

# Obey Mandate or Scripture

The One More Soul “newspaper” response to the HHS mandate.

## From the Catechism of the Catholic Church

**450** From the beginning of Christian history, the assertion of Christ’s lordship over the world and over history has implicitly recognized that man should not submit his personal freedom in an absolute manner to any earthly power, but only to God the Father and the Lord Jesus Christ: Caesar is not “the Lord.” “The Church...believes that the key, the centre and the purpose of the whole of man’s history is to be found in its Lord and Master.”

**2254** Public authority is obliged to respect the fundamental rights of the human person and the conditions for the exercise of his freedom.

**2255** It is the duty of citizens to work with civil authority for building up society in a spirit of truth, justice, solidarity, and freedom.

**2256** Citizens are obliged in conscience not to follow the directives of civil authorities when they are contrary to the demands of the moral order. “We must obey God rather than men” (Acts 5:29).

**2257** Every society’s judgments and conduct reflect a vision of man and his destiny. Without the light the Gospel sheds on God and man, societies easily become totalitarian.

## From the Declaration of Independence, July 4, 1776

“We hold these truths to be self-evident, that all men are created equal, that they are endowed by their Creator with certain unalienable Rights, that among these are Life, Liberty and the pursuit of Happiness.”

## From the Constitution of the United States of America, Bill of Rights, Amendment I

“Congress shall make no law respecting an establishment of religion, or prohibiting the free exercise thereof; or abridging the freedom of speech, or of the press; or the right of the people peaceably to assemble, and to petition the Government for a redress of grievances.”

## Alexander Hamilton, 1775

“The sacred rights of mankind are not to be rummaged for, among old parchments, or musty records. They are written, as with a sun beam in the whole volume of human nature, by the hand of the divinity itself; and can never be erased or obscured by mortal power.”

## The HHS Mandate: What it is and why it is wrong

“Render therefore to Caesar the things that are Caesar’s, and to God the things that are God’s.”  
“We must obey God rather than men.”

There has been a great deal of confusion about the recent Health and Human Services mandate that requires all employers, including Church-related employers, to provide coverage in their health insurance plans for free contraception, sterilization and abortion. First of all, the mandate is not a mandate

for universal health care coverage. Instead, it forces all employers to pay insurance premiums that fund abortion, contraception, and sterilization. It also forces those employees who pay health insurance premiums to provide funding for free contraception, sterilization, and abortion. This would force all Catholic service agencies such as hospitals, colleges, and social services to either pay for services which Catholic doctrine considers seriously immoral, or to go out of business. This raises several important questions:

- Why is the Catholic Church involved in education, health care, and social service in the first place?
- If the Church has a divine mandate to do works of mercy, does the government have the right to infringe on this process?
- Is contraception health care?
- Is sterilization health care?
- Is abortion health care?

First of all, the Church does have a divine mandate to perform works of mercy, such as education, health care, social services, disaster relief, and so forth. As Pope Benedict XVI makes clear in his encyclical *God is Love*, “For the Church, charity is not a kind of welfare activity which could equally well be left to others, but is a part of her nature, an indispensable expression of her very being.” From this standpoint, service to the needy, in some form, is an obligation of every Catholic (indeed of every Christian), an obligation which binds the conscience of all Christian believers.

Secondly, an obligation placed by God cannot be overruled by any human institution. This is the clear meaning of the first amendment of the US constitution, which reads: “Congress shall make no law respecting an establishment of religion, or prohibiting the free exercise thereof;...” In view of this amendment, any attempt by the government to prohibit members of a religious fellowship from acting according to their faith is unconstitutional.

Thirdly, contraception is not health care. Contraception attacks a healthy system of the body in order to prevent that system from accomplishing its normal functions. Evidence of this situation is provided by the many health problems actually caused by contraceptive methods such as the birth control pill.

Fourthly, sterilization is not health care. Sterilization destroys the same healthy bodily system that contraceptives attack. The unhealthiness of sterilization is shown by the many health problems and social problems associated with sterilization such as depression, sexual dysfunction, and increase of divorce, with all the attendant social problems that arise from divorce.

Fifthly, abortion is not health care. Neither the child nor the mother is made healthier by an abortion, especially not the child. In fact, there are a multitude of health problems associated with abortion—regret, depression, suicide, infertility, and health risks to future children.

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In accord with the *Code of Canon Law*, I hereby grant the *Imprimatur* (“Permission to Publish”) regarding the manuscript entitled *The One More Soul “newspaper.”*



Most Reverend Dennis M. Schnurr  
Archbishop of Cincinnati  
Archdiocese of Cincinnati  
Cincinnati, Ohio  
July 5, 2012

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I. Religious Freedom

The authority to practice one's religion comes directly from God. The Creator writes the practice of worshipping God on our hearts, such that worshipping—practicing one's "religion"—has been a part of human anthropology as far back as human history can be known. No person, institution, or government has a right to limit or define the practice of religion for a person or an institution, unless such practice poses a great risk to an individual human being. Human sacrifice is an obviously unacceptable manner of worship.

The Creator has similarly written on our hearts the desire to care for our fellow human beings, especially our immediate family, but also all of our companions on this Earth. For consistency, we must be able to worship our God and care for one another in a manner that is pleasing to God and consistent with our religious beliefs. Jesus made this explicit as borne out by the Gospel of Matthew: Matthew 22:36.

"Teacher, which commandment in the law is the greatest?" 37 He said to him, "You shall love the Lord, your God, with all your heart, with all your soul, and

with all your mind. 38 This is the greatest and the first commandment. 39 The second is like it: You shall love your neighbor as yourself. 40 The whole law and the prophets depend on these two commandments."

The HHS Mandate is an assault on Religious Freedom because it attempts to restrict religious activity to obeying the First Great Commandment by denying citizens the right to obey the Second Great Commandment in a manner consistent with their religion.

Catechism of the Catholic Church

**1738** Freedom is exercised in relationships between human beings. Every human person, created in the image of God, has the natural right to be recognized as a free and responsible being. All owe to each other this duty of respect. The right to the exercise of freedom, especially in moral and religious matters, is an inalienable requirement of the dignity of the human person. This right must be recognized and protected by civil authority within the limits of the common good and public order.

**1747** The right to the exercise of freedom, especially in religious and moral matters, is an inalienable requirement of the dignity of man. But the exercise of freedom does not entail the putative right to say or do anything.

Oral Testimony of Most Reverend William E. Lori, Bishop of Bridgeport,  
On behalf of the United States Conference of Catholic Bishops (abridged version)  
Before the Committee on the Judiciary, United States House of Representatives, February 28, 2012

Mr. Chairman and members of the Committee. Thank you for the opportunity to testify today. I would like to discuss the various absurd consequences that have flowed from the HHS mandate.

FIRST: "Without change" suddenly means "with change." On February 10, HHS finalized—as the rule itself said four times, "without change"—the interim final rule imposing the mandate, announced initially last August. Despite this, a surprising number of those who objected vociferously to the initial rule were suddenly and completely satisfied.

The reason for this confusion is that the finalized rule also announced what it described as an "accommodation." But this "accommodation" would not change the scope of the mandate and its exemption, which, as noted above, have now been finalized as-is. Instead, it would take the form of additional regulations whose precise contours are yet unknown, and that may not issue until August 2013.

In sum, for present purposes, the "accommodation" is just a legally unenforceable promise to alter the way the mandate would still apply to those who are still not exempt from it. Moreover, the promised alteration appears logically impossible, for the reasons detailed in my written testimony. Meanwhile, the

mandate itself is still finalized "without change," excluding in advance any expansion of the "religious employer" exemption. Somehow, this situation of "no change," is heralded as "great change," for which the Administration has been widely congratulated.

SECOND: "Choice" suddenly means "force." Let me quote from the letter I issued in my own Diocese: "[HHS] announced last week that almost all employers, including Catholic employers, will be forced to offer their employees health coverage that includes sterilization, abortion-inducing drugs, and contraception. Almost all health insurers will be forced to include those "services" in the health policies they write. And almost all individuals will be forced to buy that coverage as a part of their policies."

I emphasize this word—"force"—precisely because it is one of the key differences between a mere dispute over reproductive health policy and a dispute over religious freedom.

This is not a matter of whether contraception may be prohibited by the government. This is not even a matter of whether contraception may be supported by the government. Instead, it is a matter of whether religious people and institutions may be forced by the government

to provide coverage for contraception or sterilization, even if that violates their religious beliefs. It is not a matter of "repackaging" or "framing" this as a religious freedom dispute. It is a matter of acknowledging the basic fact that government is forcing religious people and groups to do something that violates their consciences.

THIRD: Liberalism has suddenly become illiberal. When the mandate was first proposed in August, and then reiterated in January, people and groups of all political stripes—left, right, and center—came forward to join us in opposing it. But now, the mere prospect of the "accommodation" described above has caused some simply to abandon their prior objection. In so doing, they undermine the basic American values that they would otherwise espouse.

Only in the post-mandate world might it be considered "liberal" for the government to coerce people into violating their religious beliefs; to justify that coercion based on the minority status of those beliefs; to intrude into the internal affairs of religious organizations; to crush out religious diversity in the private sector; and to incentivize religious groups to serve fewer of the needy.

FOURTH: Sterilization, contraception,

and abortifacients are essential, but "essential health benefits" are not.

In December, HHS acted to define the "essential health benefits" mandate, which encompasses categories of services so important that they must be included in health plans, like prescription drugs and hospitalization. But notably, HHS handed off to each state the decision what particular benefits should be mandated.

Thus, although HHS will brook no dissent regarding whether sterilization, contraception, and abortifacients, must be covered as "preventive services," HHS is essentially indifferent regarding what is—or is not—mandated as an "essential health benefit." As a result, genuinely beneficial items may well be omitted from coverage, state-by-state. By contrast, states have no such discretion with respect to sterilization, contraception, and abortifacients.

In conclusion, the Respect for Rights of Conscience Act (H.R. 1179, S. 1467) would help bring the world aright again. This legislation would not expand religious freedom beyond its present limits, but simply retain Americans' longstanding freedom not to be forced by the federal government to violate their convictions.

Thank you.

"I am honestly horrified that the nation I have always loved has come to this hateful and radical step in religious intolerance."  
— Bishop Daniel Jenky of Peoria

## Our First, Most Cherished Liberty A Statement on Religious Liberty

By The United States Conference of Catholic Bishops Ad Hoc Committee for Religious Liberty

We are Catholics. We are Americans. We are proud to be both, grateful for the gift of faith which is ours as Christian disciples, and grateful for the gift of liberty which is ours as American citizens. To be Catholic and American should mean not having to choose one over the other. Our allegiances are distinct, but they need not be contradictory, and should instead be complementary. That is the teaching of our Catholic faith, which obliges us to work together with fellow citizens for the common good of all who live in this land. That is the vision of our founding and our Constitution, which guarantees citizens of all religious faiths the right to contribute to our common life together.

Freedom is not only for Americans, but we think of it as something of our special inheritance, fought for at a great price, and a heritage to be guarded now. We are stewards of this gift, not only for ourselves but for all nations and peoples who yearn to be free. Catholics in America have discharged this duty of guarding freedom admirably for many generations.

We need, therefore, to speak frankly with each other when our freedoms are threatened. Now is such a time. As Catholic bishops and American citizens, we address an urgent summons to our fellow Catholics and fellow Americans to be on guard, for religious liberty is under attack, both at home and abroad.

### Religious Liberty Under Attack—Concrete Examples

Is our most cherished freedom truly under threat? Sadly, it is. This is not a theological or legal dispute without real world consequences. Consider the following:

HHS mandate for contraception, sterilization, and abortion-inducing drugs...It is a matter of whether religious people and institutions may be forced by the government to provide coverage for contraception or sterilization, even if that violates their religious beliefs."

- Christian students on campus. In its over-100-year history, the University of California Hastings College of Law has denied student organization status to only one group, the Christian Legal Society, because it required its leaders to be Christian and to abstain from sexual activity outside of marriage.
- Catholic foster care and adoption services. Boston, San Francisco, the District of Columbia, and the state of Illinois have driven local Catholic Charities out of the business of providing adoption or foster care services—by revoking their licenses, by ending their government contracts, or both—because those Charities refused to place children with same-sex couples or unmarried opposite-sex couples who cohabit.
- Discrimination against small church congregations. New York City enacted a rule that barred the Bronx Household of Faith and sixty other churches from renting public schools on weekends for worship services...
- Discrimination against Catholic humanitarian services. Notwithstanding years of excellent performance by the United States Conference of Catholic Bishops' Migration and Refugee Services in administering contract services for victims of human trafficking, the federal government changed its contract specifications to require us to provide or refer for contraceptive and abortion services in violation of Catholic teaching...

### Religious Liberty Is More Than Freedom of Worship

Religious liberty is not only about our ability to go to Mass on Sunday or pray the Rosary at home. It is about whether we can make our contribution to the common good of all Americans. Can we do the good works our faith calls us to do, without having to compromise that very same faith? Without religious liberty properly understood, all Americans suffer, deprived of the essential contribution in education, health care, feeding the hungry, civil rights, and social services that religious Americans make every day, both here at home and overseas... The Most Cherished of American Freedoms.

...It is therefore fitting that when the Bill of Rights was ratified, religious freedom had the distinction of being the First Amendment. Religious liberty is indeed the first liberty.

The First Amendment guarantees that "**Congress shall make no law respecting an establishment of religion, or prohibiting the free exercise thereof.**"

Recently, in a unanimous Supreme Court judgment affirming the importance of that first freedom, the Chief Justice of the United States explained that religious liberty is not just the first freedom for Americans; rather it is the first in the history of democratic freedom, tracing its origins back the first clauses of the Magna Carta of 1215 and beyond... That is our American heritage, our most cherished freedom. It is the first freedom because if we are not free in our conscience and our practice of religion, all other freedoms are fragile. If citizens are not free in their own consciences, how can they be free in relation to others, or to the state? If our obligations and duties to God are impeded, or even worse, contradicted by the government, then we can no longer claim to be a land of the free, and a beacon of hope for the world.

### Our Christian Teaching

In his famous "Letter from Birmingham Jail" in 1963, Rev. Martin Luther King Jr. boldly said, "The goal of America is freedom." As a Christian pastor, he argued that to call America to the full measure of that freedom was the specific contribution Christians are obliged to make. He rooted his legal and constitutional arguments about justice in the long Christian tradition:

"I would agree with Saint Augustine that 'An unjust law is no law at all.' Now what is the difference between the two? How does one determine when a law is just or unjust? A just law is a man-made code that squares with the moral law or the law of God. An unjust law is a code that is out of harmony with the moral law. To put it in the terms of Saint Thomas Aquinas, an unjust law is a human law that is not rooted in eternal law and natural law."

The human person has a right to religious freedom. This freedom means that all men are to be immune from coercion on the part of individuals or of social groups and of any human power, in such wise that in matters religious no one is to be forced to act in a manner contrary to his own beliefs...whether privately or publicly, whether alone or in association with others, within due limits...This right of the human person to religious freedom is to be recognized in the constitutional law whereby society is governed. Thus it is to become a civil right.

A recent letter to President Obama from some sixty religious leaders, including Christians of many denominations and Jews, argued that "it is emphatically not only Catholics who deeply object to the requirement that health plans they purchase must provide coverage of contraceptives that include some that are abortifacients."

Together with our fellow Christians, joined by our Jewish brethren, and in partnership with Americans of other religious traditions, we affirm that our faith requires us to defend the religious liberty granted us by God, and protected in our Constitution.

### "All the Energies the Catholic Community Can Muster"

What we ask is nothing more than that our God-given right to religious liberty be respected. We ask nothing less than that the Constitution and laws of the United States, which recognize that right, be respected.

In insisting that our liberties as Americans be respected, we know as bishops that what our Holy Father said is true. **This work belongs to "an engaged, articulate and well-formed Catholic laity endowed with a strong critical sense vis-à-vis the dominant culture."**

As bishops we seek to bring the light of the Gospel to our public life, but the work of politics is properly that of committed and courageous lay Catholics. We exhort them to be both engaged and articulate in insisting that as Catholics and as Americans we do not have to choose between the two. **There is an urgent need for the lay faithful, in cooperation with Christians, Jews, and others, to impress upon our elected representatives the importance of continued protection of religious liberty in a free society.**

We address a particular word to those holding public office. It is your noble task to govern for the common good. It does not serve the common good to treat the good works of religious believers as a threat to our common life; to the contrary, they are essential to its proper functioning. It is also your task to protect and defend those fundamental liberties guaranteed by the Bill of Rights. This ought not to be a partisan issue. The Constitution is not for Democrats or Republicans or Independents. It is for all of us, and a great nonpartisan effort should be led by our elected representatives to ensure that it remains so.

We recognize that a special responsibility belongs to those Catholics who are responsible for our impressive array of hospitals, clinics, universities, colleges, schools, adoption agencies, overseas development projects, and social service agencies that provide assistance to the poor, the hungry, immigrants, and those faced with crisis pregnancies. You do the work that the Gospel mandates that we do. It is you who may be forced to choose between the good works we do by faith, and fidelity to that faith itself. We encourage you to hold firm, to stand fast, and to insist upon what belongs to you by right as Catholics and Americans. Our country deserves the best we have to offer, including our resistance to violations of our first freedom.

To our priests, especially those who have responsibility for parishes, university chaplaincies, and high schools, we ask for a catechesis on religious liberty suited to the souls in your care. As bishops we can provide guidance to assist you, but the courage and zeal for this task cannot be obtained from another—it must be rooted in your own concern for your flock and nourished by the graces you received at your ordination.

**Catechesis on religious liberty is not the work of priests alone. The Catholic Church in America is blessed with an immense number of writers, producers, artists, publishers, filmmakers, and bloggers employing all the means of communications—both old and new media—to expound and teach the faith. They too have a critical role in this great struggle for religious liberty. We call upon them to use their skills and talents in defense of our first freedom.**

Finally to our brother bishops, let us exhort each other with fraternal charity to be bold, clear, and insistent in warning against threats to the rights of our people. Let us attempt to be the "conscience of the state," to use Rev. King's words. In the aftermath of the decision on contraceptive and sterilization mandates, many spoke out forcefully. As one example, the words of one of our most senior brothers, Cardinal Roger Mahony, thirty-five years a bishop and recently retired after twenty-five years as archbishop of Los Angeles, provide a model for us here: "I cannot imagine a more direct and frontal attack on freedom of conscience than this ruling today. This decision must be fought against with all the energies the Catholic community can muster."

*Almighty God, Father of all nations,  
For freedom you have set us free  
in Christ Jesus (Gal 5:1).*

*We praise and bless you for the gift of  
religious liberty, the foundation of human rights,  
justice, and the common good.*

*Grant to our leaders the wisdom*

*to protect and promote our liberties;*

*By your grace may we have the courage to defend  
them, for ourselves and for all those  
who live in this blessed land.*

*We ask this through the intercession of Mary  
Immaculate, our patroness, and in the name of  
your Son, our Lord Jesus Christ,*

*in the unity of the Holy Spirit,*

*with whom you live and reign, one God,  
for ever and ever.*

*Amen.*

<http://www.usccb.org/issues-and-action/religious-liberty/our-first-most-cherished-liberty.cfm> (abridged, accessed 20120510)





## II. Right of Conscience

How one behaves is ultimately determined by one's relationship with God and one's moral code. Recognition of the existence of a superior being (God) and our obligation to honor,

worship, and obey this superior being is common, though not universal. A moral code for how one interacts with another can be discerned by reflecting on how we ourselves

would like to be treated, that is with respect, fairness, and ultimately love. To coerce, bully, force, or demand another to act in a manner contrary to their deeply held convictions violates

this natural moral code. This "right of conscience" to behave according to one's moral compass (or code) must not be infringed upon by an individual, institution or government.

## Catechism of the Catholic Church

**1776** "Deep within his conscience man discovers a law which he has not laid upon himself but which he must obey. Its voice, ever calling him to love and to do what is good and to avoid evil, sounds in his heart at the right moment... For man has in his heart a law inscribed by God...His conscience is man's most secret core and his sanctuary. There he is alone with God whose voice echoes in his depths."(GS 16)  
**1782** Man has the right to act in conscience and in freedom so as personally to make moral decisions. "He must not be forced to act contrary to his conscience.

Nor must he be prevented from acting according to his conscience, especially in religious matters."(DH 3 # 2)  
**1783** Conscience must be informed and moral judgment enlightened. A well-formed conscience is upright and truthful. It formulates its judgments according to reason, in conformity with the true good willed by the wisdom of the Creator. The education of conscience is indispensable for human beings who are subjected to negative influences and tempted by sin to prefer their own judgment and to reject authoritative teachings.  
**1789** Some rules apply in every case:  
- One may never do evil so that

good may result from it;  
- the Golden Rule: "Whatever you wish that men would do to you, do so to them."(Mt 7:12;)  
- charity always proceeds by way of respect for one's neighbor and his conscience: "Thus sinning against your brethren and wounding their conscience...you sin against Christ."(1 Cor 8:12) Therefore "it is right not to...do anything that makes your brother stumble."(Rom 14:21)  
**1796** Conscience is a judgment of reason by which the human person recognizes the moral quality of a concrete act.  
**1799** Faced with a moral choice, conscience can make either a right

judgment in accordance with reason and the divine law or, on the contrary, an erroneous judgment that departs from them.  
**1800** A human being must always obey the certain judgment of his conscience.  
**1801** Conscience can remain in ignorance or make erroneous judgments. Such ignorance and errors are not always free of guilt.  
**1802** The Word of God is a light for our path. We must assimilate it in faith and prayer and put it into practice. This is how moral conscience is formed.

"If I could have entertained the slightest apprehension that the Constitution framed in the Convention, where I had the honor to preside, might possibly endanger the religious rights of any ecclesiastical society, certainly I would never have placed my signature to it; and if I could now conceive that the general government might ever be so administered as to render the liberty of conscience insecure, I beg you will be persuaded that no one would be more zealous than myself to establish effectual barriers against the horrors of spiritual tyranny, and every species of religious persecution."

—George Washington, To the United Baptist Churches in Virginia, May 10, 1789

"No provision in our Constitution ought to be dearer to man than that which protects the right of conscience against the enterprises of civil authority."

— Thomas Jefferson

## Stop the New Attack on Conscience Rights

By Richard M. Doerflinger

Americans have expressed many different views about contraception and sterilization. But just about everyone has been able to agree on one thing: Government should not force anyone to act in accord with someone else's view rather than his or her own.

That consensus may have ended August 1, when the U.S. Department of Health and Human Services (HHS) announced it will require virtually all private health plans in the U.S. to cover the full range of contraceptive drugs and devices and sterilization procedures, as well as "education and counseling for all women with reproductive capacity" to promote these. HHS will require this under the new health care reform law's mandate for covering "preventive services" without co-pays or out-of-pocket expenses. Even the great majority of religious organizations must comply, or stop providing health coverage.

Fortunately HHS is allowing public comment on its decision until September 30. All concerned about government's respect for freedom of conscience need

to raise their voices now.

The Catholic bishops' conference has made it easy to do so by visiting the web page [www.usccb.org/conscience](http://www.usccb.org/conscience). Visitors can send a prepared e-mail message to HHS, add their own personal comments as they wish, and learn more about the issue. The prepared message and related materials focus on three points:

**1. Pregnancy not a disease:** The idea behind "preventive services" is to invest in making sure that dangerous illnesses are avoided in the first place, or detected very early, so we don't need more risky and expensive curative treatments later. Almost all congressional discussion of "preventive services for women," for example, was about preventing breast cancer. Pregnancy simply does not belong on this list of diseases—it is the healthy, natural condition by which each of us came into the world. And if government is committed to preventing pregnancy now, because it is the kind of condition that otherwise needs a

"cure," the stage is set for mandated abortion coverage. Prescription contraceptives also pose their own health problems, including an increased risk of stroke, AIDS and some cancers.

**2. Covering abortion drugs:** The drift from contraception to abortion is even more apparent in HHS's insistence on covering all drugs approved by the FDA for contraception. Some FDA-approved "emergency contraceptives" can work by interfering with an embryo's ability to implant in the mother's womb, ensuring the death of a newly conceived human being—and that is an abortion in Catholic teaching. One such drug, "Ella," a close analogue to the abortion drug RU-486, could induce abortions well after implantation.

**3. Suppressing freedom of religion:** Federal law has always left Catholic organizations free to offer health coverage in accord with their moral and religious convictions—whether that coverage is offered to employees, students in Catholic

colleges, or the general public. The religious exemption in the new HHS rule addresses only the first of these three situations, and does that very badly. To provide a Catholic health plan even to its own employees, a Catholic organization must focus on teaching religious doctrine, fire its non-Catholic employees, and refuse to provide health care and other life-affirming services to any but fellow Catholics. Jesus himself, who helped and healed people of various faiths, would not be "religious enough" to qualify for this bizarrely narrow exception.

For these reasons the current HHS mandate for contraceptive coverage should not be implemented. Above all, any policy on this subject should have no involvement in abortion or in violating religious freedom. Working together we may get the federal government to realize this.

Mr. Doerflinger is Associate Director of the Secretariat of Pro-Life Activities, United States Conference of Catholic Bishops. Please visit [www.usccb.org/conscience](http://www.usccb.org/conscience) to learn more about the bishops' campaign to protect conscience rights.

"In effect, the president is saying we have a year to figure out how to violate our consciences."

— Timothy Cardinal Dolan, Archbishop of New York



## III. Assault on Catholic Church Teachings

Not all of the Catholic Church’s teachings are understood or accepted by the public, or the culture, or even all those that claim membership in the Catholic Church. Nevertheless,

the Church received its authority from God, not from some earthly institution or government. Unless those teachings are in violation of fundamental human rights, they

must be held sacrosanct. Just as the Church does not force anyone (even its own members) to accept its teachings, (though we all profess a common “creed” during worship

services), neither can the Church tolerate another institution’s efforts to define Church teaching.

## “RENDER TO CAESAR REVISITED.”

By Archbishop Charles J. Chaput, 2-24-2011 (excerpts)

...The problem is that the Church teaches moral truth, and truth has obligations for human behavior — including the social, economic and political kind. The Church is never mainly a political organism. But her witness for justice always and unavoidably has political consequences. And here's an obvious example of what I mean: Killing unborn children is a form of homicide. It's a profound attack on human dignity, because all other rights depend on the right to life. It's not the only important issue facing our country. We have other vital issues, from immigration reform to the war in Afghanistan to the problems with our economy. But abortion is the foundational issue at this moment in our nation's history. We can't evade or ignore it. Cooperating in abortion or quietly tolerating it is a grave evil. We can incrementally seek to restrict and eliminate abortion, but we can never accept it as a so-called "right." And if that truth inconveniences one or another political candidate — well that's their choice and their problem. It's not the fault of the Church.

The job of Catholic laypeople is to change the thinking of their political parties and leaders with the tools of their Catholic faith. Laypeople should be the leaven of Jesus Christ in the public square. And if we want to know the kind of commitment that will be demanded from us in the 21<sup>st</sup> century, we can simply reflect on the title of the Acts of the Apostles.

We need to remember that the title of the fifth book of the New Testament is the Acts of the Apostles. Not the “Good Intentions,” or the “Excellent Plans,” or the “Plausible Alibis” of the Apostles, but their Acts. Words are important. Actions are usually more important. What we do proves or disproves what we say. Christ said he loved us. Then

he died to prove it. He said he would rise from the dead and give us new life. Then he really did it. When the first Apostles said they believed in Jesus Christ, they acted like they meant it, because they did — and then they proved it by turning the world upside down with the Gospel.

A handful of imperfect men made the greatest revolution in history — a global revolution of God's love. And Jesus Christ, through his Church, calls each of us to follow in their footsteps and to do exactly the same thing.

What makes the Christian faith convincing in any age is the zeal of everyday Christians. The health of the Church depends directly on the spirit of her people. So we need to be more than simply honest or diligent or even faithful Christians. We need to be carried away by our love for God, our love for the Church and our love for the Catholic faith.

But too often the opposite is happening. Research data show that American religious belief and practice are steadily softening. As a result, the place of the Catholic Church in the United States is much more precarious than we like to think, and the large number of people that still self-identify as Catholics nationally is deeply misleading...Plenty of exceptions do exist, but overall, the picture is sobering.

...That means we need to think of the Church in America as a missionary Church, and every individual believer as a missionary. We've probably known this all along, but now it has urgency. Catholic demography is changing. So is our political environment. Additionally, we can't count on the continued financial health of the Church in our country if our active Catholic base diminishes over the next generation — which is very possible

and already happening.

Of course, we need to balance these concerns with our strengths. Compared to the Church in many other countries, our priests, lay leaders, parishes, diocesan programs, renewal communities, finances and patterns of religious practice are quite strong. The Church in America is healthier, with more energy and better leadership at many different levels, than nearly anywhere else in the world. So we do have the freedom to do something about our problems.

But we need to be realists. The conflicts facing the U.S. Church over the past decade — external and internal; from the abortion issue to immigration reform to marriage, sexuality and family life — will probably continue for the foreseeable future. These struggles will require a new and active kind of lay Catholic consciousness to support each other in our discipleship, to sustain our people who are weak or wavering in their faith, and to draw others to the Church. And that example has to start with committed people like you.

...The most urgent need for the Church in our day is a rebirth of faith and missionary spirit in her people. But that will never happen, and it can't ever happen, until each one of us rediscovers the apostolic mandate that came with our own baptism. We need to be the men and women Jesus calls us to be — his friends and disciples — and we need to call other Catholics, who are lukewarm in their faith, to the same kind of zeal. If we can begin that renewal together as a Church, through the grace of Jesus Christ, then God can achieve anything through us.

Back in 2008, like most American bishops, I traveled to Washington, D.C., for Pope Benedict's visit to this country. I've admired Joseph Ratzinger as a thinker for

many years, but I really didn't expect to be so moved by his words. He has a gift for what he calls “affirmative orthodoxy.” That sounds complicated, but it really isn't.

Benedict has the talent of being very frank about sin and calling people back to fidelity. And yet, at the same time, he illuminates that fidelity with warmth in a way that reveals its beauty and disarms the people who hear him. He warned about the “silent apostasy” of so many Catholics today, both laypeople and clergy; and his warning has stayed with me ever since because he said it in a spirit of love, not rebuke. Apostasy is an interesting word. It comes from the Greek verb apostanai — which means to revolt or desert; literally “to stand away from.” For Benedict, Catholics don't need to publicly renounce their faith to be apostates. They simply need to be silent — to “stand away from” Catholic teaching — when their baptism demands that they speak out; to be cowards when Jesus asks them to have courage.

Benedict reminded American Catholics that we need to use our numbers and influence to enter into the public square in an active way. He called us to bring Christian hope to the public debate, to be clear and united in our Catholic presence in society, and to be a leaven in our nation's public life...

“...We're better citizens when we're more faithful Catholics. The greatest gift we can give to our nation is the witness of our moral integrity. We need to be willing to suffer for what we know, as Catholic Christians, to be true about the purpose of human society and the sanctity of the human person. The more faithfully “Catholic” we are in our choices, actions and convictions, the more truly we will contribute to the moral and political life of our nation.”

## AMISH, OK. CATHOLICS, NO.

Sr. Mary Ann Walsh

<http://usccbmedia.blogspot.com/2012/03/amish-ok-catholics-no.html>

The Amish are exempt from the entire health care reform law. So are members of Medi-Share, a program of Christian Care Ministry. Yet, when the Catholic Church asks for a religious exemption from just one regulation issued under the law—the mandate that all employers, including religious institutions, must pay for sterilization and contraceptives, including abortion-inducing drugs—the Administration balks.

The government respects the First Amendment that guarantees the right to freely exercise one's religious beliefs, but only to a point. In the health care law it picks and chooses which beliefs it respects. The Amish do not believe in insurance, and the government understands. Christian Care Ministry believes people should form a religious community and pay medical bills for one another, and the government says okay. Yet when the Catholic Church opposes being forced to pay for services that violate its beliefs, the Administration says “tough.”

What is so special about this mandate that it cannot be touched? It was added after Congress passed the health care law and offers no exemption for religious charitable or educational institutions. It will not accept Catholic charities and schools as “religious enough” unless they hire only Catholics, serve only Catholics, have the narrow tax exempt status granted to houses of worship, and teach religion as their purpose.

Amazingly, this mandate has more force than the overall health care law. In fact recent regulations allow states to decide which “essential health benefits” to require in health plans, such as hospitalization, prescription drugs and pediatric services. At the same time, all insurance plans must include the objectionable services mentioned above. Here federal law trumps state law and threatens to fine into submission institutions that dare oppose it. The going rate is at least \$100 per day per employee.

What has the government got against the Catholic Church? Has it forgotten the contributions the church has made to the poor

and needy for centuries? Catholic elementary and secondary schools provide the only real alternative to public schools in many parts of the nation. Catholic colleges offer outstanding education, be it at the university or the community college. The contribution has a long history, back to 1789 when Georgetown University was founded by the Jesuits. Yet under the health care law, if these schools and colleges wish to remain faithful to their religious principles the government will fine them into submission. There's a thank-you note.

Many Catholic hospitals were founded by religious orders of women, and today one out of six persons seeking hospital care in the United States goes to a Catholic hospital. Until now, religious background of the patient has not been an issue. “Where does it hurt?” is the first question, not “Where is your baptismal certificate?” This approach threatens to deny hospitals any real protection as “religious employers” under the new rule. Yet their Catholicity means many of these hospitals have an added benefit. At Providence Hospital

in Washington, D.C., for example, patients not only get medical care, they can get clothing too if they need it. It comes through the Ladies of Charity, an auxiliary of the Daughters of Charity who founded the hospital in 1861.

Catholic social service agencies, including adoption and foster care agencies, parish food banks, and soup kitchens, meet human concerns. Services depend on need, not creed. Church sponsorship means the services have a little extra, be they volunteers from parishes, financial donations through diocesan appeals, or the dedication that comes from working for God as well as paycheck.

A Catholic might take personally the Administration's dissing their beliefs. Lucky the Amish, who have their basic constitutional rights respected. If only we objected to health insurance generally, we might be able to enjoy the same protection. Seems odd that the Administration is more inflexible on contraception than on services that actually treat disease.





# Religious Freedom & Catholic Citizenship

By Father Christopher Heath

“We are Catholics. We are Americans. We are proud to be both, grateful for the gift of faith which is ours as Christian disciples, and grateful for the gift of liberty which is ours as American citizens. To be Catholic and American should mean not having to choose one over the other. Our allegiances are distinct, but they need not be contradictory, and should instead be complimentary. That is the teaching of our Catholic faith, which obliges us to work together with fellow citizens for the common good of all who live in this land. That is the vision of our founding and our Constitution, which guarantees citizens of all religious faiths the right to contribute to our common life together.”<sup>1</sup> These words from our Bishops introduce us to the current controversy facing the Church and state regarding religious liberty.

It is once again “election season”: we Catholics must evangelize our nation and culture by acting on our beliefs, and insisting that what we “teach, believe, and profess to be revealed by God”<sup>2</sup> is in fact the best way for our nation to repair itself and thrive. “Catholics have the same rights and duties as others to participate fully in public life. The Church throughout its institutions must be free to carry out its mission and contribute to the common good without being pressured to sacrifice fundamental teachings and moral principles.”<sup>3</sup> It’s not “imposing our morality,” but rather insisting that our moral teachings are from “nature and nature’s God,”<sup>4</sup> as even our Constitution acknowledges the role of morality and conscience in civic life. We have “inalienable rights,”<sup>5</sup> meaning rights that no one can take away from us; rights not given by the state but endowed on us by our Creator. Whatever rights are ours by the authority of the government are rights that can be changed or taken away, but our human rights given us by God are not in the hands of the government to do with as they please.

Sometimes our politicians forget this. Henry VIII thought that he could assume to himself authority over the Catholic Church in England so that he could divorce and remarry as he wished. His 1534 Act of Supremacy made himself the final decider of what religion would teach, and almost all of the Catholic bishops of the time signed the Act, and by doing so officially abandoned the Catholic Church and started with King Henry the Church of England. St. Thomas More, the former Chancellor of Henry’s government and his close friend, together with Bishop John Fischer, refused to sign the Act and were martyred for it. Just before St. Thomas More was beheaded for treason he stated, “I am the king’s good servant, but God’s first.” He found himself having to choose between his citizenship in England and his citizenship in Heaven, and paid the price for his choice.

Today Catholics are concerned about the erosion of religious freedom, and we oppose any assumed rights that the government tries to impose over the Church. The current mandate “of the department of Health and Human Services has received wide attention and has been met with... vigorous and united opposition. In an unprecedented way, the federal government will both force religious institutions to facilitate and fund a product contrary to their own moral teaching, and purport to define which religious institutions are ‘religious enough’ to merit protection of their religious liberty. These features of the ‘preventative services’ mandate amount to an unjust law. As Archbishop William Lori testified to Congress: ‘This is not a matter of whether contraception may be prohibited

by the government. This is not even a matter of whether contraception may be supported by the government. Instead, it is a matter of whether religious people and institutions may be forced by the government to provide coverage for contraception or sterilization, even if that violates their religious beliefs.”<sup>6</sup>

Let’s clarify what the current religious freedom “debate is—and is not—about. This is not about access to contraception which is ubiquitous and inexpensive, even when it is not provided by the Church’s hand and with the Church’s funds. This is not about the religious freedom of Catholics only, but also of those who recognize that their cherished beliefs may be next on the block. This is not about the Bishops’ somehow ‘banning contraception,’ when the US Supreme Court took that issue off the table two generations ago. Indeed, this is not about the Church wanting to force anybody to do anything; it is instead about the federal government forcing the Church—consisting of its faithful and all but a few of its institutions—to act against Church teachings. This is not a matter of opposition to universal health care, which has been a concern of the Bishops’ Conference since 1919... This is not a fight we want or asked for, but one forced on us by the government on its own timing. Finally, this is not a Republican or Democrat, a conservative or liberal issue; it is an American issue.”<sup>7</sup>

“When the Bill of Rights was ratified, religious freedom had the distinction of being the First Amendment. Religious liberty is indeed the first liberty. The First Amendment guarantees that ‘Congress shall make no law respecting an establishment of religion, or prohibiting the free exercise thereof.’ That is our most cherished freedom. It is the first freedom because if we are not free in our conscience and our practice of religion, all other freedoms are fragile. If citizens are not free in their own consciences, how can they be free in relation to others, or to the state? If our obligations and duties to God are impeded, or even worse, contradicted by the government, then we can no longer claim to be a land of the free, and a beacon of hope for the world.”<sup>8</sup> We have experienced, however, a slow erosion, a subtle shift in civic discourse that speaks no longer of “freedom of religion,” but rather “freedom of worship”: this narrows the Church’s influence only to what we do within these church walls, and seeks to silence our voice in the public square where our religion may no longer be free to exercise its rights through institutions of education, health care, and charity. “Many Catholics are confused and angry. They should be. Many feel betrayed” by an administration that 54% of Catholics in this country voted into office three years ago, and now wonder why it “would seek to coerce Catholic employers, private [Catholic citizens as well as the Catholic Church], to violate their religious convictions.”<sup>9</sup>

After the Louisiana Purchase of 1804, Sister Marie Therese Farjon of the Ursuline Order of nuns wrote to President Thomas Jefferson “to ask whether the sisters’ property and ministries would be secure under the new government,” since Louisiana had been under French jurisdiction and was now part of the United States. In response, President Jefferson replied: “The principles of the Constitution and the government of the United States are a sure guarantee to you that it will be preserved to you sacred and inviolate and that your institution will be permitted to govern itself according to its own voluntary rules without interference from civil authorities.”<sup>10</sup> Would

Jefferson recognize the current controversy as anything similar to his promise?

That we Catholics believe that abortion and contraception are sinful is, as Jefferson put it, “voluntary rules.” Even though the current controversy regarding federal health care is primarily about freedom of religion and conscience, about respecting our “voluntary rules” that constitute the moral and doctrinal teachings of the Catholic Church, I feel a need to ask whether many Catholics respect our beliefs! Perhaps it’s enough to fight against the Health and Human Services mandate on First Amendment grounds, but the only reason it’s a conscience issue is because the Church has always held artificial contraception to be a sin. In fact every Christian church used to believe this until 1930 when the Church of England thought it would be okay under certain circumstances to allow couples to use contraception, then Christian morality unraveled from there. Since then the world over has experienced 1) the general lowering of moral standards, 2) the rise in infidelity and children born out of wedlock, 3) the reduction of women to objects used to satisfy men, and 4) government coercion in reproductive matters. Pope Paul VI said this is exactly what would happen if contraception became the norm in his Encyclical Letter *Humane Vitae* in 1968.<sup>11</sup> 50 years later his prophecy is undeniable, yet it hasn’t stopped most people—and most Catholics—from acting like contraception is no big deal. Time to wake up, Catholics. Those who dislike the Catholic Church point to the majority Catholics who don’t follow the Church’s teaching in this matter as a primary reason why the Church is wrong and why a federal mandate is perfectly okay to impose on the Church. The world thinks we’re a bunch of idiots who need to be forced to do what they think is best. Contraception and abortion are bad for the soul, bad for marriage, and bad medicine. Contraception is not preventative medicine: pregnancy is not a disease people have to be protected from. Sex is not a recreation and marriage is not the government’s to redefine.

The Church cannot tell people for whom to vote. We can’t name names or endorse specific candidates or parties. But the Church does hold the right to teach its members how to vote, what principles to consider as you exercise your precious American democratic privilege. We are morally obligated to bring our faith to the voting booth. I recommend you read the US Bishops’ document *Faithful Citizenship*, which teaches the primary theme of the right to life and the dignity of every human person. There is a hierarchy of values, certain moral issues that are more urgent than others, that give us a priority when we consider our voting strategy. “We cannot consider abortion... as merely [one issue] among many to be weighed or dismissed with a shrug. Nor can we exclude other issues that also are pro-life”: poverty, immigration, war, capital punishment, etc.<sup>12</sup> There is no moral equivalence between pro-life issues and other social issues.<sup>13</sup> *Faithful Citizenship* outlines “clear obligations to oppose intrinsic evils which can never be justified... and other [issues] raising serious moral questions.”<sup>14</sup> The challenge here is to think like a Catholic, not like a Democrat or a Republican who holds opposing views labeled “pro-life” or “social justice”: Catholics must not act or vote as though these are in opposition. We must fight to end abortion, to protect the rights of the Church, and protect traditional marriage first, and work for solutions to all the other

social ills of our time. “All issues do not carry the same moral weight and the moral obligation to oppose intrinsically evil acts has a special claim on our actions.”<sup>15</sup> “Some issues involve principles that can never be violated... Others reflect our judgment about the best way to apply Catholic principles to policy issues.”<sup>16</sup> Certainly we cannot ignore serious issues like immigration, economic justice, poverty, and education: these are not optional concerns, but reasonable people can and do disagree on the nature of the problems and the best way to solve them.

Choosing a candidate who has good ideas about other social problems but who is in favor of abortion is not an acceptable use of your vote: I quote Pope John Paul II: “The human outcry which is justly made on behalf of human rights is false and illusory if the right to life, the most basic and fundamental right and the condition for all other personal rights, is not defended with maximum determination.”<sup>18</sup> And worse, choosing a candidate precisely because he or she is pro-abortion is a mortal sin.<sup>19</sup> We’re looking for people who will truly represent us Catholics, who make up 25% of the population in America. You have to know the candidates’ records and positions on moral issues and choose wisely, allowing your Catholic faith to inform your vote. We “need to be guided more by our moral convictions than by our attachment to a political party or interest group.”<sup>20</sup> As a Church, “we seek to bring the light of the Gospel to our public life, but the work of politics is properly that of committed and courageous lay Catholics. We exhort them to be both engaged and articulate in insisting that as Catholics and as Americans we do not have to choose between the two.”<sup>21</sup>

We Christians are not that well organized or well funded in the fight for freedom of religion, freedom of conscience, and the rights of the Church to perform its mission of educating, healing, and serving the needy. No political party is concerned about a “Catholic voting bloc” because they know we are not united in a prioritized set of beliefs that inform our vote! As long as we remain divided and disorganized, those who oppose the Church will continue to chip away at the moral code that is the foundation of a healthy society. We Christians are supposed to be the “salt of the earth,”<sup>22</sup> a preservative agent that upholds the “laws of nature and nature’s God” and reminds our great nation of what God created us to be. We must not abandon the principles of our Republic enshrined in the Constitution and Bill of Rights. To paraphrase St. Thomas More, I am a proud American, proud to serve my nation in any way I can, but I am God’s servant first. Let’s pray we won’t have to choose between the two.

Endnotes

- 1 USCCB, “Our First, Most Cherished Liberty,” Ad Hoc Comm for Religious Liberty, Mar 2012.
- 2 Profession of Faith for candidates being received into the Church, Rite of Christian Initiation n. 491
- 3 USCCB, *Faithful Citizenship*, 2012 “Introductory Note”
- 4 US Declaration of Independence, first sentence
- 5 Ibid., Preamble
- 6 USCCB, “Most Cherished Liberty.”
- 7 USCCB, statement of the Administrative Committee, March 14, 2012.
- 8 USCCB, “Most Cherished Freedom.”
- 9 Archbishop Charles Chaput, Archdiocese of Philadelphia PA, philly.com, 02/12/2012 opinion
- 10 Archbishop George Niederauer, Archdiocese of San Francisco, catholic.com, 03/01/2012
- 11 n. 17
- 12 Bishop David Zubic, Diocese of Pittsburgh, 02/02/2012 letter to Catholics
- 13 FC n. 28
- 14 FC 2012 Introductory Note
- 15 FC n. 37
- 16 FC n. 63
- 17 cf. FC n. 29
- 18 FC n. 26, quoting Bl. Pope John Paul II, *Christifidelis Laici* n. 38)
- 19 cf. FC n. 34
- 20 FC n. 14
- 21 USCCB, “Most Cherished Freedom.”
- 22 Matthew 5:13





## The Federal Government's Diverse Adversaries In Its Wars On Religious Liberty

Plus A Detailed Review of This Year's Unprecedented State vs. Church Confrontation

By Ray Noble

Posted on March 13, 2012

It was just over seven weeks ago that the federal government began its frontal assault on the religious liberty of the Catholic Church. Yet even before the Department of Health and Human Services unveiled its abortifacient/contraception/sterilization mandate on January 20, an astonishingly broad spectrum of faith communities had filed briefs in the United States Supreme Court to oppose a different threat that Administration policies presented to First Amendment religious liberty.

The issue in that case was whether a Lutheran congregation's right to decide who is fit to serve in its ministry must yield to the Administration's EEOC policies. And it was not just Protestants but also Catholics, Jews, Mormons, Muslims, Hindus, Sikhs and even spiritists, Santeristas, animists, Mandaeans and Vaisnavas ("Hare Krishnas") who rallied to the congregation's support in those amicus briefs opposing the Administration's intrusion. And the Court's answer was no less decisive. All nine Justices, acting with rare unanimity, rebuked the Administration's assault on that congregation's First Amendment rights. Read the Court's opinions in *Hosanna-Tabor Evangelical Lutheran Church v. EEOC* at <http://www.supremecourt.gov/opinions/11pdf/10-553.pdf>

The amicus briefs appear in their entirety at [http://www.americanbar.org/publications/preview\\_home/10-553.html](http://www.americanbar.org/publications/preview_home/10-553.html).

The Administration's opponents in *Hosanna-Tabor* seem to have learned a vital lesson from history: despite the enormous differences that separate them, they had learned that when government attacks anybody's fundamental rights, it attacks everyone's.

The poignant words of Martin Niemöller, the heroic anti-Nazi theologian and German patriot, may

have been in the minds of some of those who stood up in defense of the Lutheran congregation:

"In Germany they came for the Jews, and I didn't speak up because I wasn't a Jew. Then they came for the trade unionists, and I didn't speak up because I wasn't a trade unionist. Then they came for the Catholics, and I didn't speak up because I was a Protestant. Then they came for me, and by that time there was no one left to speak up."

Of course, the ink on this Court opinion rebuking the Administration's violation of the congregation's religious liberty was hardly dry when, little more than a week later, the Catholic Church and Catholic employers were told when they will be required to change their employee health insurance coverage in violation of their religious principles and personal consciences. Yet the Administration almost certainly did not expect the Church's response nor the many voices outside the Church who understand that the Administration's mandate poses a threat to them, too.

First of all, the Catholic bishops have been united, clear, bold, and powerful in their response. Meanwhile, other Catholic groups have been filing lawsuits against the mandate and the Administration...

Other prominent Protestant and Jewish voices are confronting the mandate in the arena of public opinion rather than the courts. Evangelical Pastor Rick Warren, the President's choice to deliver the invocation at the 2009 Presidential Inauguration is speaking out with power:

"I'd go to jail rather than cave in to a government mandate that violates what God commands."

Warren also makes clear that the government's threat targets religious liberty itself: "I'm not a Catholic but I stand in 100% solidarity with my

brothers and sisters to practice their belief against government pressure."

Prominent talk show host Glenn Beck, a Mormon, is spreading a similar message:

"I am a proud member of the Church of Jesus Christ of Latter-day Saints, but ... the state is telling the Catholic Church to violate its principles and teachings...[W]hen the state comes against the Catholics, or the Jews, or the Muslims, or the Pentecostals, or the Mormons or those of any other faith — exotic or familiar — we must all stand up as one..."

The Assembly of Canonical Orthodox Bishops of North America also issued a stinging rebuke against the Administration's mandate, calling it an "infringement of religious liberty" that "poses a grave threat to the sanctity of the Church's conscience."

While some Jewish leaders support the Administration, just as some did in *Hosanna-Tabor*, those who oppose the mandate are pointing to the grave constitutional threat that the mandate poses to all believers. Nathan Diamant, Executive Director of Judaism's Orthodox Union, has voiced such concerns while pointing out that his concern is confounding "political commentators [who] expected to see Jewish leaders and their respective constituents on the sidelines..." Rabbi Abba Cohen of Agudath Israel, another leading voice of the Orthodox Jewish community, took specific aim at the Administration's purported "compromise" revision of its mandate in February that did not rectify the problem in any way. He provides a convincing explanation of why it offers no real solution at all:

"Whether or not the White House's new 'compromise' proposal adequately addresses the religious freedom concerns raised by the Catholic

Church is for the Catholic Church to say... not the White House...[N]o religiously sponsored entity and no religiously motivated individual should be forced by government to violate its or his sincerely held religious principles... [T]he determination of religious propriety must be left to the religious entity or individual, not to the government." For more discussion of Jewish concerns about the mandate, see [http://jewishvoiceny.com/index.php?view=article&catid=110%3Anational&id=554%3Abroader-implications-draw-jewish-involvement-in-the-contraception-debate&tmpl=component&print=1&page=&option=com\\_content&Itemid=293](http://jewishvoiceny.com/index.php?view=article&catid=110%3Anational&id=554%3Abroader-implications-draw-jewish-involvement-in-the-contraception-debate&tmpl=component&print=1&page=&option=com_content&Itemid=293)

These strong condemnations of the mandate from religious leaders and other prominent people seem to voice the concerns of the general public as well. A Gallup poll released two weeks ago shows that 72 percent of Americans now think the individual mandate is unconstitutional. In fact, only 37 percent of Democrats think it is constitutional, along with 6 percent of Republicans and 21 percent of Independents.

There is also data to suggest that Democrats seeking elective office may be hurt by the Administration's threats to religious liberty...See [http://deusetpatria.com/2012/03/05/the-lefts-war-on-religious-liberty-is-backfiring/?preview=true&preview\\_id=971&preview\\_nonce=f6651b5d45](http://deusetpatria.com/2012/03/05/the-lefts-war-on-religious-liberty-is-backfiring/?preview=true&preview_id=971&preview_nonce=f6651b5d45)

In short, the constitutional threats posed by the Administration's assaults on First Amendment religious liberty guaranties seem to be uniting many of America's diverse faith communities, prompting them to speak out in opposition. And voters seem to be demanding that their elected representatives speak out in favor of religious liberty and conscience protection.

"An unjust law is a human law that is not rooted in eternal law and natural law."

— St. Thomas More





## IV. Philosophical Concerns

Is birth control preventive health care? Is pregnancy a disease? Are children an infection? What does birth control prevent?

Do some forms of birth control increase risk of cancer and cardiovascular disease—even cause death? Does birth control improve health or merely facilitate unhealthy sexual behaviors that increase the cost of health care?

What is the essential purpose for our being sexual beings? Where does the role of government end? Why should all citizen taxpayers pay for something that is not necessary for health, and in truth merely enables behaviors that are unhealthy. What does “same sex marriage” have to do with it?

Are “planned” and “wanted” necessary preconditions for the beginning of a new

human life? What is the problem—over population or under population?

This “Philosophical Concerns” section addresses these questions and more. To lay a foundation for our “Philosophical Concerns,” we turn to the authority of the Catholic Church as presented in the Catechism. What makes marriage distinctive is its natural inclination toward new human life by the “marriage act”—sexual intercourse. When this sacred act is desecrated by contraception, sterilization and abortion, the joy and unity that are natural to the act dissipate because the unitive and procreative ends are strongly linked. The “Dueling Mandates” article helps explain why this happens.

Steve Mosher and Dr. Stanley Monteith focus on the “population” issues. What

is particularly illuminating about Dr Monteith’s research (too voluminous to adequately cover here) is the long history of American elitists (people of wealth and power) who have sought to depopulate the poor, especially former slaves and their descendants. Margaret Sanger was especially adept at finding support for her programs to limit births to the “unfit” by sterilization and contraception with the financial support of McCormicks (farm machinery), Gambles (Proctor & Gamble), and Rockefellers (banking). The wealthy have been able to gain government support for their eugenics ideology in both Republican and Democratic administrations with political contributions and lobbying. Members of the medical community cooperated as well as some

ministers. Planned Parenthood transitioned from being exclusively funded by wealthy individuals to being an arm of state and federal government. Today’s elitists are billionaires with names like Gates, Buffet, and various entertainers.

Dr. Rebecca Peck speaks passionately of her own UNWANTEDNESS and her experience as a medical doctor and researcher.

Father Juan Velez, MD, uses the writings of Cardinal John Henry Neumann to compare the current administration’s religion-control efforts to those of England’s King Henry VIII. Didn’t we fight a war to get away from government efforts to dictate religious practice?

## Catechism of the Catholic Church On Marriage

**1602** Sacred Scripture begins with the creation of man and woman in the image and likeness of God and concludes with a vision of "the wedding-feast of the Lamb." Scripture speaks throughout of marriage and its "mystery," its institution and the meaning God has given it, its origin and its end, its various realizations throughout the history of salvation, the difficulties arising from sin and its renewal "in the Lord" in the New Covenant of Christ and the Church. "The intimate community of life and love which constitutes the married state has been established by the Creator and endowed by him with its own proper laws...God himself is the author of marriage." The vocation to marriage is written in the very nature of man and woman as they came from the hand of the Creator. Marriage is not a purely human institution despite the many variations it may have undergone through the centuries in different cultures, social structures, and spiritual attitudes. These differences should not cause us to forget its common and permanent characteristics. Although the dignity of this institution is not transparent everywhere with the same clarity, some sense of the greatness of the matrimonial union exists in all cultures. "The well-being of the individual person and of both human and Christian society is closely bound up with the healthy state of conjugal and family life."

**1604** God who created man out of love also calls him to love the fundamental and innate vocation of every human being. For man is created in the image and likeness of God who is himself love. Since God created him man and woman, their mutual love becomes an image of the absolute and unfailing love with which God loves man. It is good, very good, in the Creator's eyes. And this love which God blesses is intended to be fruitful and to be realized in the common work of watching over creation: "and God blessed them, and God said to them: 'Be fruitful and multiply, and fill the earth and subdue it.'" (Gen. 1:28) **1605** Holy Scripture affirms that man and woman were created for one another: "It is not good that the man should be alone." (Gen. 2:18) The woman, "flesh of his flesh," i.e., his counterpart, his equal, his nearest in all things, is given to him by God as a "helpmate"; she thus represents God from whom comes our help. "Therefore a man leaves his father and his mother and cleaves to his wife, and they become one flesh." The Lord himself shows that this signifies an unbreakable union of their two lives by recalling what the plan of the Creator had been "in the beginning": "So they are no longer two, but one flesh." **1606** Every man experiences evil around him and within himself. This experience makes itself felt in the relationships between man and woman. Their union has always been threatened by discord, a spirit of domination, infidelity, jealousy, and conflicts that can escalate

into hatred and separation. This disorder can manifest itself more or less acutely, and can be more or less overcome according to the circumstances of cultures, eras, and individuals, but it does seem to have a universal character. **1607** According to faith the disorder we notice so painfully does not stem from the nature of man and woman, nor from the nature of their relations, but from sin. As a break with God, the first sin had for its first consequence the rupture of the original communion between man and woman. Their relations were distorted by mutual recriminations; their mutual attraction, the Creator's own gift, changed into a relationship of domination and lust; and the beautiful vocation of man and woman to be fruitful, multiply, and subdue the earth was burdened by the pain of childbirth and the toil of work. **1609** In his mercy God has not forsaken sinful man. the punishments consequent upon sin, "pain in childbearing" and toil "in the sweat of your brow," (Gen. 3:16,19) also embody remedies that limit the damaging effects of sin. After the fall, marriage helps to overcome self-absorption, egoism, pursuit of one's own pleasure, and to open oneself to the other, to mutual aid and to self-giving. **1610** Moral conscience concerning the unity and indissolubility of marriage developed under the pedagogy of the old law. In the Old Testament the polygamy of patriarchs and kings is not yet explicitly rejected. Nevertheless, the law given to Moses aims at protecting the wife from arbitrary domination by the

husband, even though according to the Lord's words it still carries traces of man's "hardness of heart" which was the reason Moses permitted men to divorce their wives. **1613** On the threshold of his public life Jesus performs his first sign—at his mother's request—during a wedding feast. The Church attaches great importance to Jesus' presence at the wedding at Cana. She sees in it the confirmation of the goodness of marriage and the proclamation that thenceforth marriage will be an efficacious sign of Christ's presence. **1614** In his preaching Jesus unequivocally taught the original meaning of the union of man and woman as the Creator willed it from the beginning permission given by Moses to divorce one's wife was a concession to the hardness of hearts. (Mt. 19:8) The matrimonial union of man and woman is indissoluble: God himself has determined it "what therefore God has joined together, let no man put asunder." (Mt. 19:6) **1616** This is what the Apostle Paul makes clear when he says: "Husbands, love your wives, as Christ loved the church and gave himself up for her, that he might sanctify her," adding at once: "'For this reason a man shall leave his father and mother and be joined to his wife, and the two shall become one. This is a great mystery, and I mean in reference to Christ and the Church.'" (Eph. 5:25,26)

## God vs. gov: Dueling Mandates

**Q.** What is God’s mandate?

**A.** God’s mandate is explicitly stated in His very first words to His new human creatures: 'Be fruitful and multiply, and fill the earth and subdue it.' (Gn. 1:28).

**Q.** How can we be certain that God was serious about being open to new life?

**A.** These words were His very first command and God expressed and emphasized His mandate by repeating it three times—1) be fertile, 2) multiply, 3) fill the earth. To be further repetitious would insult our intelligence. And after the Great Flood, God said the same words to Noah and his family (twice). (Gn. 9:1, 9:7).

**Q.** Is God ever quoted in the Bible as saying “Thou shalt not contracept”?

**A.** Neither “contracept” nor “contraception” are found in Sacred Scripture. As stated and quoted above, God said the same thing without using the double negative “not” and “contra”.

**Q.** How else can we know that God was serious?

**A.** He made us in His own image, male and female, such that we could become “one flesh” in two ways—by the physical joining of male and female bodies and by the new body that could be created by that joining. He made this joining act exceptionally joy-

ful for the couple, so that they would seek to reenact it often and thus increase the probability that new lives would result. God truly wanted to make it easy for men and women to obey His command to be fertile, multiply, and fill the earth.

**Q.** But did God mean this to continue into the 21st Century when we already have 7 billion people on planet earth? Many would say the Earth is already filled.

**A.** There have been over-population alarmists for many decades and fears of mass starvation because the food supply could not keep up with population growth. Those

fears have been seen to be unfounded as is readily apparent by the food surpluses resulting from advances in mechanization, fertilization, hybrid seeds, and food storage and processing technology. It is true that many cities have huge populations, but these large cities exist because people want to live where others can provide services and resources that are only available in a community. That has been so since the dawn of civilization. There are vast areas of low population density for those who wish to live in small villages, or in a rural area.





# Obey Mandate or Scripture

**Q.** What is wrong with wanting to enjoy the one flesh union (OFU) without getting pregnant?

**A.** The Creator designed the female body such that not every OFU would be likely to result in a pregnancy. So couples can certainly expect to participate without conceiving a new life every time. However, it is clear that the essence (primary purpose) of the OFU is procreation of new life. The pleasure that the couple receive from this OFU generates a very strong bond between them such that they are inclined to remain together. This inclination is very important for the optimal development of children that result from their OFU. This combination of bonding, babies, and optimal child development signals the value of marriage as an institution whereby man and woman are publicly and exclusively committed to each other for life—a commitment that has come to be called marriage, and a grouping of individuals that we call family. After the individual, family is the basic building block (or cell) of society and Church.

**Q.** Well, maybe your definition of

family represents some ideal, but aren't other models for living just as good?

**A.** There certainly are many other models that have been tried throughout history, and our current culture continues to experiment with a variety of these—hooking up, adultery, cohabitation, single parenting, and same-sex relationships. Although there are exceptions, these models do not usually last a lifetime, such that any children that may result often suffer from not being part of a traditional family. And the parents suffer as well.

**Q.** Are you saying that the so-called traditional (nuclear) family is always going to be ideal?

**A.** No, because we all know (and may have been a part of) a very dysfunctional traditional family. What I am saying is that this ideal traditional family is the perfect model or template for the happiness and fulfillment of the parents and children. As such, it must be preferred before all other models.

**Q.** Is there evidence that supports this idealistic model?

**A.** Sociologists have completed many

studies over the past two decades that strongly confirm the traditional family as being best for the children, their parents, and society. See the “Sociological Concerns” section for more details.

**Q.** What is the Government's mandate?

**A.** The government mandate requires all employers (even the Church) to provide free coverage of contraception, sterilization and abortion in their health insurance plans in spite of these being immoral and intrinsically evil procedures or activities.

**Q.** Is there historical precedent for this mandate?

**A.** Our government has a long history of being supportive of anti-population (people) activities: a) funding the UN Population Fund; b) conditioning foreign aid on a country's promoting contraception, abortion and sterilization; and c) funding free access to these evils through Medicaid, welfare programs, and grants to Planned Parenthood.

**Q.** How long has this policy been in place?

**A.** After the Civil War (1860), for-

mer slaves were considered a burden to society, and they were not treated with the dignity deserved by every human person. A Eugenics movement developed to denigrate their value and label them as parasites, useless, feeble-minded, and worse to justify reducing their numbers. The eugenics philosophy took root in the US during the first half of the 20th Century and was heavily supported by the very wealthy and powerful in society. These elitists gradually obtained government support for their programs that included massive sterilizations of the poor Americans, primarily the descendants of slaves. Today, Planned Parenthood is the government's genocide implementing arm with 80% of PP abortion facilities located in poor and black communities.

**Q.** What has been the effect?

**A.** Today, a black baby is three times more likely to be murdered in the womb than a white baby is. Since 1973, abortion has reduced the black population by over 25 percent. The eugenicists have succeeded and they continue their evil ways.

## I Thought I Was Pro-life But God Told Me I Had the ‘Spirit of Abortion’

by Peter Baklinski

Fri May 18, 2012 16:04 EST Pueblo Colorado (LifeSiteNews.com)

Sarah Nelson, 22, was going through a challenging chapter in her faith journey in 2001 as she served in leadership at a successful megachurch in Denver, Colorado. She and her fiancée Brennon loved their church and the fellowship it provided, but Sarah could not shake off the feeling there was something missing.

At her Christian church, one thing that was impressed upon her was that abortion was wrong. For as long as she can remember, Sarah had always considered herself “very pro-life and absolutely against abortion.”

One day, while praying for an end to abortion on the anniversary of Roe v. Wade which legalized the killing of babies in the womb in 1973, Sarah suddenly experienced the voice of God saying to her:

You have the spirit of abortion.

The young woman remembers being stunned. ‘How could this accusation be true,’ she remembers reasoning vehemently with God, when she was clearly against the horrible crime of

ending an innocent life in a mother's womb?

Again, Sarah experienced the convicting voice of God:

You have the spirit of abortion in you because you do not value children

as you ought. You see them as a burden and something that would inconvenience your life.

As Sarah pondered the word she had received, it dawned on her that God was entirely right. She had believed that it was wrong to kill children through abortion, but she now realized that a deeply

rooted contraceptive mentality within her had prejudiced her to not really value children or to even desire them.

“Up to that point, I had had no exposure to the perspective of contraception as a moral evil,” Sarah told LifeSiteNews. Growing up, I was extremely familiar with the fact that as couples were counseled for marriage in church, it was the assumption across the board that to be a ‘prudent newlywed couple’, you must contracept, and preferably for at least two years in order to establish a ‘stable marriage’.”

“Rarely were children talked about in terms of ‘abundance and overflowing

joy’. In some circles it was strongly suggested that couples limit their family size for the good of God. Many couples saw two children as plenty.”

“I was not really open to having children, nor had I been encouraged to be so from my church leadership. From this flowed the natural conclusion that contraception was fine. And if contraception was fine, then I could see how the logic worked that allowed abortion (God forbid) to be fine because it got rid of an ‘inconvenience’.”

“I was horrified as I suddenly and instantly knew the horrible truth: being closed to life through contraception actually leads to the reality and horror of abortion.”

It was with sadness that Sarah realized that she had become a victim of the logic of contraception without even realizing it. “And sadly, this was where I had been up till that day,” she recounted.

As a consequence of her humbling experience with God, Sarah turned to the Catholic Church for answers and

eventually became Catholic along with her now-husband Brennon. They now have two children and are hoping for more.

To this day, over a decade later, it fills Sarah with sadness that many of her friends cannot see what she calls the “real beauty of sexual union and the beauty of being totally open to the gift of life”. Nonetheless, she and her husband will hardly let an opportunity pass by to challenge their friends to think about the dimension of gift that is inherent in sexual union and that entails an openness to life.

“The gift God has given us, the ability to procreate with him, why would we not want to be part of that?,” the couple often asks their friends.

Sarah says that she will be forever grateful for the day that “God opened my eyes wide to this truth and I truly became pro-life. I’ll

never forget that day. It is very much seared into my memory.”

<http://www.lifesitenews.com/news/i-thought-i-was-pro-life-but-god-told-me-i-had-the-spirit-of-abortion?>





## Confessions from an UNWANTED Child

By Rebecca Peck

With the buzz of OCTOBER BABY fresh in the air, I imagine there will be many new questions posed by children to their parents, “mom (or dad), **was I a WANTED child????**”

Now that the Affordable Health Care Act is law, we have been talking about the appropriateness of contraception and abortion in health care. The mantra seems to be “make every child a wanted child.” But the pill and the availability of abortion was supposed to solve this dilemma, and we have given it 50 years, yet there are still a lot of unwanted children being born, and aborted. **It seems there are many in our secular culture who deem that only those children who are wanted are, in fact, valuable and worth having.** However, what about those children who were not actively planned or initially sought after? OCTOBER BABY attempts to answer that most important question.

**I, too, was an unwanted child.** I grew up always knowing that I was adopted, and this was a source of much shame for me. My parents told me nothing about the details of my biological mother’s history, but they

always told me I was “special”. At the age of 25 years old, I was able to find out non-identifying information about the circumstances around my adoption. I

found out my biological mother was in college on a piano scholarship, but that she had been “date-raped” by my father, who was just about to be shipped out to Vietnam. The year was 1965 and Roe

v Wade was not yet legalized. **My mother had the courage to interrupt her college, go to a home for unwed mothers, and give me life, even though I was most certainly NOT WANTED.**

Shortly after this revelation, I began medical school. In 3rd year, we were taught to perform abortions in a women’s “medical” center in Illinois.



The abortions were allowed up to 24 weeks. Since I had just returned to my Catholic faith, I was able to opt out on the basis of conscience (something

which may not persist in the current government climate unfortunately). While still very new in my faith, I reacted with puzzlement to one specific quandary. Next to the women’s center was a large research hospital with an active obstetrics

unit. Many high-risk babies were brought to that hospital in hopes that they could receive the finest medical care around so that they could live. Some of those babies were only 22, or 23 weeks old. **It struck me that at that hospital, we were working around the clock and spending millions of dollars saving THOSE babies, while right**

**across the street, at the abortion clinic, the other babies were being forcefully extracted from their mother’s wombs.** The only difference between the two babies was this question of WANTEDNESS.

If you have not seen OCTOBER BABY yet, I would urge you to see it. I do not want to spoil the ending for you. But for me, **I can tell you how unequivocally grateful I am to my mother for giving me life. How unwanted I was did not matter.** She loved me enough to give me life. She could not know then that I would go on to fulfill my life’s dream of becoming a doctor, or that I would marry my soul mate Ben, who was also a doctor, and that we would practice together. She would not know that we would go on to have six beautiful children. She would not know how happy and blessed we all feel every moment of our lives. Nobody can know what grace God can bring into even the saddest situation—so let us err on the side of life.

Dr. Rebecca Peck is a family physician, NFP instructor, pianist, and most importantly, a wife and mother of six children.

## Welcome Baby Seven Billion!

by Steven W. Mosher

Sometime late this year [2011] a baby will emerge from the womb of its mother, draw its first breath, and announce its arrival into the world with a tiny cry. Thus will Baby Seven Billion be born.

Everyone agrees that Baby Seven Billion’s birthday—the day that our planet becomes home to seven billion human beings—marks an important milestone. But is it a milestone on humanity’s upward path that we should celebrate, or a warning sign of impending catastrophe?

The prophets of doom and gloom, of population bombs and the baby booms, would have preferred that Baby Seven Billion had never been born.

We at the Population Research Institute have a different take on the matter. We believe that the birth of Baby Seven Billion is cause for celebration. He or she has been born into a world that is more prosperous than our forebears could have imagined.

As our numbers have climbed so has our well-being. In 1800, when there were only 1 billion people, per capita income was a mere \$100. By 1900, as the population was closing in on 2 billion, it reached \$500. Currently, with 7 billion people, per capita income has soared to over \$5,000. In 2100, when the population is projected to be between 7 and 8 billion (and falling), it will be \$30,000 in current dollars.

Driving the so-called “population explosion” has been a real explosion in

health and longevity. As late as the 19th century, four out of every 10 children died before reaching age five. Today under-five mortality is under 7 percent. Two hundred years ago, human life expectancy was under 30 years. Today it is closer to 70 years.

As people live longer, naturally there are more of us around at any given time. This is cause to celebrate, not to despair.

By nearly every measure of well-being, from infant mortality and life expectancy to educational level and caloric intake, life in Africa, Asia, and Latin America has been getting dramatically better. According to the World Bank, the average income in the developing world has more than doubled since 1960.

Enough grain is produced for every person on earth to consume 3,500 calories daily. There is no need for anyone to starve in the midst of this plenty.

Population has doubled since 1960, but world food and resource production has never been higher. Economies continue to expand, productivity is up, and pollution is declining. Life spans are lengthening, poverty is down, and political freedom is growing. Even the intractable Middle East, thought to be forever the playground of dictators and ayatollahs, is astir. The human race has never been so well off.

In fact, underpopulation, not overpopulation, is the biggest threat facing the world today. Over eighty countries representing well over half the world’s

population will have below replacement fertility—defined as an average 2.1 children per woman.

The populations of the developed nations today are static or declining. The UN predicts that, by 2050, Russia’s population will have declined by 25 million people, Japan’s by 21 million, Italy’s by 16 million, and Germany’s and Spain’s by 9 million each. Europe and Japan will lose half their population by 2100.

Countries with below replacement rate fertility will eventually die out. It’s just a matter of time.

Even in the developing world family size has shrunk, from around 5 children per woman in 1900 to well under 3 today. And the decline continues.

According to the UN’s “low variant projection”—historically the most accurate—the population of the world will peak at 8 billion in 2040 or so, and then begin to decline.

High fertility rates are becoming rare. The UN numbers for 2008 show only a handful of countries with population increase rates at or above 3.0 percent.

By 2050, persons aged 65 and above will be almost twice as numerous as children 15 years and younger. The economic consequences of population aging will be closing schools, declining stock markets, and moribund economies.

Ignoring these facts, the population controllers continue to spread their myth

of overpopulation.

The UNFPA and other population control organizations are loath to report the truth about falling fertility rates worldwide, since they raise funds by frightening people with the specter of overpopulation. They tell us that too many babies are being born to poor people in developing countries. This is tantamount to saying that only the wealthy should be allowed to have children, and is a new form of global racism.

We should stop funding population control programs, and instead turn our attention to real problems like malaria, typhus, and HIV/AIDS.

Let us also join together in celebrating the birth of Baby Seven Billion. He or she is a sign of our future, our hope and our prosperity.

People are our greatest resource. Extraordinarily gifted people have helped to enrich civilization and lengthen life spans. But the fact is, everyone, rich or poor, is a unique creation with something priceless to offer to the rest of us.

Baby Seven Billion, boy or girl, red or yellow, black or white, is not a liability, but an asset. Not a curse, but a blessing. For all of us.

Steven Mosher is President of the Population Research Institute.

This article was PRI’s Weekly Briefing for 22 February 2012.





One More Soul

Mandate BUSTING Resources

Our Strategy:

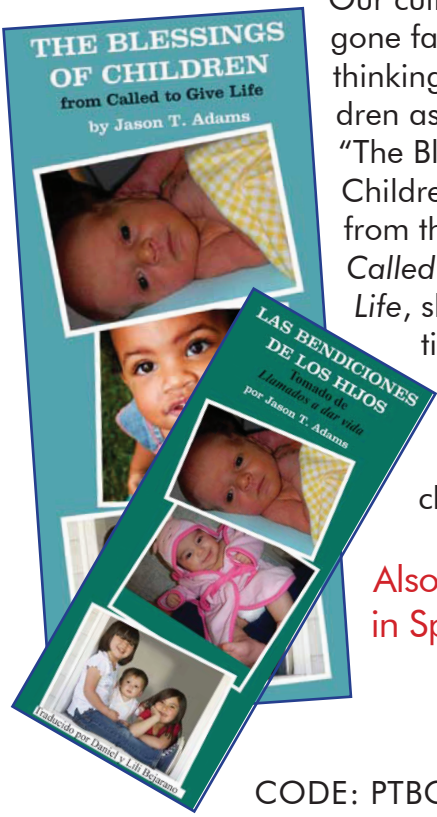
One More Soul (OMS) has a multitude of educational resources for challenging the HHS Mandate at its foundation—contraception, sterilization and abortion. OMS resources offer four philosophies for confronting these intrinsic evils:

- Children are a blessing
- “Natural Family Planning” offers couples a healthy approach for spacing children
- Birth control (contraception, sterilization, and abortion) is unhealthy and does not belong in any health care program
- These evils harm families, church and society

Children are a Blessing Resources

Children are the natural fruit of marriage and the Supreme Gift to (and from) marriage. They are our response to God’s command in Genesis to “be fruitful, multiply, and fill the earth.” Children deepen the couple’s love for each other and help them work together to build their family into a small civilization of love, and an example for the larger culture of life.

“The Blessings of Children”

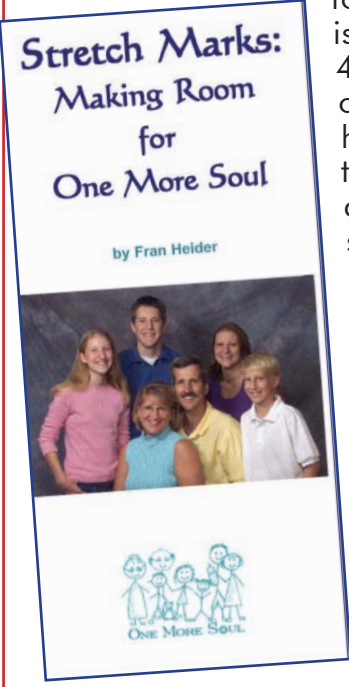


Our culture has gone far astray in thinking of children as a curse. “The Blessings of Children”, taken from the book *Called to Give Life*, shows beautifully and poetically just what a blessing children are.

Also Available in Spanish!

CODE: PTBC & PTBCsp

“Stretch Marks: Making Room



for One More Soul” is the story of how a 40-year-old mother of four and her husband received the grace to welcome one more soul into their family. Fran shares her emotional journey with candor and humor. She compares the stretch marks on her body to the stretch marks on her heart—enabling her to make more room for God’s love and providence.

CODE: PSTM

“The Tunnel of Parenthood:



The First Five Years.” Emily Sederstrand offers hope to couples struggling through the first five years of parenthood. She and her husband Tom teach NFP to couples in their area. Emily says, “When you tell a woman how she’s made, you are telling her about her Maker!”

You can download it and read it this pamphlet at: [onemoresoul.com/news-commentary/the-tunnel-of-parenthood.htm](http://onemoresoul.com/news-commentary/the-tunnel-of-parenthood.htm)

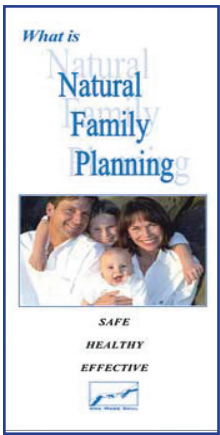
CODE: PTPP

Pamphlet Prices: \$0.35 per pamphlet

Plus Shipping and Handling

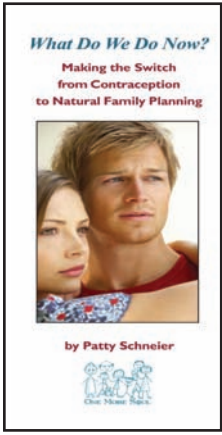
Our quantity discount prices:	Quantity	10+	100+	1000+
	Price	\$0.28	\$0.25	\$0.21

Natural Family Planning Resources



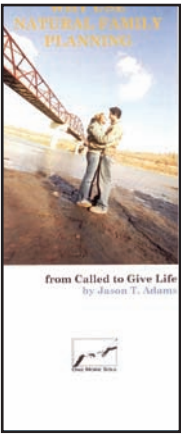
A complete overview of modern Natural Family Planning, describing methods of NFP, its advantages, potential problems with other forms of family planning, and resources for NFP training.

CODE: PNFP & NFPsp



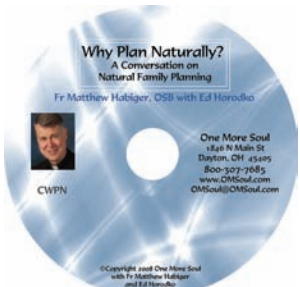
When a couple realizes that contraception is a bad choice, what can they do next? Patty Schneider faced this crisis, and shares her hard-earned wisdom.

CODE: PWUN



“Why Use Natural Family Planning”, taken from the book *Called to Give Life*, systematically presents the good consequences for couples using NFP.

CODE: PWUN & PWUNsp



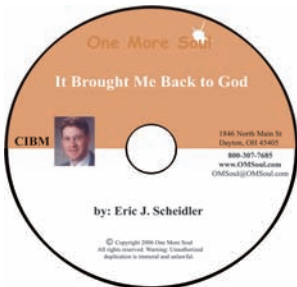
Why Plan Naturally by: Fr. Mathew Habiger

CODE: CWPN



Why NFP is a Priority in My Parish by: Fr. Randall Moreau

CODE: CWNP



It Brought Me Back to God by: Eric Scheidler

CODE: CIBM

CD Prices: \$5.00

Plus Shipping and Handling

Quantity	10+	50+	100+
Price	\$3.00	\$1.50	\$1.00

OMS CDs are also available as MP3s



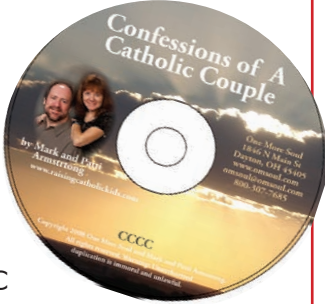
Contraception & Sterilization Resources

Contraception and sterilization cause God’s sacred act of sexual intercourse—the marriage act—to be counterfeit. Consequently, the bonding power of the act is diminished and the couple is less likely to stay together, whether married or single. The high divorce rates, serial relationships, and low indices of female happiness prevalent in our society offer clear testament to this phenomenon. The two natural ends of sexual intercourse—bonding and babies, unitive and procreative—are not easily separated. Space does not permit us to show all the resources available for explaining the harms of artificial birth control. Here are a few.

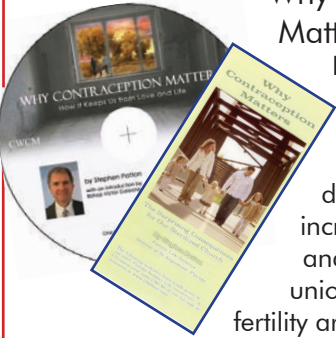


**The Cure**  
“The Cure” describes the history of the contraceptive movement’s overwhelming success in our day, and describes workable strategies for turning this around.  
CODE: PTCH & PTCHsp

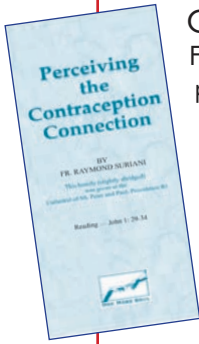
and pain of a contracepted (and later sterilized) marriage, to rediscovery of their faith in God and their love for each other, Mark and Patti take you on their journey and share the wisdom they gained with honesty and humor.



CODE: CCCC



**Why Contraception Matters**  
Practically speaking, widespread use of contraception has led directly to massive increases of divorce and abortion. Personal union and yearning for fertility are written physically into the structure of sexual relations, and shutting down one of these aspects hurts the whole relationship. There are practical, workable steps we can take to regain the overflowing life that God desires for us.  
“Why Contraception Matters” is available as a talk on CD and an informative pamphlet.  
CODE: CWCM & PWCM



**Perceiving the Contraception Connection**  
Fr. Ray Suriani, a Catholic priest, encourages people to reject contraception and to practice Natural Family Planning. In this pamphlet, the author makes the case that contraception is at the root of abortion and many other evils.  
CODE: PPCC



**Testimony of Healing: Sterilization Reversal - An Act of Love**  
This is the story of a couple who chose sterilization (under pressure from many sources). They found that living with sterilization made life progressively worse for them, then found wonderful restoration and healing through reversal of the sterilization.  
CODE: CTHS

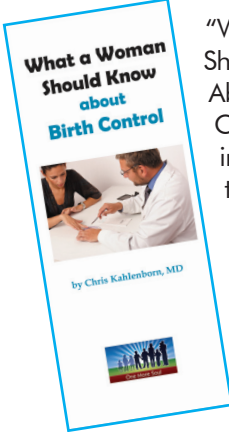


**“Prove it God”**  
Patty Schneider speaks as a Catholic woman and mother in our modern times. She tells her personal story in words and songs of how God worked in her heart to turn her away from contraception and toward Natural Family Planning. Patty describes her efforts to achieve holiness by daily Mass, rosary, scripture study, journaling, and Eucharistic Adoration. This quest for holiness was annoying her because she sensed that God was telling her to stop using contraception in her marriage. She didn’t think God had any business interfering in her marriage. But, she eventually conceded that God’s plan was superior to her and Larry’s. They threw out the birth control, learned Natural Family Planning, and have never been happier.

This powerful presentation affected an entire diocese. In October 2007, Bishop Paul Zipfel (now retired) of Bismarck North Dakota mailed “Prove It God! And He Did” to all 25,000 Catholic families in the Diocese. The results were quite phenomenal: Patty’s CD became THE topic of conversation; Bishop Zipfel received over 60 communications from people—all positive, no complaints; lines for reception of reconciliation; jump in NFP class attendance; and increases in infant baptisms and seminarians in following years. Could it happen in your diocese or parish?

CODE: CHTC

Health Risks of Hormonal Birth Control



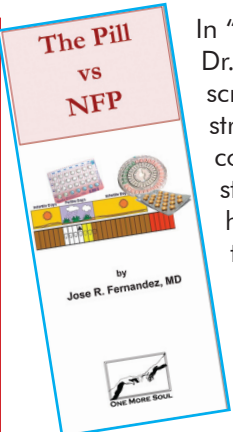
**“What a Woman Should Know About Birth Control”** contains information on all the major methods of contraception, with their methods of action and health consequences. Natural Family Planning is also presented briefly as a beneficial alternative.  
PWWS & PWWSsp



**“The Pill and Breast Cancer”** describes how the Pill increases the risk of breast cancer, and offers effective strategies for prevention. Women who take contraceptive pills before their first full pregnancy are 44% more likely to develop breast cancer before menopause. This is a real eye opener for people who think the Pill is harmless.  
CODE: PBCP & PBCPsp



The oral contraceptive pill, known as “the Pill” is used for contraception and for a variety of women’s health problems. Harmful effects of the Pill (health problems, social problems, ethical problems, etc.) have created a need for alternative treatments. Here are explanations of the major uses of the Pill, how it works, and effective alternatives.  
CODE: PATP & PATPsp

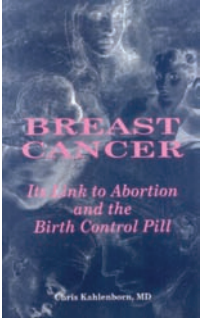


In “The Pill vs. NFP,” Dr. Fernandez describes the spiritual struggle of removing contraceptives and sterilization from his practice. He then explains the damage (physical, emotional, and relational) from contraception, and the corresponding benefits from Natural Family Planning.  
CODE: PPVN

OMS Books



**Physicians Healed** contains the stories of 15 physicians who do not prescribe contraceptives and who promote Natural Family Planning. These are powerful accounts of conversion, courage, and conviction. Learn what moved these doctors to risk losing patients, income, and the respect of their peers. Many physicians have been converted after reading this book.  
BPHC \$5.00



Based on six years of study and a meticulous analysis of hundreds of scientific papers and other sources, Dr. Chris Kahlenborn documents the effect that abortion and hormonal contraception have on breast cancer, as well as uterine, cervical, liver, and other cancers, and even the transmission of AIDS! Hormonal contraceptive use before first full term pregnancy is found to increase risk of breast cancer by at least 40%. The book gives special attention to black women, to various populations of the world, and to effective steps for prevention. This is a very timely and powerful work.  
BBCL \$9.95

One More Soul offers many other books by other publishers. Please visit our web site to view these. Over the years we have published several books that are currently out of print. We are in the process of updating and reprinting these. All OMS published books may be read on-line.



# A New Era In Catholic Health Care is Here!

There are models of authentic Catholic health care that represent the wave of the future—a wave that in some ways is really a remnant of years gone by—a time when physicians took the Hippocratic Oath and held as their mantra, “First, do no harm.”

**The Christus Medicus Foundation** has led the organization of two recent Catholic Health Care Conferences under the name, “Make Straight the Pathway”: Livonia MI, 2011, and San Francisco CA, 2012. These were distinctive regional conferences for religious and healthcare leaders.

The objectives were to equip attendees to:

- Advocate for state and federal public policy that actively protects and promotes religious liberty and individual right of conscience in healthcare and allows all Americans to select qualified health care providers that do not violate their religious liberty.

- Develop Culture of Life Primary Care Medical Centers.
- Establish a National Catholic Health Plan that is Christ-centered and consistent with the Ethical and Religious Directives (ERDs) of Catholic Health Care.

The San Francisco Conference was held on 29-31 March at the Archdiocese of San Francisco Conference Center. The Conference was co-hosted by Christus Medicus Foundation and Life Legal Defense Foundation. The co-sponsoring organizations were: Archdiocese of San Francisco, Dioceses of Oakland, Sacramento, and Santo Rosa, Catholic Medical Assn, Pope Paul VI Institute, California Association of NFP, American Academy of Fertility Care Professionals, and One More Soul

MARCH 29-31, 2012  
ST. MARY’S CATHEDRAL EVENT CENTER,  
& HOTEL KABUKI  
SAN FRANCISCO, CALIFORNIA



## Find Out What They Talked About!

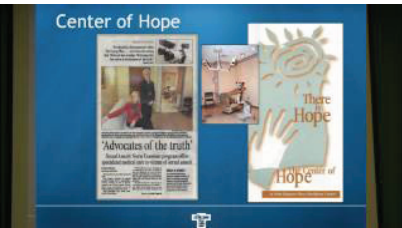
Video recordings of the presentations are available on the One More Soul YOUTUBE CHANNEL at [www.One More Soul.com/SanFrancisco](http://www.OneMoreSoul.com/SanFrancisco). All the presentations were outstanding, but of particular interest to Catholic Dioceses and Catholic Health Care institutions would be Bishop Robert Vasa’s presentations (5. & 18.) describing his successful efforts to provide innovative and fully Catholic health care plans for diocesan personnel. Gene Diamond’s presentation (11.) is also a must for every bishop, and all Catholic hospital administrators seeking a thoroughly Catholic identity and a very healthy bottom line. Examples of Catholic health care delivery modes that serve the underserved and abortion vulnerable were presented by Tim Von Dohlen (15.), Dr. George Delgado (9.), and Dr. Paddy Jim Baggot (7.). Drs. Thomas Hilgers (8.) and Mary Davenport (3.) described the structure and the practice of Natural Procreative Technology—the new standard for fertility care that is revolutionizing obstetrics and gynecology.



1. Panel discussion: Protecting Religious Liberty and Right of Conscience



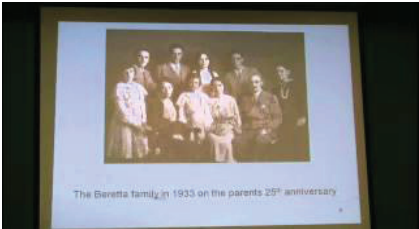
6. Congressman Jeffrey Fortenberry, R-NE: The Fight for Rights of Conscience



11. Gene Diamond: Preserving, Protecting and Defending the Identity of the Roman Catholic Hospital



16. Dana Cody: Establishing a National Catholic Health Plan that is Christ-centered



2. Thomas McKenna: St. Gianna Physician's Guild



7. Jim Baggot: Report From the Los Angeles Abortion District



12. Walter B. Hoye II



17. Catherine Short: Christ-centered health-care



3. Mary Davenport: Natural Procreative Technology for Infertility



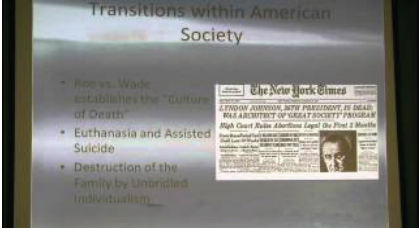
8. Thomas Hilgers: The professional infrastructure of the Creighton model system and NaPRO technology



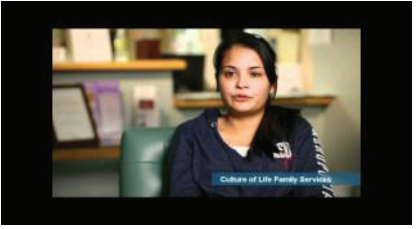
13. Panel discussion: Providing Care Consistent with the Ethical and Religious Directives



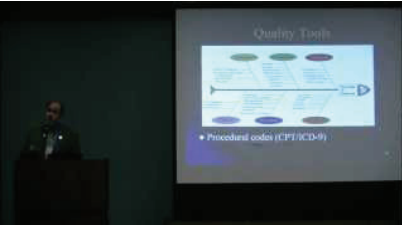
18. The Most Reverend Robert F. Vasa, Bishop of Santa Rosa



4. Donald Bouchard: Providing Care Consistent with Catholic Teaching



9. George Delgado: Creating a Culture of Life in Family Services



14. John Brehany: Optimal Strategy and Tools for Applying the ERDs



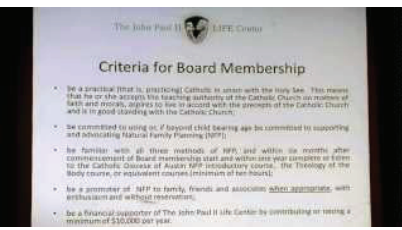
19. Richard Doerfflinger: State and federal public policy for health care



5. The Most Reverend Robert F. Vasa: Ethical and Religious Directives for Catholic Health Care Services



10. "Make Straight the Pathway" Sponsors and donors statements



15. Tim Von Dohlen: An Integrated and Unified Solution for CATHOLIC HEALTHCARE REFORM



20. William Cox: Religious Freedom & Conscience Rights In an Era of "Moral Pluralism"



# One More Soul **Mandate BUSTING** Resources

July 2012

We are all very proud of this “Obey Mandate or Scripture” newspaper. We believe it can be a very effective tool for challenging the HHS mandate. **This newspaper is also an enduring resource for teaching the TRUTH about birth control—the undergirding and continuing problem with the HHS mandate.** Please consider ordering a quantity for group study in your parish, prayer group, or other venue.

We are very grateful to Cincinnati Archbishop Dennis Schnurr for granting the *Imprimatur* to this newspaper—see the first page.

I also express my gratitude to the authors of articles in this newspaper, and especially to Life Site News for the generous permission to republish several articles. Life Site News' unique service to the pro-life, -marriage, and -family community is unequalled for providing THE most important news of the week!

**One More Soul** staffers Diane, Joanna, and Vince were particularly involved in organizing and beautifying this newspaper. I think they did a great job!

One More Soul is **alive and vibrant** with other faithful staffers—Julia, Daniel, Lili, Darlene, and Tessia—eager to serve you, whether you work in a parish or diocese, a pregnancy support center or other pro-life apostolate. Perhaps you have your own “family-, purse-, or car-apostolate” handing out CDs and pamphlets to whom ever will accept them. **We appreciate you and we want to serve you as well as possible by providing access to the very best resources for educating people about God’s plan for love, marriage, sex, and children.**

Thanks and blessings to you and those you serve.

Steve

Steve Koob, PhD, MATS, Director & Co-Founder, One More Soul

PS Please help One More Soul cover expenses associated with creating, printing, and mailing this newspaper by donating on line at [www.OneMoreSoul.com](http://www.OneMoreSoul.com) or sending a check to ***One More Soul, 1846 N Main St, Dayton OH 45405.*** ***May God bless your generosity!***

# First Comes Love

Here is everything you wanted to tell your married child, and everything you wish your parents had told you about marriage. *First Comes Love* is a collection of the very best the Church has to offer to help couples have long and very happy marriages. Drawing from Popes John Paul II and Benedict XVI, Christopher West, Jason Adams, Emily Sederstrand, Steve Wood, St John Chrysostom, and many others, this publication offers articles, quotes, personal testimonies, graphs, prayers, and recommendations.

Subjects include finding the right mate, the blessings of children, the value of Natural Family Planning, how chastity works inside of marriage, and infertility - everything a young couple needs to get their marriage onto a solid foundation. *First Comes Love* is a valuable resource for helping married couples—and those planning for marriage—reach an understanding of God’s plan for love, marriage, sex and family. *First Comes Love* has been widely used by parishes and dioceses as an appealing supplement to established marriage preparation programs. One More Soul is very happy to again be offering this 20 page tabloid that gently reinforces Catholic Church teaching on marriage. As such, it fills a desperate need in a culture that seems increasingly committed to the destruction of marriage and family—the essential foundations of society, including the Church.



## First Comes Love

Code: KFCL

Price: 2.50 \*plus shipping and handling

Our quantity discount prices:

Quantity	10+	50+	100+
Price	\$1.50	\$1.00	\$.55

Call for details of prices for larger quantities

## What Can We Send You?

Items in red are available in both English and Spanish!

## Pamphlets:

- ☐ PTBC The Blessings of Children
- ☐ PSTM Stretch Marks: Making Room for One More Soul
- ☐ PTPP The Tunnel of Parenthood
- ☐ PNFP Natural Family Planning: Safe, Healthy, Effective
- ☐ PWUN What We Do Now?
- ☐ PTCH The Cure
- ☐ PWCM Why Contraception Matters
- ☐ PPCC Percieving the Contraception Connection
- ☐ PWWS What Every Woman Should Know About Birth Control
- ☐ PBCP The Pill and Breast Cancer
- ☐ PATP Alternatives to the Pill
- ☐ PPVN The Pill vs. NFP

### Compact Discs:

- ☐ CWPB Why Plan Naturally
- ☐ CWNP Why NFP is a Priority in my Parish
- ☐ CIBM It Brought Me Back to God
- ☐ CWCM Why Contraception Matters
- ☐ CTHS Testimony of Healing: Sterilization Reversal
- ☐ CHTC Prove it God...And He Did

### Books and Booklets:

- ☐ BPHC Physicians Healed
- ☐ BBCL Breast Cancer: It's link to Abortion and the Birth Control Pill
- ☐ KFCL First Comes Love tabloid

To order, visit our website at

**www.OneMoreSoul.com** or call us at **(800) 307-7658**

Be sure to check out our other life-affirming resources!



## A Lie is a Lie, Newman and Federal Government

By Father Juan Vélez

The following essay was sent to Cal Catholic Daily to commemorate Newman's birthday on Feb 21. Father Juan Vélez is a San Francisco priest of the Prelature of Opus Dei, and author of *Passion for Truth, the Life of John Henry Newman*, and co-author with Mike Aquilina of *Take Five, Meditations with John Henry Newman*.



John Henry Newman

Religious freedom has become the civil rights issue of our time for Americans. The dispute over conscientious objection to providing insurance coverage for the morning-after pill, contraception, and sterilization brings the issue to a head.

The cry on interviews regarding any moral issue is: "Why should they (Catholic laity, priests or bishops) impose their morality on us?" The sound bytes do not give people time to reply: "Who is imposing their values on whom?"

In fact, the federal government is dictating its narrow view of morality on its citizens. Legislation and judicial rulings have done likewise concerning marriage, and the teaching of religion, and of homosexuality in schools.

This unjust interference in the religious beliefs and liberties of individuals and Churches has been directed primarily against the Catholic Church. Catholics have always been the strongest defenders of human life from conception to natural death, and of

marriage as the permanent union of one man with one woman.

Nowadays Catholics do not look much different from other Americans in their religious fervor. Only 25 percent or fewer regularly attend Sunday Mass and many take religion and morality lightly.

Committed Catholics are often regarded as retrograde and intolerant. This is far from the truth. Practicing Catholics represent traditional American values, shared—until recent years — by Protestants, Jews, and Muslims are in jeopardy.

The current Administration has ably divided and conquered Catholic voters. It has obtained the endorsement of the Catholic Hospital Association and of the Association of Jesuit Colleges and Universities for its revised plan for contraceptive funding.

Groups like these are being depicted as the voice of the Catholic Church while the bishops are portrayed as unreasonable, misogynist, and out of touch.

Welcome to yesteryear! In mid-19th century England, the situation was very similar. In the eyes of the British Establishment, Catholics were superstitious, untrustworthy and potentially disloyal. This makes the analysis of the great theologian, essayist and saint, John Henry Newman of great interest.

In 1851, Newman gave a series of lectures, "On the Present Condition of

Catholics in England." In these, he exposed and analyzed the phenomenon of anti-Catholic bigotry: "the infliction of our own unproved First Principles on others, and the treating of others with scorn or hatred for not accepting them." He went on:

"I say, there is no increase of logical cogency; a lie is a lie just as much the tenth time it is told as the first; or rather more, it is ten lies instead of one; but it gains in rhetorical influence.

Let it be repeated again and again; the utterer has only to go on steadily proclaiming it, and first one, then another, will begin to believe it, and at length it will assume the shape of a very respectable fact or opinion, which is held by a considerable number of well-informed persons."

Today there are lies aplenty being spread by the current Administration: "contraception is good for women"; "pregnancy is a burden and something that should be prevented"; "contraception is safe for women"; "if it fails women have a right to abortion"; and "everyone should be given free access to contraception and abortion."

Newman would have understood:

"As Prejudice is the rejection of reason altogether, so Bigotry is the imposition of private reason — that is, of our own views and theories of our own First Principles, as if they were the absolute truth, and the standard of all argument, investigation, and judgment."

In Newman's time, bigotry was directed against Catholics. Now it is directed to all believers even though Catholics are in the front lines.

However, the most important issue is the Administration's assault on people's Constitutional rights. This ruling lays the groundwork for an even more far-reaching intrusion of people's rights.

This is something that will affect all men and women who practice religion in America. It is a breach of the fundamental right of religious freedom protected by the U.S. Constitution. Cardinal Roger Mahony has written,

"Freedom of conscience and religious liberty are not concessions grudgingly granted by the Federal Government—either directly, or by way of exemption or exception. Our nation was founded on those basic and inalienable rights as the bedrock of who we are as Americans.

"Our Constitution was written precisely to reject and to avoid the dreadful English model whereby the king and the government are the granter of all rights, including religious rights — as well as the single power to withdraw, limit, or negate those rights."

The present position of Catholics in the US and of people of other religions is not good. There is much at stake: the civil rights of American citizens. In the face of these violations of the fundamental right of religious freedom Catholics and other believers must be able to articulate their beliefs well and to defend them in the legislatures, courts of law, and media.

If democracy is to survive, social liberals cannot continue to impose their beliefs on everyone else. Reason and justice, respect for religious freedom and for individuals' civil rights must be upheld.

*"To force Americans citizens to choose between violating their consciences and forgoing their healthcare is literally unconscionable."*

—Timothy Cardinal Dolan, Archbishop of New York

## Why Birth Control Leads to Abortion

By Steve Koob

Those who promote birth control prefer to call birth control "contraception" to disguise the fact that many so-called contraceptives in fact act as abortifacients. All hormonal birth control (pill, shot, patch, implant, IUD, etc) has as one of its mechanisms of action the thinning of the lining of the uterus resulting in the endometrium being "hostile to implantation." As a result, some embryos are aborted. No precise way is practical for determining how often this happens—perhaps one to several times per year. Therefore, the most obvious way that birth control leads to abortion is by being abortion. These abortions (a consequence of abortifacients) are unreported, uncounted and mostly ignored by the anti-abortion movement. The reports of decreasing surgical abortion numbers give a false sense of progress in the battle for the right to life. The reality is that the abortion industry is moving away from the messy surgical approach to the more hidden chemical approach. The Morning After Pill (MAP) is another example of this movement.

Pregnancy help centers and abortion centers have reported for years that about 1/2 to 2/3rds of their clients claim they were using birth control when they became pregnant. The implication is that they did not intend to get pregnant, but they did, and now they "need" an abortion. They would not have the "need" if they were not having sex, and they probably would not be having sex if they did not have a "contraceptive". Thus birth control leads to abortion. Birth control has become so ingrained in our culture that the Supreme Court said that we have to have abortion as a back-up for failed contraception. See PP vs. Casey 1992.

When the pill became widely available in the '60s, the culture changed very quickly. In 10 years the divorce rate doubled; family size dropped precipitously; mothers left home for a job; sexual activity outside of marriage became more common. Every woman was on the pill, so every woman was available—to her husband, sure—but also to every other man, in a way. The sexual content increased in movies and

music, and encouraged the idea that everybody was having sex, and marriage was not a requirement; it was great fun, and there were no adverse consequences like disease, kids, emotional trauma, or sin. It was easy to get the foggy idea that sex and babies are DISconnected—that babies are NOT a natural consequence of sexual intercourse. This idea gave impetus to having sex without birth control—natural sex—natural is more fun. Babies were not expected, wanted, or planned. Nevertheless, whether because of failure to use birth control, or the failure of all forms of birth control, babies happened. Abortion was the only way out. The increased sexual activity encouraged by ready access to a plethora of modern birth control methods, and their inherent failure rates, has resulted in a high demand for abortion—surgical and chemical.

Early diagnosis of fetal abnormalities (particularly Downs Syndrome) has resulted in many abortions that are not attributable to birth control. Artificial Reproductive Technologies often cause the creation of more children than wanted such

that "selective reduction" abortions are done. These too cannot be blamed on birth control.

Thus it appears that most abortions are a consequence of birth control (commonly called "contraception") both because of birth control's failure and because of its effectiveness. Either the birth control method fails in its contraceptive mechanism, and acts as an abortifacient, or both contraceptive and abortifacient mechanisms fail, and a pregnancy develops causing the mother to seek surgical abortion. Because birth control is relatively effective (though less so than the promoters would have us believe), couples may forget the connection between sexual activity and babies, and thus forget to use birth control, resulting in pregnancy and the temptation to abort. As Blessed John Paul II said, "Contraception and abortion are often closely connected, as fruits of the same tree." (Evangelium Vitae, 13.)

Steve Koob is the co-founder of One More Soul.

*"A death knell for religious liberty in the United States."*

—Bishop James Conley of Denver





## The Population Control Agenda

By Stanley K. Monteith, MD

One of the most difficult concepts for Americans to accept is that there are human beings dedicated to coercive population control and genocide. Many readers will acknowledge that our government is helping to finance the Red Chinese program of forced abortion, forced sterilization, infanticide, and control of the numbers of live births. Most readers will accept the fact that our nation is helping to finance the United Nations' world-wide "family planning program," a form of population control. Most rational men and women, however, find it impossible to believe that such programs are really part of a "master plan" to kill off large segments of the world's population.

### Margaret Sanger and Planned Parenthood

There really are those who have publicly advocated the elimination of "human weeds" and "the cleansing of society." Indeed, to this very day your tax money is used to finance Planned Parenthood, an organization founded by Margaret Sanger. During the 1930s Margaret Sanger openly supported the Nazi plan for genetic engineering of the German population, and the propagation of a "super race."

In Planned Parenthood's 1985 "Annual Report" leaders of that organization proclaimed that they were, "Proud of our past, and planning for our future." In his excellent book "Killer Angel," George Grant chronicles the life and writings of Margaret Sanger, and painstakingly documents Sanger's plans for the genetic engineering of the human race. George Grant noted that in the 1920s Margaret Sanger wrote "The Pivot of Civilization" in which she called for:

"The 'elimination of 'human weeds,' for the 'cessation of charity' because it prolonged the lives of the unfit, for the segregation of 'morons, misfits, and the maladjusted,' and for the sterilization of genetically inferior races."

According to George Grant, Margaret Sanger believed that the unfit should not be allowed to reproduce. Accordingly, she opened a birth control clinic in: "The Brownsville section of New York, an area populated by newly immigrated Slavs, Latins, Italians, and Jews. She targeted the 'unfit' for her crusade to 'save the planet.'"

Nineteen years later, in 1939, Margaret Sanger organized her "Negro project," a program designed to eliminate members of what she believed to be an "inferior race." Margaret Sanger justified her proposal because she believed that: "The masses of Negro...particularly in the South, still breed carelessly and disastrously, with the result that the increase among Negroes, even more than among whites, is from that portion of the population least intelligent and fit..."

As Margaret Sanger's organization grew in power, influence, and acceptance, she began to write of the necessity of targeting religious groups for destruction as well, believing that the "dysgenic races" should include "Fundamentalists and Catholics" in addition to "blacks, Hispanics, (and) American Indians."

As the years went by, Margaret Sanger became increasingly obsessed with her occultic beliefs. Along with her acceptance of the occult, she became increasingly hostile to both Christianity and the American precepts of individual freedom under God. Her distaste for America can be seen in her writings when she wrote: "Birth control appeals to the advanced radical because it is calculated to undermine the authority of the Christian churches. I look forward to seeing humanity free someday of the tyranny of Christianity no less than Capitalism." Margaret Sanger

eventually embraced not only communism but theosophy (a covert, occultic religion based upon the repudiation of God and the worship of Lucifer). Theosophy is one of the most powerful hidden (occult) forces working behind the scenes in New York City, Washington D.C., and across our nation today."

### Others

Michael Fox, when he was the vice-president of The Humane Society of the United States wrote, "Mankind is the most dangerous, destructive, selfish and unethical animal on the earth."

In "The First Global Revolution," published by The Council of the Club of Rome, an international elitist organization, the authors note that: "In searching for a new enemy to unite us, we came up with the idea that pollution, the threat of global warming, water shortages, famine, and the like would fit the bill. All these dangers are caused by human intervention...The real enemy, then, is humanity itself."

In the UNESCO Courier of November 1991, Jacques Cousteau wrote: "The damage people cause to the planet is a function of demographics—it is equal to the degree of development. One American burdens the earth much more than twenty Bangladeshes...This is a terrible thing to say. In order to stabilize world population, we must eliminate 350,000 people per day. It is a horrible thing to say, but it's just as bad not to say it."

### DDT

An effective method of reducing the world population was devised in the early 1960s by a group of environmentalists and population-control adherents. They set out to block the use of DDT for mosquito and malaria control after it had been found that the insecticide was extremely effective in saving human lives.

Alexander King, president of the Club of Rome, wrote, "My own doubts came when DDT was introduced. In Guyana, within two years, it had almost eliminated malaria. So my chief quarrel with DDT, in hindsight, is that it has greatly added to the population problem." In 1970 The National Academy of Sciences, in their book "Life Sciences," stated that, "In little more than two decades DDT has prevented 500 million deaths due to malaria."

To population-control advocates, this irresponsible preservation of human life was unconscionable, so they set out to outlaw further use of the pesticide. Up until 1970 all reliable scientific data had consistently demonstrated that DDT was completely safe for both humans and animals. Indeed, DDT was the safest pesticide ever known to mankind. Furthermore, it was inexpensive and could be widely used in third-world countries to control the spread of insect-borne diseases. Accordingly, population-control adherents set out to have DDT banned in the name of saving the environment.

William Ruckelshaus was a long-time member of the Environmental Defense Fund, and the Director of the EPA. He outlawed further use of DDT in 1972 despite the recommendation of the chairman of the EPA investigating committee which had heard six months of testimony on use of the pesticide, and had determined that DDT was completely safe. When Ruckelshaus outlawed further use of DDT, he signed the death warrant for hundreds of millions of helpless human beings living in third-world countries. To those energized by the dark side, however, the loss of hundreds of millions of human lives was relatively inconsequential.

How many people have died in the past 25 years since the use of DDT was outlawed? If

the National Academy of Sciences was correct in their 1970 assessment that 500 million lives had been saved by DDT over a twenty-year period, then we have probably lost well over 600 million human lives during the past twenty-five years since advocates of population control succeeded in outlawing DDT.

### The Relationship Between Abortion, Breast Carcinoma, and Population Control

Let me offer another example of a population control program which is being promoted here in the United States today. Many physicians have expressed their concern about the dramatic increase in breast carcinoma seen in women in recent years.

Despite the fact that 18 scientific studies published in both domestic and foreign medical journals have clearly demonstrated the direct causal relationship between first-trimester abortion and breast cancer, all efforts to disseminate that information here in the United States have been consistently blocked by those who favor abortion and population control. In the fall of 1996 a new scientific paper dealing with a meta-analysis of 23 different scientific studies on the relationship between first-trimester abortions and breast cancer was published in a British medical journal.

That study clearly demonstrated a higher incidence of breast cancer in women who had had first-trimester abortions. In response to that publication, the American Medical Association (AMA), the American Cancer Society (ACS), and pro-abortion/population-control advocates joined together in an unholy alliance to attack the conclusions of the authors, and to block all efforts to disseminate that information to American physicians. All of the organizations mentioned above continue to oppose efforts to have physicians warn women of the risk they face when they submit themselves to first-trimester abortions. Before carrying out all surgical procedures in America "advised consent" is required, except for abortion.

The AMA, the ACS, and the pro-death lobby continue to insist that women must not be advised of the risk they incur when they destroy the life of their unborn child. Why is there such inconsistency? Current abortion policies in America are absolutely necessary to reduce our population. That is why a minor child can be taken from school to an abortion clinic without parental notification, yet that same child cannot be given an aspirin without parental consent. It all has to do with population control.

### The Massacres in Africa

One has only to learn what really happened to the Christians in Rwanda between April and July of 1994 to imagine what may lie in store for Christians here in America at some time in the not-too-distant future.

After the Christian Tutsis had been disarmed by governmental decree in the early 1990s, Hutu-led military forces began to systematically massacre the defenseless Christians. The massacre began in April 1994 and continued until July 1994. Using machetes rather than bullets, the Hutu forces were able to create a state of abject fear and terror within the helpless Christian population as they systematically butchered hundreds of thousands of them. The United Nations immediately convened hearings on the genocide taking place in Rwanda, but Madeline Albright, the American Ambassador to the United Nations, argued strenuously that neighboring African nations should not be

allowed to intervene until the "civil war had come to an end."

In reality, of course, there was no civil war since those being slaughtered had no weapons with which to defend themselves; it was simply a matter of mass murder.

In addition to blocking intervention by neighboring nations, Madeline Albright also insisted that the word "genocide" must not be used, and that the United Nations forces stationed in Rwanda were not to be allowed to intervene. In the three months that followed, between one-half and three-quarters of a million Christians were systematically dismembered, hacked to death, and slaughtered in the bloody carnage that ensued. Tens of thousands of Christians were murdered in their churches; tens of thousands more were murdered in their hospitals and in their schools. On several occasions, United Nations soldiers stationed in Rwanda actually handed over helpless Christians under their protection to members of the Hutu militia. They then stood by as their screaming charges were unceremoniously hacked to pieces.

At the end of the carnage, in late July 1994, the American government rewarded the Hutu murderers with millions of dollars in foreign aid. Strangely, the American press has remained silent about the fact that almost all of those who were slaughtered were Christians, and it was the policies of our government that were primarily responsible for blocking efforts by neighboring African countries to intervene.

There are literally dozens of other examples of population-control programs which have been implemented throughout our world by modern-day "Malthusians" in their effort to ensure that the world population is dramatically curtailed. To date it is estimated that far more than one billion human lives have been terminated as a result of the world-wide abortion programs financed by the United States. In addition, we are beginning to see the devastating effects of the AIDS epidemic as this modern-day plague begins to depopulate large areas of both Asia and Africa.

Because of the influence of occultic population controllers, however, all logical efforts to address the HIV epidemic throughout the world continue to be blocked. Rather than utilizing the proven public health methods used with all other illnesses, advocates of population control continue to promote both hedonistic sex education and condom distribution.

Let me assure you that there really are hundreds of thousands of occultly energized people throughout the world today who honestly believe that human compassion is outmoded, and that the inferior peoples of the world must either be allowed to die or be actively exterminated.

I will conclude this monograph by quoting from the writings of the English Churchman, Thomas Robert Malthus (1766-1834). In his "An Essay on the Principle of Population," Malthus wrote: "All children born, beyond what would be required to keep up the population to a desired level, must necessarily perish, unless room may be made for them by the deaths of grown person...Therefore...we should facilitate, instead of foolishly and vainly endeavoring to impede, the operations of nature in producing this mortality..."

<http://www.radioliberty.com/ThePopulationControlAgenda.pdf> (accessed 20120517) permission to use in any way 20120518





## V. Medical Concerns

Direct surgical abortion, abortion caused by powerful drugs that kill the fetus or cause its delivery before viability, hormonal birth control that prevents im-plantation (i.e. abortifacients), destruction

of embryos as part of artificial reproduction techniques, and embryonic stem cell research all destroy a human life at various stages of development. They are all unacceptable!

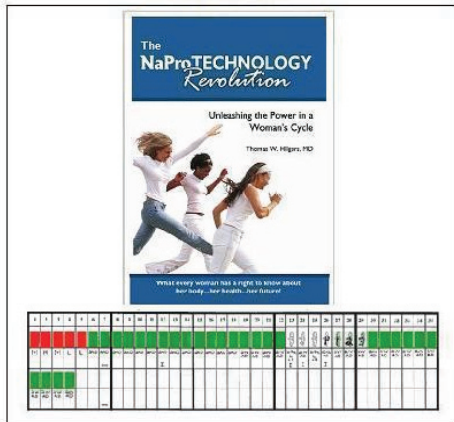
All hormonal birth control is carcinogenic to women, increasing her risk of breast and cervical cancer.

All hormonal birth control increases a woman's risk of blood clots, stroke, heart

attack, and death.

All hormonal birth control impacts mental health and happiness as indicated by increased risk of depression, suicide, unhappiness and reduced libido.

### This IS Health Care



Use effectiveness in pergnancy prevention: 94.6%-97.9%  
No harmful side-effects  
2-3x more effective in achieving pregnancy than IVF  
Treats/prevents PPD and PMS with 95% success rate  
Can tell a woman if she's at-risk for miscarriage before she's ever pregnant  
Halves the occurence of cronic pelvic pain  
Reduces hysterectomy rate by 75%  
Decreases the rate of premature birth by nearly half  
Finds underlying causes for abnormal bleeding  
Treats ovarian cysts  
Success in ancieving pregnancy after repeated miscarriage

### This is NOT



Use effectiveness in pregnancy prevention: 92-99%  
Group 1 Carcinongen  
Increased risk of breast, cervical and liver cancers  
Causes chemical abortions  
Causes blood clots: 1 in 3000 women/year  
Some blood clots result in death  
Increased risk of gallbladder disease  
Cervical Dysplasia  
May cause depression  
Headaches, decreased libido, nausea  
Causes endometrial atrophy and bleeding  
Causes ectopic pregnancies

## The Catechism of the Catholic Church

**2288** Life and physical health are precious gifts entrusted to us by God. We must take reasonable care of them, taking into account the needs of others and the common good. Concern for the health of its citizens requires that society help in the attainment of living-conditions that allow them to grow and reach maturity: food and clothing, housing, health care, basic education, employment, and social assistance.

## Naprotechnology: Scientific, Healthy And Effective

By Mary L. Davenport, MD, FACOG

Naprotechnology—or natural procreative technology—is the application of the FertilityCare method of Natural Family Planning (NFP) to women's health care problems such as infertility, excessive or irregular menses, polycystic ovarian syndrome and a number of other disorders.

Natural Family Planning is a couple's observation of markers of fertility, principally to avoid pregnancy. The FertilityCare method of NFP, developed by Dr. Hilgers at the Pope Paul VI Institute, is very effective, in the range of 97-99%, for preventing conception when a couple abstains from sexual intercourse during the fertile time. But in addition to this traditional use of NFP, research over past decades has been carried out on hormonal therapies that work in conjunction with a woman's natural cycle, as well as effective surgical therapies that improve reproductive function.

Effective, modern natural family planning did not come into existence until the latter part of the twentieth century. The calendar rhythm method was developed in the 1930's and calculated a woman's fertile and infertile periods according to cycle length. However, the rhythm method had high failure rates up to 20% per year because of variations in the cycle. In contrast, modern methods of NFP rely on the observation of biomarkers, including cervical mucus, and in some methods temperature and other cycle characteristics.

The FertilityCare method of NFP relies principally on observations of cervical mucus. It was noted in 1847 by Pouchet that "from the tenth to the fifteenth day...the utero-vaginal mucus...now appears to be more liquid and much more abundant than ever. Often there is

such a quantity of discharge that it moistens the genital organs and overflows the important parts." We now know that this mucus flow coincides with ovulation and can occur earlier or later, but this description is still valid. The increase in mucus correlates with the rise in estrogen, which peaks just before ovulation. If there is good, fertile mucus, sperm can live as long as five days. Observing the mucus and noting its sensation are important markers of fertility. These observations are recorded on a chart, and the woman is taught patterns that mark the fertile and infertile phases of the cycle. The FertilityCare method has developed by standardizing these observations and creating an effective teaching method.

Women using NFP to prevent pregnancy will be spared the health risks of hormonal contraception, which include breast, cervical and liver cancer, as well as blood clots. NFP users will not experience the effects of diminished libido from hormonal suppression of ovulation or hormonally associated depression. They will avoid hormonally provoked disturbances in blood sugar as well as gall bladder disease. They well avoid IUD-related uterine perforations and infections and will not suffer hormonal or psychological consequences of sterilization. In addition to eluding the messiness of barrier methods, couples using NFP will have a highly effective method of fertility control that will improve their communication.

But in recent years, NFP has increasingly been used by couples wanting to achieve pregnancy. The FertilityCare method is especially useful for the 20% of couples in the US experiencing problems with their fertility. As previously mentioned, it includes

the charting of natural biological markers in a woman's reproductive cycle to interpret the natural phases of fertility, as well as the medical and surgical therapies that treat the underlying problem causing the infertility. Pregnancy is achieved in Naprotechnology through normal intercourse. Substantial research at the Pope Paul VI Institute, much of it yet to be published, attests to the good results that can be achieved when the observation of biomarkers through self-monitoring of the reproductive cycle, and fertility focused intercourse (FFI) are used. When FFI is combined with medical and surgical therapies excellent results are obtained that are in many instances superior to those of Artificial Reproductive Technology (ART).

In a study of couples with apparently normal fertility utilizing the Creighton method of charting with FFI, 90% achieved pregnancy after three months and 100% after seven months. Of couples with impaired fertility, 40% achieved pregnancy after twelve months, with no therapy other than FFI combined with vitamin B6 and guaifenesin, a simple medication to enhance cervical secretions. When a thorough diagnostic workup is done, and simple medical therapies such as low dose clomiphene and natural hormonal therapies such as natural progesterone and HCG are offered to enhance ovulation and hormone production in cooperation with the natural cycle, the results are excellent. Medications of the type used in Naprotechnology cost from \$15-\$70 per cycle, in contrast to the medication costs of thousands of dollars per cycle in ART. The risk of multiple births is minimized, because the goal of medical therapy in Naprotechnology is to reproduce the hormonal profile of an ideal natural cycle, rather than to

produce the maximum number of eggs.

At the Pope Paul VI Institute, pregnancy is achieved in 80% of women whose main problem causing infertility is hormonal. Diagnostic and therapeutic surgery is done for common conditions such as endometriosis and polycystic ovarian syndrome that is unresponsive to medications. At the Institute, the overall pregnancy rate for these conditions is 62.5-75% after two years. Other centers have confirmed that very good results with traditional medical and surgical therapy can be achieved. A study of endometriosis patients undergoing laparoscopic surgery at a major center showed a pregnancy rate of 69.1 %. Another recent prospective, randomized study at the University of Illinois showed that clinical pregnancy rates were higher for conventional medical therapy of infertility (as first-line therapy) than for ART (56% vs. 34.8%) It is possible that the results achieved at these other centers might have been even higher if the patients were trained in self-monitoring for fertility.

In addition to infertility treatment, Naprotechnology can be used to aid menstrual problems with of bioidentical estrogen and progesterone in cooperation with the natural cycle, rather than suppressing the cycle with synthetic hormones. Polycystic ovarian syndrome and ovarian cysts can be treated without resorting to treatments using birth control pills.

To consult with a physician trained in Naprotechnology see the FertilityCare web site <http://www.fertilitycare.org>. Further information on Naprotechnology can be found at <http://www.naprotechnology.com/>.





The Pill after 50 Years: That Dirty Little Secret

By Chris Kahlenborn, MD

Last week [May 2011] was the 50th anniversary of the Food and Drug Administration’s approval of the birth control pill in the United States. Newspapers and magazines around the country ran stories on this, mostly extolling the social and medical benefits of the pill. This theme was bolstered by a recent communiqué from the American College of Obstetricians and Gynecologists (ACOG) which noted: “The pill remains one of the safest and most popular forms of contraception in the U.S.” (Office of Communications, ACOG, May 6, 2010)

I find it disturbing that after nearly 50 years, both the media and the medical establishment have failed to give a true airing to one of the pill’s most dangerous side effects; namely, that “dirty little secret.” What’s that? One need only check the Mayo Clinic Proceedings—the major medical publication of the Mayo Clinic—to find our little-known study, which showed that the pill increases the risk of premenopausal breast cancer substantially when taken at a young age (see Mayo Clinic Proceedings: October,

2006: available to the public on line). In October, 2006, we reviewed the medical literature and combined data in an analysis (referred to as a meta-analysis): we found that 21 out of 23 studies showed that using oral contraceptives prior to a woman’s first birth resulted in a 44% increased risk in premenopausal breast cancer. Our meta-analysis remains the most recent study in this area and updates the previously analysis (the Oxford-analysis published in 1996) which relied on older data with older women (two-thirds of whom were over age 45); unfortunately, the Oxford study continues to be quoted by ACOG, textbooks, the National Cancer Institute, the American Cancer Society and most researchers and obstetricians, claiming that oral contraceptives carry little breast cancer risk especially ten years after last use.

I continue to be amazed at the discordance between the medical literature and public/medical awareness. To my dismay, after our meta-analysis was published, the Mayo Clinic sent out a press release to all major media in the country. The response?: ( ).

The blank space between the parentheses is purposeful. Although our meta-analysis received scant internet coverage, almost no major media covered this study, which is shocking, given the fact that about 40,000 women in the U.S. get premenopausal breast cancer annually, oral contraceptives are an elective risk factor and our study is the most recent meta-analysis to date on the oral contraceptive-breast cancer link.

In addition to our meta-analysis, it’s important to note that the World Health Organization classified oral contraceptives as a Class I carcinogen in 2005 (i.e., the most dangerous classification). Even more data has come forth recently in a paper by several researchers—one of whom is a major researcher of the National Cancer Institute—which not only cited our meta-analysis, but found that oral contraceptives increase the risk of triple-negative breast cancer in women under forty by 320 percent (triple-negative breast cancers are extremely aggressive). (Cancer Epidemiology, Biomarkers & Prevention; April, 2009)

Few in the medical establishment or the public are aware of these data, or if they

are, young women almost never hear about them. It’s been almost four [six] years since the publication of our study in the Mayo Clinic Proceedings; I am beginning to think that our study has been effectively “buried.” Breast cancer and the pill—that dirty little secret? Some day perhaps someone in the media and/or medical establishment will dust a little dirt off those pink ribbons and let young women hear all the facts so they can finally make truly informed decisions.

Dr. Kahlenborn is the lead author of the Mayo Clinic Proceeding’s article cited above. He testified before the FDA in June, 2000, regarding the link between oral contraceptives and breast cancer. Dr Kahlenborn is the author of Breast Cancer, Its Link to Abortion and the Birth Control Pill, One More Soul, 2000, and several One More Soul pamphlets. The Polycarp Research Institute, Box 105, Enola, PA 17025, 717-732-4904, Drchrisk@polycarp.org

Healthcare Law and Automatic Enrollment of Minors

By Matt Bowman

POSTED JUN 1, 2012

The bureaucrats behind the Patient Protection and Affordable Care Act (PPACA) are not content with forcing coverage of abortion-inducing drugs against people’s consciences. Now the administration has made its attack on conscience even worse: by forcing abortion-drug coverage onto children against their parents’ objection.

The federal government’s current public comment document declares that it will “accommodate” religious entities by forcing all their employees and their children, minors and college-aged, to get abortion-inducing drugs, contraception, and sex counseling with no cost-sharing. The coverage is “automatic.” (77 Fed. Reg. at 16505.) It applies even if the parent doesn’t want to help her child get free sex counseling or cause her co-ed to

get embryo-killing drugs.

This attack is worse than it was even a couple months ago, when the federal government said that employees



at religious entities and their children would only be enrolled if they “desire it.” (77 Fed. Reg. at 8728). Now, under the abortion-drug mandate, coverage of objectionable items is not optional, even for the employee. All employees and

their “beneficiaries” are “automatically” enrolled. It applies at non-religious entities too: their “beneficiaries” are required to receive abortion-inducing drugs with no cost-sharing. (76 Fed. Reg. at 46624.)

This means that an employee who doesn’t want the objectionable coverage is not only forced to get it, her children are forced to get it. A Christian employee might work at a religious entity in part so her children don’t get free abortion-inducing drugs. But PPACA mandates that she can’t stop her own plan (to which she contributes) from paying for her own children to get mandated free sex counseling, birth control and abortion pills.

Kids will probably be able to go straight to Planned Parenthood for all three of these things that PPACA forces their parents to cover, since the federal government has gone around the country

telling states they can’t stop Planned Parenthood from being a covered provider.

And because of patient confidentiality, parents might never know they helped pay for the promiscuity-counseling of their children, or the death of their own embryonic grandchildren. The pro-abortion Guttmacher Institute lobbied for this no-cost-sharing coverage precisely to result in “nonspouse dependents” (children) “obtaining confidential care” for “key reproductive health care services,” meaning parents won’t know because they won’t get billed for a co-pay.

PPACA’s first casualty was religious freedom. Now its second casualty is parental rights and the well-being of children. And PPACA’s mandates are just getting started.

[http://blog.telladf.org/2012/06/01/\[GS1\]](http://blog.telladf.org/2012/06/01/[GS1])

Known human carcinogens (most recognizable) International Agency for Research on Cancer (abridged list)

Group 1: Carcinogenic to humans

- Acetaldehyde (from consuming alcoholic beverages)
- Acid mists, strong inorganic
- Aflatoxins
- Alcoholic beverages
- Aluminum production
- 4-Aminobiphenyl
- Areca nut
- Aristolochic acid (and plants containing it)
- Arsenic and inorganic arsenic compounds
- Asbestos (all forms) and mineral substances (such as talc or vermiculite) that contain asbestos
- Auramine production.
- Diethylstilbestrol
- Epstein-Barr virus (infection with)
- Erionite
- Estrogen postmenopausal therapy

- Estrogen-progestogen postmenopausal therapy (combined)
- Estrogen-progestogen oral contraceptives (combined) (Note: There is also convincing evidence in humans that these agents confer a protective effect against cancer in the endometrium and ovary)
- Ethanol in alcoholic beverages
- Formaldehyde
- Haematite mining (underground)
- Helicobacter pylori (infection with)
- Hepatitis B virus (chronic infection with)
- Hepatitis C virus (chronic infection with)
- Human immunodeficiency virus type 1 (HIV-1) (infection with)
- Human papilloma virus (HPV) types 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59 (infection with) (Note: The HPV types that have been classified as carcinogenic to humans can differ by an order of magni-

- tude in risk for cervical cancer)
- Human T-cell lymphotropic virus type I (HTLV-1) (infection with)
- Plutonium
- Radium-224 and its decay products
- Radium-226 and its decay products
- Radium-228 and its decay products
- Radon-222 and its decay products
- Rubber manufacturing industry
- Salted fish (Chinese-style)
- Solar radiation
- Soot (as found in workplace exposure of chimney sweeps)
- Sulfur mustard
- Tamoxifen (Note: There is also conclusive evidence that tamoxifen reduces the risk of contralateral breast cancer in breast cancer patients)

- Tobacco, smokeless
  - Tobacco smoke, secondhand
  - Tobacco smoking
  - ortho-Toluidine
  - Treosulfan
  - Ultraviolet (UV) radiation, including UVA, UVB, and UVC rays
  - Ultraviolet-emitting tanning devices
  - Vinyl chloride
  - Wood dust
  - X- and Gamma-radiation
- <http://www.cancer.org/Cancer/Cancer-Causes/OtherCarcinogens/GeneralInformationaboutCarcinogens/known-and-probable-human-carcinogens> (accessed 20120224)
- Emphasis has been added for more commonly recognized carcinogens.





# Does Sterilization in Women Cause Decreased Desire?

By Father Matthew Habiger, OSB, PhD

Even more important than preaching about the damage of contraception is teaching about the immorality of sterilization. Too many folks have sterilizations with way too little thought—even folks who know that the church is against birth control pills seem to think that sterilization is OK—or at most a venial sin, easily confessed and forgiven—not the actual mutilation of both body and soul that it turns out to be.—Fr. Habiger

**I see a lot of middle aged women who bemoan that they have no desire for their husbands (or anyone, actually) any more**—well over 95% of them had a tubal ligation. I can't prove a connection, but I also see lots of post menopausal women that have very satisfying love lives with their husbands—and I can't help but wonder if there is a connection between the tubal ligation and the decreased desire.—Alicia Huntley

You're right Alicia—check out April 2007 Journal of Reproductive Medicine, Warehime, Bass, Pedulla, "Tubal Ligation among American Women". We proved

the correctness of what you're surmising. Previous studies let women color their answers (on sexual functioning after tubal sterilization (TS) by their subjective sense of whether TS helped their sexuality or not. American women are conditioned to look at their TS in such glowingly, unrealistically, optimistic terms that this rosy over-optimism about it overpowers any negatives they might otherwise have had, and the insight to attribute that to the TS. That TS "improves sexual function" seems an automatic, unreflective conclusion flowing from the fiat acceptance of benefit of any and all things that "unencumber" sexuality by detaching it from conception.

And of course the like-minded authors/investigators never critically analyze this false equation, having deeply imbibed "the kool-aid" themselves. A good example was Costello in the NEJM I think, from 1998 or so. They simplistically and rather clumsily asked women whether their TS was a net positive or negative influence on their sexual function, without any independent objective data analysis checking that out.

We took the NHSLS dataset (Laumann, U of Chicago) which had TS and measures of sexual satisfaction/function as independent variables so the women merely reported the incidence rather than conceptually or attributionally connecting the two.

Women after TS were 150 to 200 percent more likely to report "stress interfering with sex" or "go to a doctor for help with sexual function," and this was independent of any pain, physical complaints, or post-TS medical complications.

Powerful stuff! No doubt the majority would have judged their TS helpful to sexuality, even despite these contrary data, because these falsely rosy views are based on strongly pro-TS prejudice, one powerfully reinforced in our "sterilization society."

So you are indeed right.—Dominic Pedullah, MD

Editor's Comment: [The reduced libido phenomenon was common (maybe even universal) to the 20 Catholic couples

that shared their stories in Sterilization Reversal: A Generous Act of Love, Edited by John L. Long, and published by One More Soul (currently being prepared for reprinting). Sterilization destroyed intimacy; reversal restored it. Truly amazing!

Sterilization (and all forms of contraception) destroy the integrity of sexual intercourse so that it can no longer be all that God intended it to be.

Perhaps some couples see sterilization as the pro-life thing to do in that there is no longer a risk of abortion from hormonal or IUD birth prevention methods. They need a deeper understanding of God's gift of fertility and the sacredness of the body.

For more NFP Q&As, go to: [www.nfpoutreach.org](http://www.nfpoutreach.org). Click on "NPF Q&A."

For a Parish NFP Mission, or a multi-day convocation for priests and deacons, by Frs. Habiger and Daniel McCaffrey, call 405 942 4084.

## Time to Take Off The Blinders

By Dr. John Littell, MD, BOMA Instructor

I am a family physician, who has provided care to women and their families, to include obstetrics and gynecology, for more than 20 years. Throughout my career, and after 23 years of marriage and four daughters, I have acquired the utmost respect for women, and have worked to protect the right of each woman, including my many patients as well as my wife and daughters, to make informed decisions about her body.

In light of the recent Health and Human Services mandate requiring employers to provide contraceptive coverage and the Susan G. Komen Foundations decision to continue to fund Planned Parenthood, many in the media especially have been expressing their outrage at any person (Rick Santorum) or institution (the Catholic Church) that would dare object to universal access to contraceptive coverage.

Though Catholic, I did not always observe the teachings of the Catholic Church in my practice, particularly as related to women's health care. As a biology teacher, I introduced a curriculum on contraception in a Catholic High School in New York in 1982. I taught other physicians how to prescribe the "ideal" oral contraceptive for each woman. Although my wife and I have successfully used and taught others natural methods of family planning (NFP), I was not ready to withhold oral contraceptives from my patients.

However, as I began to introduce the option of NFP to women, I heard more and more women expressing their dissatisfaction with the side effects of artificial methods and their desire for a natural option for birth control.

At a women's health conference in 2003, I asked the OB/Gyn from Columbia University why he did not address the fact that use of oral contraceptives increases the risk of cervical cancer, and he answered, "Let's keep that to ourselves" which he then qualified by briefly reviewing the many "health benefits" of oral contraceptives—first of which, was of course, pregnancy prevention.

Therein lies the dirty little secret that has pervaded the field of women's health care for more than 50 years—that we physicians who provide care for women, working under the guidance of The American Congress of Obstetricians and Gynecologists and the Centers for Disease Control, must do all we can to ensure that women of reproductive age embrace contraception regardless of the potentially dangerous side effects.

We present to women these options: Either get on the pill (or the shot, the patch, the IUD) or face the "disease" known as pregnancy and children. We tell women only of the many supposed "health benefits" of the pill while ignoring and/or covering up the many known increased risks of cancer (cervical and breast

and vascular disease (blood clots, stroke and heart disease) associated with long-term use of artificial contraceptives (not to mention the abortifacient action of several of these methods).

The Catholic Church has seemingly stood alone in its undaunted defense of the dignity of the individual person. While the government, the CDC and even ACOG have chosen to take paternalistic, utilitarian approaches to the care of women and their bodies, the church has actually defended the right of women to make their own informed decisions about their reproductive health.

While Planned Parenthood (funded in part by the government and also by Susan B. Koman Foundation) continues on a daily basis to hide the facts about contraceptives from their customers, the church has tried to encourage women of all ages to try to live a life that is in keeping with the Natural Law, by teaching a "theology of the body" and not a theology that places the immediate sexual gratification of men ahead of the woman's wellbeing. The Catholic Church asks women the question: are you truly willing to put your body at risk just so your male partner can find sexual pleasure? And the church asks married couples to consider a method of family planning that increases communication about sex and develops sexual self-control in both

partners.

In 1968 in the face of growing acceptance of artificial contraception, one courageous, prescient man wrote the following: "it is also to be feared that the man, growing used to the employment of anti-conceptive practices, may finally lose respect for the woman and, no longer caring for her physical and psychological equilibrium, may come to the point of considering her as a mere instrument of selfish enjoyment, and no longer as his respected and beloved companion." These are the words of Pope Paul VI.

I daresay we in our great nation have come to see this loss of respect for women become a reality. I certainly see it each day in my practice of family medicine and women's health care, not to mention the media. And I truly pray that our society will not fall prey to those who continue to embrace a culture of death for the sake of "the greater good."

If is time for all of us who truly care for women to take off our blinders and speak the truth to all who will listen. It is time, we can all agree, to begin to respect all women, allow all women to learn all the facts about all methods of birth control, so as to make truly informed decisions about their own bodies, and thereby ensure the protection of reproductive freedom—as freedom, which the government try as it might, cannot take away.

## The History of the Pill

Source: <http://thepillkills.com/history.php>  
and [http://thepillkills.com/history\\_2.php](http://thepillkills.com/history_2.php)

**1873:**

U.S. Congress passes the Comstock Law, which prohibits the distribution of obscene materials through the U.S. mail or across state lines. Contraceptives are specifically identified as obscene.

**1912:**

Radical feminist Margaret Sanger conceives of a "magic pill" contraceptive. Sanger later founded the American Birth Control League, which eventually became the Planned Parenthood Federation.

**1930:**

On August 15, the Lambeth Conference of the Anglican Church approves the use of contraceptives. This was a radical departure of the constant Christian tradition of considering contraception immoral. After 1930, other Protestant denominations begin to allow contraception. On December 31, Pope Pius XI issues the encyclical *Castii Connubii* (Of Chaste Marriage), which among other things, reaffirms the Catholic Church's constant teaching against contraception and abortion.

**1951:**

Sanger obtains a Planned Parenthood grant for Dr. Gregory Pincus, a biologist, to research hormonal contraceptives, but the funding soon runs out. Earlier, Dr. Pincus had shocked the public by his in vitro fertilization of rabbits.

**1953:**

Sanger convinces Katharine McCormick, a radical feminist and wealthy philanthropist, to fund the pill research project and Pincus continues his research.

**1954:**

Pincus and Dr. John Rock, a Catholic OB-GYN who violates Church teachings by advocating contraception, begins human trials of the pill. To bypass Massachusetts's anti-birth control laws, they claim the study is about infertility. Fifty female infertility patients volunteer to participate in the study, but the pill is also given to 12 female and 16 male psychiatric patients without their direct consent.





Common Sense Health Care

By Dr. Rebecca Peck, MD

Dear Friends,

I just wanted you to see this thread of a discussion on some points related to the HHS mandate.

Although the religious liberty issue is universally compelling, another crucial point is that birth control is NOT preventative care (see below). The current administration wants this to be about the Catholic Bishops denying women their "women's health". This is why I feel our recent research article is so timely and important right now (1). The pill is not a warm little fuzzy harmless object. It causes significant harm and the American people have been deceived for long enough. As a practicing physician, I see the fallout every day—young women with blood clots in their legs, strokes, early breast cancer, HPV, and cervical cancer. This is NOT about women's health; it is about preventing and killing babies. The present administration will try to pit US Bishops against women and try to portray the bishops as a bunch of old men that don't want women to have their "women's health" options, but this has no credibility.

Every day, I, my husband Benjamin, and other doctors like us do TRUE preventative care. We do pap smears looking for cervical cancer, perform breast exams looking for breast cancer, refer for mam-mograms, order colonoscopies looking for colon cancer, and give immunizations to prevent pneumonia and influenza. These time-tested measures are very different from prescribing a pill to prevent a CHILD. A child is not a disease. Pregnancy and fertility are not disease states; they are normal physiological processes of the human body.

The point also needs to be hammered home that we are not just talking about insurance mandated contraception—we are talking sterilizations, “morning-after” pills, and abortions. Christians and Cath-olics can come together on the abortion issue. Accordingly, the way the pill causes abortions needs to be explained in a coherent manner (2). Manufacturers of the current birth control pill formulations have reduced estrogen content in an attempt to reduce some of the risks cited above. But, reducing the estrogen increases the likelihood of ovulation. The pill's "backup" mechanism then comes into play by preventing implantation of the several day old embryo into the uterine wall. Since life begins at conception, the layperson can understand that this necessarily means that the new life is aborted. Finally, regarding the recent decision of Komen to reinstate support for PP, the hypocrisy of this must be exposed. Birth control and abortion—PP's 2 major lines of business—INCREASE the risk of breast cancer (3).

All people of integrity want women to have options regarding their family planning, but why are the only discussed options those that are contrary to the Catholic Church's teaching? Fertility awareness and modern methods of Natural Family Planning—over a dozen distinct methods—cause NO harms at all! All have wonderful benefits for women that empower them, strengthen their families, and work with their bodies in the natural way God created them.

Blessings,

Dr. Rebecca Peck, MD, is a family physician who teaches NFP (symptothermal and Marquette methods) and fertility awareness to women through her practice and parish (Prince of Peace, Ormond Beach, FL). Her husband Ben is also a family physician, and they practice together at Pecks’ Family Practice. “He is an amazing man, and we both love the teachings of our Catholic faith and are very active in our local Catholic Medical Association guild and parish. We have 6 children (ages 9, 7, 6, 5, 3, and 9 months). God has been very good to us.”

Rebecca Peck, MD

PS. It should also be pointed out that HAVING children and BREASTFEEDING—a woman using her body as it is designed—actually protect a woman's health. Pregnancy is not a dis-ease; pregnancy PREVENTS disease.

(1) Peck, R; Norris, C. "Why OCPs Should Not Be Part of a Preventative Care Mandate: Significant Risks and Harms of OCPs", Linacre Quarterly, Feb 2012.  
(2) Stanford, J; Larrimore, W. "Postfertilization effects of OCPs" www.polycarp.org  
(3) Kahlenborn, C. http://www.polycarp.org/overviewbreastcanceroralcontraceptives.htm and http://www.polycarp.org/overviewabortionbreastcancer.htm

Female Sterilization

by Liliana Cote de Bejarano, MD, MPH

What is female sterilization?

Female sterilization means making a woman permanently infertile, usually by cutting, tying, or blocking her fallopian tubes.

What are the fallopian tubes?

The fallopian tubes are two organs situated sideways in the lower abdomen attached to the uterus. They conduct the ovum from the ovaries toward the uterus and also nurture the ovum and the sperm. If fertilization occurs, the fallopian tubes nurture and transport the human embryo to the uterus.

What is tubal ligation?

Tubal ligation involves closing off the fallopian tubes by cutting, burning, tying, or fastening a clip (or a combination of these methods) to cause permanent sterility (infertility). It is a surgical procedure carried out under anesthesia.

Two common surgical procedures for getting one’s “tubes tied” are:

**Laparoscopy:** Usually small incisions are made in the lower abdomen. Carbon dioxide gas is pumped in to inflate the abdomen, and a fiber-optic light is inserted. Then, surgical instruments are inserted to cut, tie, or burn the fallopian tubes.

**Mini-laparotomy:** This procedure requires a small incision in the lower abdomen. The fallopian tubes are closed by clips, burned, or cut and tied.

What is non-surgical sterilization?

There are new non-surgical methods of permanent female sterilization. In a procedure called hysteroscopy, micro-inserts are passed through the vagina, cervix, and uterus, and placed in the fallopian tubes. The micro-inserts cause a tissue barrier to form that prevents sperm from reaching the egg.

Does female sterilization have health risks?

Risks from anesthesia and surgery

Infection, Bleeding, Respiratory problems, Adverse effects from anesthetics, Damage to abdominal organs, Bowel perforation, Death

Risks from tubal ligation itself

Change of ovarian function, Ovarian Cysts, Ectopic pregnancy, and Remorse.

Long-term psychological effects such as depression and anxiety have been reported by women after tubal ligation. Stress interfering with sex has been reported in women after tubal ligation. The probability of undergoing hysterectomy within 14 years after sterilization is 17% per 100 procedures.

Is sterilization 100% effective?

NO. Failure rates can range from 1% for laparoscopic sterilization up to 13% for hysteroscopic sterilization. When pregnancy occurs after a female sterilization procedure the risk for ectopic pregnancy is 7.3 per 1000 procedures and can be higher for the newest procedures. **Sterilization does not protect against sexually transmitted diseases including AIDS.**

What if I change my mind?

Many sterilized women later desire to have their fertility restored. Some have entered new relationships and want a child with their new partner; some want a return to physical wholeness; some believe that they have done something immoral and are seeking spiritual restoration. There are, however, significant obstacles to sterilization reversal; for example, the surgery is more extensive and expensive than the original procedure, and it is typically not covered by insurance. Also, a return of fertility is not guaranteed; the success rate varies depending on a woman’s age, the type of sterilization performed, and the skill of the surgeon.

Is sterilization morally acceptable?

Before 1930, no Christian church accepted sterilization or any form of contraception. The Catholic Church and some Protestant churches still teach that intentional sterilization is an immoral form of birth control.

What are my options?

If you are married, the modern methods of Natural Family Planning (NFP) are the safest, healthiest, and least expensive alternatives for family planning. If you are single, abstinence is the best option and always works!

The content of this article is available at: <http://onemoresoul.com/pdfs/PFSW.pdf>

The History of the Pill, cont.

1955:

The pill is proven to prevent ovulation in all 50 women. Pincus presents the findings at the Fifth Annual International Planned Parenthood League conference in Tokyo, Japan and Rock does the same at the Laurentian Conference on Endocrinology in Canada. The news that a birth control pill has been developed then spreads rapidly among scientists.

1956:

Large-scale trials of the pill begin, to gain approval by the U.S. Food and Drug Administration (FDA). Pincus chooses Puerto Rico as the location because it provides a pool of poor, uneducated women who can be easily monitored. The local doctor in charge of the study tells Pincus that the pill causes “too many side reactions to be generally acceptable.” However, Pincus and Rock dismiss her findings and do not investigate what causes the side effects, nor do they investigate the cause of death for three women who die during the trials.

1957:

The FDA approves usage of the pill to treat severe menstrual disorders and requires that its packaging include a warning that it will prevent ovulation.

1960:

The pharmaceutical company G.D. Searle obtains FDA approval to sell the pill as a contraceptive, despite the FDA’s initial misgivings about its long-term safety. It becomes the first FDA-approved drug to be given to healthy patients for long-term use and for social purposes.

1961:

Dr. C. Lee Buxton, Yale Medical School’s OB-GYN department chairman, and Estelle Griswold, executive director of Planned Parenthood, open four Planned Parenthood clinics in Connecticut, where use of birth control is illegal. They are arrested and the *Griswold v. Connecticut* case begins to work its way through the court system.

1962:

Serious side effects from the pill, such as blood clots and heart attacks, begin to be publicized. Searle receives reports of 132 blood clots, 11 of which were terminal, but denies that they are caused by the pill.



# Vasectomy—Safe and Simple?

By Liliana Cote De Bejarano, MD, MPH

About 1.5 million couples in the United States opt for sterilization every year.<sup>1</sup> According to the Guttmacher Institute, 9.9% of couples in the US use vasectomy as a contraceptive method, and more than 500,000 vasectomies are performed in the United States every year.<sup>2</sup> The medical community and most family planning advocates consider vasectomy safe and simple. This pamphlet provides current research on vasectomy that indicates the procedure has a number of short- and long-term complications and is not a healthy choice.

### What Is Required For Fertilization

Fertilization of a woman’s egg (ovum) requires sperm from a man. Sperm is produced in the male testicles. Around 4.25 million sperm are produced per gram of testicular tissue per day, and the average testicles weigh 16.9 grams. Sperm matures, becomes motile, and is stored in a structure called the epididymus, located in the side of the testicles. From the epididymis, sperm is transported by the vas deferens to the seminal vesicles and the prostate gland. Secretions from these glands contribute 90% of the ejaculate. The total ejaculate is then transported to the urethra/penis.

### What Is Male Sterilization?

Male sterilization is any procedure or treatment that intends to make it impossible for a man to fertilize a woman’s egg (ovum). Men can be sterilized by removal of the testicles, by treatment with chemicals that shut down the activity of the testicles, or by a vasectomy. Vasectomy is a surgical procedure to block sperm transport from the testicles to the male urethra/penis. Vasectomy usually involves the removal of a small piece of each vas deferens.

### How Is Vasectomy Performed?

To perform a vasectomy requires three steps. First, the vas deferens is found by a single or double incision in the scrotum (skin that surrounds the testicles) with a scalpel, or without scalpel using special instruments. Second, the vas deferens on each side is disrupted by cutting, burning, or clipping, with the edges sewn or not. Finally, the scrotal tissue is closed.<sup>3</sup>

### Is Vasectomy 100% Effective In Preventing Pregnancies?

Recent research indicates that one or two women per 1,000 per year become pregnant when using vasectomy as a means of birth control.<sup>4</sup> Pregnancy may result from natural healing, or failure in the surgical procedure.

### Are There Short-Term Complications?

Vasectomy causes damage to a healthy part of the body. As a consequence, males can suffer anatomical, hormonal, immunological, psychological, and social changes that are undesirable. Early complications include local hematoma, bleeding, swelling of the scrotum (range 2-29% of cases), and infection of the skin, urinary tract, testicles, or epididymus (range 12-38% of cases).<sup>5</sup> Inflammation of the testicles and epididymus may require antibiotics to resolve. Another early possible complication is the formation of sperm granulomas. A globe of tissue is produced around leaking sperm to relieve pressure buildup. Sperm granulomas are a compensatory response to spare the testicles from damage. After vasectomy, sperm production continues at the same rate as before the procedure. Initially, there is no feedback mechanism to inform the testicles to stop sperm production, and the thousands of sperm being produced every minute can leak at the testicular end of the vas deferens.

### Are There Long-Term Complications?

Because vasectomy blocks the natural way to evacuate sperm, a buildup in pressure breaks down the natural barrier that exists between the testicles and blood, enabling sperm to enter the blood. This is important because sperm contain antigens (substances that can trigger the body’s immune system). *About sixty percent of males who elect to have vasectomies develop anti-sperm antibodies.*<sup>6</sup> These can cause a number of local and full body reactions. Although no final conclusion has been reached about the cause-and-effect relationship between vasectomy and long-term disease, principally due to lack of long-term medical studies, many diseases have been reported in males post-vasectomy. In the book, *Is Vasectomy Worth the Risks?* the author states that in his medical practice he has encountered many young males who had undergone a vasectomy, and have diseases with unexplained causes. The following diseases have been reported in men after vasectomy: atherosclerosis, psychogenic impotence, rheumatoid arthritis, multiple sclerosis, migraine, hypoglycemia, narcolepsy, thrombophlebitis, pulmonary embolism, infection, allergic reactions, kidney stones, and angina pectoris.<sup>7</sup>

### What Is Post-Vasectomy Pain Syndrome (PVPS)?

PVPS is another complication after vasectomy. It can occur up to ten years after the procedure.<sup>8</sup> *Some males suffering from PVPS report a sharp testicular pain during certain activities such as sitting, sexual intercourse, or during exercise.* Others report dull, constant pain or pain radiating to the scrotal area or the back. Unfortunately, many cases of PVPS are misdiagnosed due to lack of association of their symptoms with vasectomy. The incidence rates for this condition vary from 5 to 50%.<sup>9</sup> Although the cause for the pain is still the object of research, it is believed that distention of the tissues due to pressure, inflammation, sperm granulomas, fibrosis and nerve entrapment may explain the pain. Removal of granulomas, vasectomy reversal<sup>10</sup>, and removal of nerves, and in extremes cases, removal of the testicles, are treatment options for PVPS.

### Is Vasectomy Associated With Cancer?

According to the American Cancer Society, prostate cancer is the most common cancer for males in America. In the year 2011, 238,467 new cases of prostate cancer were identified and more than 33,000 men died from prostate cancer or its complications.<sup>11</sup> Although mortality rates from men are living with this disease.

Risk factors for prostate cancer include non-modifiable risk factors such as family history of prostate cancer and ethnicity (African-American males have a high incidence of prostate cancer), and modifiable risk factors such as diet, alcohol consumption, and smoking. Even though medical and government organizations do not regard vasectomy as a risk factor for prostate cancer,<sup>12</sup> several studies have noted that men who undergo a vasectomy have a higher incidence of developing prostate cancer, especially 15-20 years after their vasectomy.<sup>13,14,15</sup> A large study looking for a link between prostate cancer and vasectomy was done in the 1990’s. The author of this study found a significant increase in the risk of cancer in males who had undergone vasectomy at a young age (less than 35 years).<sup>16</sup> After the publication of these studies, the National Cancer Institute and other organizations sponsored a conference in 1993 to debate the association between prostate cancer and vasectomy. Experts concluded that the risk was very small and just due to chance. However statistical analysis of recent studies claiming no link indicates a significant link between vasectomy and prostate cancer.<sup>17,18</sup> Also, research has demonstrated that hormonal alterations due to vasectomy (such as high testosterone levels) could coincide with increases in prostate cancer.<sup>19,20</sup>

### Is Vasectomy Associated With Psychiatric Problems?

Researchers from Northwestern University in Illinois published a study that looked into one patient’s belief that his dementia resulted from his vasectomy.<sup>21</sup> His was not a common dementia; it was a relatively new kind of dementia called Primary Progressive Aphasia (PPA). Its onset is characterized by language impairment (aphasia) rather than the forgetfulness characteristic of Alzheimer’s Disease. Another reason for the study was the interesting fact that *the testicles and the brain have similar molecular substances.* Vasectomy may have a role in the development of PPA based on the immune reactions to sperm after vasectomy and on the similarity of brain and sperm proteins. New antibodies produced after vasectomy may attack brain cells and cause PPA. *The authors found that 40% of the men in their study who suffered from PPA also had undergone vasectomies.* The study involved a control group of males who did not have PPA, and 16% of that group had vasectomies. The study revealed that PPA subjects had their vasectomy at a younger age—36 years old on average. In contrast, the control group had their vasectomies performed at an average age of 44 years. *It appears that longer exposure to this sort of immune attack increases the probability of developing PPA.* A recent case report analyzed whether or not the use of steroids (drugs that inhibit the immune system) could modify the symptoms of PPA. The authors of this study found improvement in one patient suffering from PPA after the steroid treatment. Although more research with large populations is needed, the improvement in this particular case supports the hypothesis that PPA in men may be a treatable autoimmune disease related to vasectomy.<sup>22</sup>

### Are There Emotional Disorders Related To Vasectomy?

Emotional disorders such as anxiety, depression and changes in personality have been reported after vasectomy.<sup>23</sup> Although more research is needed to determine the cause and effect relationship between vasectomy and personality changes, men who had undergone vasectomy have reported regret, resentment, and feelings that their masculine image has been threatened.

### Are There Social Consequences Associated With Vasectomy?

More research is needed to determine the social consequences from sterilization. It has been suggested that vasectomy can open the door to infidelity and marital instability. Looking to the divorce rate in the USA and other developed countries where vasectomy is a widely used method of birth control, we come to the hypothesis that vasectomy may have contributed to the increase in divorce rates. Many authors tried to warn about the powerful negative social consequences that would result from the widespread use and acceptance of artificial methods of birth control and voluntary sterilization—such as the potential for abuse by governments which might institute programs of forced abortion and sterilization for population control.<sup>24</sup> We can now verify the accuracy of those predictions and see that the voluntary use of artificial methods of birth control and sterilization did indeed open the door to forced abortions and forced sterilizations for population control.

### Are There Alternatives To Vasectomy?

Natural Family Planning (NFP) is a safe, healthy, and effective alternative to sterilization. NFP is morally acceptable. Studies have demonstrated that couples who use NFP are more satisfied with their marriage, and these couples have lower divorce rates compared to couples who use contraception or sterilization.<sup>25</sup> For males who have undergone vasectomy, the reversal procedure is an alternative to alleviate *some* secondary effects and to restore fertility. The reversal procedure is not 100% effective in restoring fertility. Microsurgery is highly recommended. Our web site, [www.OneMoreSoul.com](http://www.OneMoreSoul.com) includes a list of NFP-only physicians (some offer sterilization reversal in the United States), NFP teachers, and NFP Centers.

The content of this article is available at:

<http://onemoresoul.com/news-commentary/vasectomy- safe-and-simple.html>

# The History of the Pill, cont.

1965:

The U.S. Supreme Court decides *Griswold v. Connecticut* by overturning the law prohibiting the use of birth control, thereby decriminalizing poison in the form of a pill.

1967:

The Pittsburg chapter of the NAACP accuses Planned Parenthood of promoting birth control in minority neighborhoods in order to drastically reduce the black birth rate. The term “black genocide” thus comes into use.

1968:

Pope Paul VI issues the encyclical *Humanae Vitae* (Of Human Life), which reiterates the Catholic Church’s consistent prohibition of contraception, sterilization and abortion.

1969:

The publication of *The Doctor’s Case against the Pill*, by feminist journalist Barbara Seaman, focuses nationwide attention on the pill’s dangerous side effects.

1970:

The negative publicity from Seaman’s book results in Senate hearings on the pill’s safety and the FDA requiring that prescriptions include package inserts listing the pill’s side effects. After the hearings, pills with lower doses of hormones were made available.

1972:

Through its *Eisenstadt v. Baird* decision, the U.S. Supreme Court allows single people to have access to birth control products.

1988:

The FDA convinces drug companies to remove the original high-dose pill from the market.

Today:

The birth control pill and other birth control products have a lower dose of estrogen, which increases the chance of breakthrough ovulation and thus increases the likelihood of chemical abortions occurring. Even with the lower dose, the pill still has other dangerous side effects such as blood clots, breast cancer, stroke, cervical cancer, infertility, weight gain and much more. For more information on the pill’s side effects, go to <http://thepillkills.com/sideeffects.php>

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## VI. Sociological Concerns

Our culture has provided ready access to a great variety of birth control options for two generations. These take a variety of forms: a) hormonal alteration of the female body delivered by pill, patch, shot, implant and IUD; b) barriers in the form of condom, diaphragm, and cervical cap intended to prevent mating of sperm and ovum; c) spermicides; d) abortion; e) sterilization of male or female; and f) periodic abstinence based on fertility awareness—Natural Family Planning. These are typically already available

for free or very low cost for those unable to purchase them. Is our society better because of this ready availability of birth control? By virtually any reasonable measure, the answer is a resounding NO! The already high (25%) divorce rate in 1960 doubled in the ten years following introduction of the birth control pill and continues to hover near 50%. Studies indicate that birth control-using-couples have sex less often, and enjoy sex less, than couples who don't use birth control. Sex outside of marriage and sex with a non-spouse

(adultery) are more common, facilitated by the expectation that birth control will eliminate the risk of pregnancy. Unplanned and unwanted pregnancies are common, leading to over a million surgical abortions/year, and a 40% out-of-wedlock birth rate. The negative impact on society due to birth control is further evident in the loss of over 50 million innocent human lives since abortion was universally legalized in 1973, the high incidence of depression and suicide in aborted women, and the pre-term births and low birth

weights of their future children. Children born into unstable (not committed to lifetime marriage) relationships suffer higher rates of poverty, abuse, incarceration, generally anti-social behaviors, poor education, and repetition of their parent's anti-social behaviors. The emotional, healthcare and productivity costs to society of these birth-control-induced behaviors are enormous, but largely ignored in favor of an ideology that promotes a false concept of freedom over responsibility.

# What Contraception Does to the Individual, to Marriage, to Family, and to Society

By Fr. Matthew Habiger, OSB, PhD

### 1) We start with the impact of contraception upon the individual.

Contraception destroys the natural connection between love and life, between sex and babies. Sterilized sex is unnatural sex; it is technological sex. Sex is meant to be expressed by a man and a woman who are deeply in love and committed to each other. The marital act has profound meaning. It means that the man and woman engaged in this act intend to make the total personal gift of self to the other. They are totally open to the goodness of the other person. This includes their life-giving powers, their fertility. That is what the language of the body means and accomplishes during the marital act.

Contraception reduces all this to the level of recreational sex. There are only two restrictions: 1) don't get pregnant; and 2) don't catch a sexually transmitted disease. Fidelity and the possibility of a new pregnancy are all part of marital commitment. If there is no possibility of a pregnancy, then people begin to think that there is no reason to commit themselves to just one mate. That leads to extra marital sex, and pre marital sex. The technical terms for these are adultery and fornication. Contraception changes loving a person into using a person: it degrades love into lust.

If sex only means the pursuit of intense genital pleasure, then why tell young people to save sex for marriage? Today we find young people experimenting with sex at ever earlier stages. Instead of encouraging young people to grow into the virtue of self-mastery and the virtue of chastity, Planned Parenthood encourages them to yield to their inclinations and become promiscuous. They call this comprehensive sex education, where every form of sex and contraception, except chastity, is explained. The accurate description of Planned Parenthood is the "corruption of our youth." A promiscuous person is not preparing himself, or herself, for marriage and a lifetime commitment to one's spouse. Rather they are preparing themselves for many partners, and divorce.

There is a direct connection between contraception and abortion. Abortion is the remedy to failed contraception. The culture of death says: "If you want fewer abortions, then use more contraception." But that is very deceptive language. Contraception always leads to more abortion, not less abortion. When International Planned Parenthood wants to change the laws of a country so as to bring in legalized abortion, it always begins by promoting every form of contraception. They know that more contraception leads to more promiscuous sex, and this, in turn, leads to an inevitable greater demand for abortion. I have seen this again and again the Third World, where most people live.

What let to the infamous 1973 Supreme Court ruling, Roe V. Wade, which withdrew the protection of the law from the unborn child? It was the appearance of the Pill in the 1960s, which led to greater sexual promiscuity, the rejection of the child, and a demand for abortion as a backup for failed contraception.

In addition, you should know that the Pill has three effects. The first is an attempt to prevent ovulation. But there is always breakthrough ovulation, and then the risk of conception. The second effect is to prevent the migration of sperm from the vagina to the fallopian tubes. This does not always succeed. The third effect is to deal with the reality of an unwanted conception. The Pill reduces the lining of the uterus, the endometrium, and thus makes it impossible for the little conceptus to attach itself to the mother's uterus. This leads to an early

on, chemical abortion. One out of four unborn babies is killed by surgical abortion in this country. But there are many more unrecorded early-on chemical abortions. Women are aborting their children and do not even know it.

Human life begins at conception. Then the 23 chromosomes of the mother combine with the 23 chromosomes of the father, and a completely unique and unrepeatable human person is called into existence. All the genetic information is now present, to guide the new life through all of its various stages of life. The entire DNA is there for the entire life of the new person. Notice that at every stage of life, a person's physical body is perfectly integrated. You should know that the medical profession has now changed the definition of conception, to facilitate easy access to chemical abortion. The medical dictionaries now define conception as the time when the tiny zygote implants itself in the mother's endometrium, at implantation. That is entirely dishonest. The child is now already several days alive, since the moment when the father's sperm met the mother's ovum.

Contraception has not improved the life of individual persons; it has greatly harmed it. It diminishes the ability of one person to become deeply committed to another in marriage. It is the abuse of sex, and leads to promiscuity. When the inevitable unplanned pregnancy comes, then abortion follows. All this is devastating to the wellbeing of the individual.

### 2) Then we move to the impact of contraception upon marriage.

There is a direct connection between contraception and divorce. In our society today one out of two marriages ends in a divorce. Our society thinks in terms of a fault free divorce, where no one is at fault, and where either party can initiate the divorce, regardless of how much the other party wants to save the marriage. 39% of all babies born today in the United States are born to single moms. In the Black community the rate is up to 75%. The greatest source of poverty today is single parent families, usually unmarried moms. Think of what this does to single mothers and their children.

Because of the high divorce rate, many young couples today don't believe in marriage. They live together, and some have babies, without making commitments to each other. They can split anytime. Because there is a certain fear of the child, many couples do not want to have children. The total percentage of people who are married in this country continues to decline.

What is the connection between contraception and divorce? Why is it that divorce rates began to skyrocket when the Pill arrived in the 1960s? The main reason is that contraception interferes with the bonding of the couple, with their commitment to each other. The marital act is designed to renew the marriage covenant that the couple made at their marriage. Contraception interferes with the total self-donation that the marital act requires. It rejects the goodness of their fertility, and their openness to new life. Now their love is always conditioned, with reservations. Now the emphasis is upon the pursuit of pleasure and the hope that this will enhance their intimacy. Now there is a demand that the woman always be available for the man when he wants her. The woman begins to feel more used than loved. There is no shared responsibility in spacing the pregnancies. The woman is told to take the required medications. It is "her" problem. Or the husband sterilizes himself. One out of every six men in the United States over the age of 35 has had

a vasectomy. Contraception is like a corrosive acid working on the bond between the couple.

By contrast, did you know that the divorce rate among couples who use Natural Family Planning, NFP, which requires periodic abstinence during the couple's fertile periods, is less than 5%? NFP couples know God's plan for marriage and spousal love. Their respect for this plan brings them greater intimacy, better communications, a more satisfying sexual life and much happiness. Just look at their low divorce rate.

Everyone wants to have a strong marriage where there is much love, devotion and commitment. How do you get such a marriage? By discovering God's wonderful plan for marriage, spousal love and family, and then embracing it. This demands a rejection of all the false substitutes for that plan, which block it and sterilize it.

### 3) What is the impact of contraception upon children and family life?

Consider what divorce is doing to our young people. Every young person wants to have a loving mother and father, brothers and sisters, and cousins. You take any of these away, and a young person has additional problems to cope with. 39% of babies today are born to unwed mothers. Think of the additional financial and emotional burdens that are thrown upon that little family. Many fathers today are not involved with their children. This leaves a real gap in the psyche and emotional life of children. Today over 1% of our population is incarcerated, the majority of which are young men who never experienced the supervision, tough love and support of their fathers. Divorce is the obvious factor here, but behind the divorce is the distortive reduction of the marital act caused by contraception.

Children of a divorced family do not experience a normal marriage of their parents as they grow up during their formative years. If they are not to repeat the cycle, then they must learn on their own what a normal marriage looks like, and how to build one. Children of contracepting parents will not be guided into the virtue of chastity by their parents. Contracepting parents cannot teach chastity to their children. And teenagers know if their parents are contracepting. About all such parents can say is: "Be good, but if you can't do that, then at least be safe. Be sure to carry a condom with you."

### 4) What is the impact of contraception upon the broader society?

It stands to reason that a nation's life is only as strong as its family life. If marriage and family life are weak, then patriotism will also be weak. If good marriages and healthy, happy families are not producing strong and well balanced individuals, then a country will not have the fountains that supply mature and capable citizens. The basic unit of any society is the family. If the family is in trouble, then that society has real problems. The state exists for the family. The family does not exist for the state. The family predates the state by centuries. Any healthy state will do everything possible to promote strong marriages and healthy, happy families. Contraception and abortion destroy the morals of youth; they foster divorce; they destroy family life and a respect for human life. They destroy youth, which is the greatest asset any country has.

Contraception has changed the way we view many things today. Contraception implies that we have a new "right" today, the right to recreational sex. This means that the pursuit of sexual pleasure trumps everything; nothing can be allowed to interfere with that pursuit. Not even the unborn

baby. Contraception is available to everyone today. Thus also is recreational sex. More and more promiscuous sex leads inevitably to more unwanted pregnancies. Thus the pressure upon the legislatures and courts for legal abortion and widespread contraception and sterilization. Pro-abortion forces insist that contemporary life styles, using massive contraception, require easy access to abortion.

If promiscuous sex is accepted by society, then pornography must be accepted. Pornography is presented as harmless entertainment. It is also a multi billion-dollar industry. Patrick Trueman, the former chief of the U.S. Department of Justice Child Exploitation and Obscenity Section, expressed strong concern for the direction of America due to the prominence of pornography. "Since the advent of the internet, pornography has flooded homes, businesses, public libraries, and even schools. The results have been devastating to the social and family fabric of America," he said. "Pornography, in other words, is altering minds, destroying taboos, and reordering society." Addiction to pornography, Trueman noted, is now common among men, women, and even many children, bringing life-long consequences. Pornography use is a significant factor in divorce, a contributing cause of the spread of prostitution and the sexual trafficking of adults and children. He has a website for sound research, news articles and opinion pieces demonstrating the harm from pornography. It is called Pornography Harms.

What about human trafficking of young boys and girls? Is this not a horrible violation of their human dignity and their right to live a normal childhood? Should not every effort be made to stop sex tours by wealthy Americans and Europeans in Thailand and Indonesia? What fuels this trafficking in human bodies? It is sex out of control. Is that not what contraception is?

There is a strong connection between contraception and population control. Population controllers, beginning with Paul Erlich and his The Population Bomb, want to scare us into believing that there are just too many people in the world. We in the First World cannot maintain our present high material standard of living if more people in the developing countries demand more energy resources like oil, more mineral resources like uranium, and more food. What is their solution? Their solution is to make people in the developing countries believe that their babies are the source of the problem. Their babies are taking all their money and resources, which could be used for economic development. Therefore, restrict the size of poor people's families. In China there is a one child policy and then mandatory abortion.

There are many international agencies, IPPF, USAID, PCUN that will provide developing nations with millions of dollars for every form of contraception, and abortion, but will provide little money for such basic needs as clean water, basic medical care, protection against malaria, good roads, schools, etc. Population controllers forget that babies come not only with mouths for eating, but also with minds for finding solutions to problems, hands and arms and legs for doing the work of the nation, and big hearts with which to love.

Contraception and abortion are not the solution to economic development. They are the taproots of the culture of death and they destroy a nation's greatest asset, which is its youth. (For good analysis of population myths see PRI, Population Research Institute.)

Original article can be found at [http://www.nfpoutreach.org/Q%26A/CONTRACEPTION\\_163\\_64\\_65.htm](http://www.nfpoutreach.org/Q%26A/CONTRACEPTION_163_64_65.htm)





## VII. Economic Concerns

The behaviors fostered by ready access to birth control are very costly. As a society we are already paying a very high price in social services, health care, and education. Making birth control available absolutely free further encourages the very behaviors that are already ruining society.

Why would anyone support this? Who will benefit? “Follow the money,” so the saying goes. Obvious winners are the

producers of birth control —“big pharm”.

The mandate requires that all FDA approved products be available at no cost to the customer. The customer thus has no incentive to purchase generic equivalents of name-brand drugs that have been heavily advertised in all media outlets.

The second big winner is “big media” as an already enormous advertising budget for “big pharm” takes a quantum leap. The politicians who supported the

Affordable Care Act will reap the benefits of even greater campaign contributions from “big pharm” and “big media”. Who are the losers? The enormous increase in health care costs will discourage employers from hiring additional employees and/or providing healthcare coverage.

Consequently, the economy will further recess, there will be less tax revenue, all governmental services will be

subject to reduction, resulting in increased demand for health care, social services, and education by the Church.

But will the Church be there to provide these services after the government has usurped them to itself? And the drastically increased national debt will become the burden of the under-populated following generations.

## The Economic Nonsense of the Contraceptive Mandate

By Dave Brenner

*Recently, the Department of Health and Human Services Secretary testified that the government mandate that insists that all employers and insurance providers offer contraceptives via employee health plans would have a positive impact on the economy. Is such a claim true? Dave Brenner offers his insights and explores how such a claim might be measured by the convictions of faith.*

The contraception mandate levied by Health & Human Services is a multifaceted piece of legislation that compels discussion of religious freedom, moral teaching, and rights of women. The wide spectrum of opinions complicates the ability to drive consensus. But if the White House’s claim is true that 99% of women use contraception at some point in their lifetime and that it’s the “most widely used form of medication” as the HHS Secretary claims, then certainly the discussion isn’t about access to contraception but about costs.

So what can we learn about the economics of the mandate?

Let’s start with the Administration’s perspective: the HHS Secretary was asked this question on a March 1st hearing for the House of Energy and Commerce subcommittee. The committee expressed concerns about the \$111 Billion cost to implement PPACA, which represents a 30% increase over prior year budgets. The recent “contraception mandate” was discussed in context of these costs. the HHS Secretary defended the mandate on cost

grounds stating, “The reduction in the number of pregnancies compensates for the cost of contraception.”

The HHS Secretary also affirmed that religious liberty was not at stake under the most recently issued “compromise” with religiously affiliated institutions because “the rule which we intend to promulgate in the near future around implementation will require insurance companies, not a religious employer, but the insurance company to provide coverage for contraceptives.” This is because, she reasoned, insurance companies would save money on costly pregnancies in the near-term and on costly healthcare treatment in the long-term.

To summarize her perspective, contraception lowers healthcare costs in the near-term by reducing expensive pregnancies and reduces long-term healthcare costs through a reduced population. Therefore, insurance companies are economically incentivized to provide contraception at no incremental charge to employers or employees so it will not violate an institution’s religious liberty.

This is absurd economic rationale.

Let’s start with the near-term healthcare costs argument. Representative Brett Guthrie (R-KY) exposed the Secretary’s false reasoning “If you think about it, why don’t health insurance companies provide it now if the argument is health insurance companies are going to make a lot of money? If the health insurance companies were really acting in their

own best interest, they would be giving these pills out for free, if it really saved money.” In other words, there would be no need for a mandate because a profit-maximizing insurance company would already offer contraception for free.

There’s also the inconvenient truth that making medication available at no cost, no co-pay and no deductible eliminates consumer price sensitivity. This will lead contraception manufacturers to raise their price and create multi-million dollar ad campaigns to build brand equity so that consumer choice is made on equity and benefits rather than costs. *The Atlantic* exposed this reasoning and demonstrated that the contraception mandate will enable pharma companies to gain billions of dollars in incremental revenue if it is covered through insurance. It turns out that the reason the pharmaceutical trade group, phRMA, supported the mandate is because of potential revenue growth for their constituents.

The more concerning part of this argument is the underlying hypothesis that population stagnation and decline lowers healthcare costs. As a Christian, this is deeply problematic on moral grounds. Any ideology that views human life as a problem rather than an opportunity is going to lead to disastrous implications. Indeed, as the Population Research Institute consistently finds (pop.org), human rights abuses are endemic to population control. This is the thread of an argument that one must look for in debates about abortion and euthanasia and even

among certain groups of environmentalists.

As an economist, this is deeply confused rationale. Lower birthrates are consistently proven to be bad for the long-term prospects of an economy. The reason is simple enough – over the course of a life, most people produce far more than they consume. People are “net contributors” to the economy. The Government Accountability Office projects that unfunded obligations to US entitlement programs (e.g. Social Security & Medicare) stand at \$45.8 Trillion. These debts can only be paid through a growing work force. David Brooks’ column from mid-March comments on the difficulty of sustaining long-term economic growth with declining birth rates. There is a reason why Western Europe and Russia, each with birthrates below replacement levels, have struggled to grow their economies.

The economics are clearly not in favor of the contraception mandate. The “core principle” that the President mentioned in his February 10th address that all women be provided with “free preventative care that includes contraception services” is ideologically driven and we should recognize that it leads to grave problems on the horizon.

Dave Brenner, MBA, is a Word on Fire blog contributor and a seminarian for the Archdiocese of Chicago. Original article can be found at <http://wordonfire.org/WoF-Blog/WoF-Blog/March-2012/Commentary-The-Economic-Nonsense-of-the-Contracep.aspx>

## ‘Birth control pills don’t fall out of the sky like manna’: economic experts blast revised mandate

By Ben Johnson

WASHINGTON, D.C., February 10, 2012, (LifeSiteNews.com) – Regardless of whether the federal government’s new health care “accommodation” satisfies the First Amendment’s freedom of religion, experts tell LifeSiteNews.com it defies the basic laws of economics. One warns that insurance companies may charge religious institutions higher fees to compensate for the law’s new stipulations.

The President announced two new principles as part of his revised policy on whether religious groups other than churches must provide insurance coverage for contraceptives and abortion-inducing drugs. “Religious organizations will not be required to subsidize the cost of contraception,” he said, and “insurance companies will be required to provide contraception coverage to these women free of charge.”

Several economic experts responded to the ‘accommodation’ by telling LifeSiteNews the same thing: “There’s no such thing as a free lunch.”

Sheldon Richman, editor of the Foundation for Economic Education’s journal “The Freeman,” told LifeSiteNews.com that when he heard the President say neither employers nor employees will pay for the drugs, “I wanted to scream at the TV, ‘Then who will?’ Somebody’s got to pay for it. Birth control pills don’t fall out of the sky like manna.”

“He insults our intelligence by not even

addressing the point,” Richman said.

He said insurance companies are “not simply going to absorb the cost.”

Dr. Samuel Gregg, research director at the Acton Institute, wrote in a statement e-mailed to LifeSiteNews.com, “Someone has to pay. And it would be entirely reasonable – and very probable – for the insurance companies to simply charge religious institutions extra for their overall insurance policies in order to cover their not-so-free costs.”

Richman said if the President chooses not to levy an additional cost on religious institutions, health insurance companies “will increase everybody else’s premium, so the cost will be shifted from the Catholic institution to everyone else who has to buy health insurance.”

Others agreed.

“Ultimately, given the socialization of a large part of the health insurance costs nationally, it will be taxpayers paying for it,” Jack McHugh, senior legislative analyst for the Mackinac Center for Public Policy, told LifeSiteNews.com. “For those who do not qualify for the [government insurance] subsidy, they will absolutely be paying higher insurance premiums—not just because of this mandate but because of all the mandated coverages that are already in the law.”

The accommodation will not be implemented until after the presidential election.

Asked about whether the “free” care would increase consumer costs, the Health and Human Services Secretary told Fox News this afternoon, “What we now have is oversight from the Department of Health and Human Services looking at insurance rates...so we’ll be watching this carefully.”

If HHS is attempting to hold down costs, “we’ll get the same results we get from any price controls,” Richman said. “There will be fewer insurers,” which “puts upward pressure on premiums, if you have fewer providers in the market but demand is the same.”

“The laws of economics are like the law of gravity. They may take a little longer for the consequences to set in, but they do set in,” Richman told LifeSiteNews. “If we pretend they’re not there, then we’re going to see scarcities and other problems.”

In a blog post earlier in the day, Richman blogged that insurance is supposed to share the burdens of unforeseen calamities. Birth control, which is “a volitional act,” does not qualify. The mandate simply feeds the perception that if the government does not provide a good or service, access is being denied.

The President, who expressed his support for a single-payer health care plan before being elected president, could use rising premiums as leverage to nudge the nation’s health care industry toward a government-run system. “They come out the winner no matter what,”

Richman said.

Many critics have noted, since money is fungible, religious organizations will still be compelled to pay for contraception, sterilization, and abortion-inducing drugs through another mechanism.

Family Research Council President Tony Perkins said, “this new proposal still requires religious entities that are not exempt as a church to subsidize and pay insurance companies so they can give free birth control to their employees. However, it won’t be free, because the insurance companies will increase the premium and administrative costs to the employer.”

Dr. Gregg told LifeSiteNews.com, “No amount of rationalization (of which we will surely hear plenty in forthcoming days from the usual suspects) can disguise the fact that indirect payment for these services would fall into the areas of either what the Church calls formal cooperation in evil or direct material cooperation in evil.”

“It’s apparent from the details of the administration’s HHS compromise that they understand neither the economics of healthcare nor the import of Catholic moral teaching on these subjects.”

<http://www.lifesitenews.com/news/expert-under-accommodation-religious-institutions-may-pay-higher-insurance/>





## Economist: Contraceptive Culture Shifts Economic Power away from Women

By Kathleen Gilbert

April 14, 2010 (LifeSiteNews.com)

The contraception revolution has, contrary to its image, shifted wealth and power away from women and is in effect “deeply sexist,” according to one economist’s analysis.

In the essay, entitled “Bitter Pill” and appearing in the latest edition of First Things magazine, economist Timothy Reichert argues that the case against contraception can be effectively articulated “using the language of social science, which is the language of the mainstream.” Rather than framing the debate as “a case of faith and reason talking past each other,” those who oppose contraception can frame the debate in terms of the objective societal damage contraception causes.

According to Reichert, a major source of the problem is that contraception separates the traditional mating “market” into two separate markets: a market for marriage, and a market for free sex, created thanks to the significant cost reduction of sex uncoupled from pregnancy. But, he says, while this situation is not intrinsically bad from an economic standpoint, if there are “imbalances” in the two markets then “the ‘price’ of either marriage or sex tilts in favor of one or the other gender.”

Whereas in the past, he says, “the

marriage market was, by definition, populated by roughly the same number of men as women, there is no guarantee that once it has been separated into two markets, men and women will sort themselves into the sex and marriage markets in such a way that roughly equal numbers of each gender will inhabit each market.”

As it turns out, Reichert maintains, women end up entering the marriage market in greater numbers than men, due to their natural interest in raising children in a stable household. Meanwhile, the economist notes that men, who can reproduce much later in life than women and are required by nature to invest much less in the childbearing process, face far fewer incentives to move from one market to the next.

“The result is easy to see,” writes Reichert. While women have higher bargaining power in the sex market as the “scarce commodity,” he writes, “the picture is very different once these same women make the switch to the marriage market”: “The relative scarcity of marriageable men means that the competition among women for marriageable men is far fiercer than that faced by prior generations of women.

“Over time, this means that the ‘deals they cut’ become worse for them and better for men.”

Marriage as an institution, he writes, subsequently loses its contractual character to foster women and their children, becoming instead something that is “more frail and resembles a spot market exchange.” The result is that “men take more and more of the ‘gains from trade’ that marriage creates, and women take fewer and fewer.”

Reichert enumerates some of the damaging fallout of this redistribution, including higher divorce rates, a housing market driven up by two-earner households, easier infidelity, and an increased demand for abortion.

Regarding the abortion increase, Reichert says that women who have invested in a future career will predictably “demand abortions” if contraception happens to fail. “The cost today of an unwanted pregnancy is not a shotgun wedding,” he writes. “Rather, the cost is the loss of tremendous investments in human capital geared toward labor-market participation during the early phases of one’s life. This increases the demand for abortions (which prevent the loss of that human capital).”

The impact on children, he contends, inevitably mirrors the impact on their mothers: “Given that women’s welfare largely determines the welfare of children, this redistribution has in part been ‘funded’ by a loss of welfare from children,” writes the economist. “In other words, the worse off are women, the worse off are the children they support. On net, women and children are the big losers in the contraceptive society.”

Reichert concludes that contraception’s redistribution of welfare is “profound—and alarming.”

“Societies are structured around many objectives, but one of their chief reasons to be is the protection of the weak,” he writes. “This means the old, the young, and childbearing and childrearing women. Contraception undermines this fundamental imperative, and, in so doing, undermines the legitimacy of the social contract.

“When the social fabric of a society is geared to move welfare from the weak to the strong, rather than the other way around, it cannot survive in the long run.”

<http://www.firstthings.com/feature-archive> or <http://www.lifesitenews.com/ldn/2010/apr/10041510.html>

## What can be done to improve healthcare system along the lines of Catholic social teaching?

By Dr. William Luckey

You ask an interesting question about how to prevent the looming economic disaster in healthcare in the United States. However, your question is much too vague. What I can do is to give some aspects of the financial problem.

Is there a Catholic social teaching side to the financial aspect of healthcare? As followers of Jesus Christ, we all want to see people get “adequate” health care. But the first problem we encounter is, “How much is adequate?” The United States has the best health care system in the world. Medical care is much more available and of more high quality than when I was young. In those days, a diagnosis of “cancer” was a death sentence for most people. Not so today. Preventive medicine is much more widely practiced than ever before. On-site trauma care, as well as emergency room procedures, is absolutely astounding. Lastly, the law in most jurisdictions requires that patients, who call an ambulance and insist on being taken to the emergency room, must be taken

and treated as least until they are stable. This has given rise to what paramedics call “frequent flyers,” those without health insurance who go to the hospital for colds, headaches and the like.

Unfortunately, as one famous economist said, “There is no such thing as a free lunch.” Every bit of service must be paid for by someone. The “frequent flyer” trips to the emergency room are paid for by the paying patients of the hospital and their insurance companies (meaning higher premiums passed on to the consumer). Like every other thing, the price of a medical service is auctioned off to those who want it most, i. e., to those willing to pay the most. This is because medical care is a scarce good—scarcity meaning that our desire for it would never be satisfied, not because there is not really enough. Since it is scarce, it needs to be economized.

But more and more people claim the right to get the best, high-tech treatment the system can offer. If you

have insurance or can pay out of pocket, you can have it. If not, you have to do without. This is not much different than a poor man who would like to drive to work in a nice, reliable BMW, but keeps a 1970’s AMC Gremlin alive because he has little money. How much health care is he entitled to if he cannot afford the higher level stuff? How much health care is he entitled to if his medical conditions are caused by his lifestyle choices, like smoking, too much liquor, fattening foods and no exercise, or his failure to take his \$6.00 per month high blood pressure pills which then results in renal failure.

The question is, then, how do we help those at the bottom? The first thing is that Catholics, who are notoriously stingy, need to open their pockets to support clinics which give poor people medical care. Secondly, there are already government programs in place which pay for some care, like Medicare and Medicaid. The poor need to be aware of these. Medical

savings plans are a new and interesting development. If when you are young and healthy, you get one of these and save up, when you are older, you will have money socked away for the bigger expenses. Physicians need to get back into the habit of volunteering some time at clinics, and the trend to more low-level health care providers, such as physician’s assistants and nurse practitioners need to be expanded. More medical schools would lower the physicians’ income through competition, and therefore the cost of treatment. Lastly, tort reform (don’t get me started).

These are some things that point to a solution. Socialized medicine is a false solution, but I’ll have to save that for another day. Meanwhile, there is no quick fix. Maybe we should focus on really desperate areas like Africa, where in some places there is no health care at all?

<http://www.drwilliamluckey.com/index.cfm/Ask-Dr-Luckey>

## Crony Contraception

Posted by RC2 at wheatandweeds.com

Here's an angle on the HHS Mandate I haven't seen anywhere else: it's about Big Pharma.

Completely ignored is the more fundamental problem: this mandate is not only about the bedroom, it's about the boardroom. You've heard of crony capitalism? Well this is America's first

example of crony contraceptives.

Forget for a minute the religious question and look at who wins big here: Big Pharma. This mandate is not really about condoms or generic versions of “the pill,” which are available free or cheap in lots of places. This is about brand-name birth control drugs and other

devices that some consumers swear off because they are too expensive. The Health and Human Services (HHS) mandate requires health-insurance companies provide contraceptive coverage for all “FDA approved contraceptive methods.” It does not insist on generics. And it does not offer any cost

containment.

Which means the cost of the pill and IUDs, etc, will rise and rise, and consumers won't know it because they're "free." RTWT.

Original blog can be found at <http://www.wheatandweeds.com/2012/03/crony-contraception.html>

