposed to the mosquito could more than double to as many as 8 to 9 billion by the late 21st century.

Researchers have been able to recover the entire Zika virus genome from the brain tissue of an aborted fetus with microcephaly, leading some physicians to take the position that the Zika virus is “guilty until proven innocent” for causing microcephaly. The director of the main hospital in Medellin, Columbia, goes so far as stating that any women whose fetuses show signs of the virus should be offered abortion.

In his remarks during the February 2016 press conference, Pope Francis said that avoiding pregnancy is not an absolute evil. As in the case of the nuns in the Belgian Congo, he understands the use of contraceptives in preventing the spread of the Zika virus as a “permitted case.”

In an interview with Vatican Radio, Fr. Lombardi furthered the Pope’s response by indicating that “Catholics with a well-formed conscience can decide to use contraceptives ‘in cases of particular emergency.’ “ This decision must follow only after a “serious discernment of conscience.”

## SUMMARY

These three cases each are situated in different but real-life situations: nuns in the Belgian Congo under the threat of rape; the overwhelming presence of HIV/AIDS in African countries; and the pandemic of the Zika virus with its effects on children born of infected mothers. In the case of the nuns in the Belgian Congo, the use of anovulant drugs was seen as permissible in light of the principle of legitimate self-protection. The nuns, who obviously did not seek sexual intercourse, used the drugs in order to protect themselves from physical, emotional and religious fear and anguish.

In the case concerning HIV/AIDS in Africa, the use of a condom was considered appropriate, although not ideal. The aim was the prevention of infection rather than a direct intent to render procreation impossible.

In the current concerns about the Zika virus present in pregnant women and its link to microcephaly, a husband with a well-formed conscience might use a condom to reduce the likelihood of Zika transmission. Ideally, a husband might abstain from sexual intercourse with his wife as long as she is infected or employ the method of natural family planning. If these measures seem to be an moral impossibility for a couple, the use of a condom in this case is the lesser evil.

The *Catechism of the Catholic Church* in paragraph 2363 reminds us that the “spouses’ union achieves the twofold end of marriage: the good of the spouses themselves and the transmission of life. These two meanings or values of marriage cannot be separated without altering the couple’s spiritual life and compromising the goods of marriage and the future of the family.” The manner in which the dilemmas were addressed in each of the case studies above does not deny or impinge this important church teaching about the true meaning of marriage. Rather, they demonstrate that in dire circumstances, traditional moral principles such as legitimate self-defense and the lesser evil can appropriately be used. The use of contraception is, then, not always a sin.

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