Humanae Vitae and the Damage Done:
How the Vatican’s Ban on Birth Control Hurt the World
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fifty years ago, Pope Paul VI slammed the door on Catholics’ use of modern contraceptives with the encyclical *Humanae Vitae* and its fateful words: “The Church...in urging men to the observance of the precepts of the natural law, which it interprets by its constant doctrine, teaches that each and every marital act must of necessity retain its intrinsic relationship to the procreation of human life.” *Humanae Vitae* marked a turning point for the Catholic church, as Pope Paul rejected the theologically sound findings of his own Papal Birth Control Commission in favor of a turn to rigid orthodoxy. Having missed the chance to craft a modern, compassionate sexual ethic based on the individual consciences of Catholics, the church found itself largely ignored on matters of sex by its own faithful, which left it grasping for other ways to enforce its teachings.

It was also a historic moment for the rest of the world, as *Humanae Vitae* would come to dominate the hierarchy’s stance on public health challenges like the spread of HIV/AIDS and access to birth control globally. Beyond these impacts for millions of Catholics and non-Catholics, *Humanae Vitae* was also instrumental to the evolution of the “religious liberty” debate, as the Catholic bishops sought to control by public policy what they could not control by doctrine.

Understanding how the church came to reject contraception and make protecting a flawed encyclical a central part of its theology and public witness is essential to comprehending current policy debates, as well as to appreciating the lives of millions who continue to be impacted by the church’s most infamous encyclical.

**The Birth Control Commission**

In 1963—during a time when many developed countries were undergoing significant cultural shifts around gender and sexuality—a papal commission began working on a new statement on marriage as part of the Second Vatican Council convened by Pope John XXIII to update the teachings of the Catholic church. Some of the conservative members of the pope’s staff were afraid that the more liberal members of the commission would use the occasion to reopen discussion about the hierarchy’s prohibition on “artificial” methods of contraception, such as condoms and diaphragms, which the hierarchy had banned in the 1930 encyclical *Casti Connubii*. Although the hierarchy taught that only the “rhythm” method of timing intercourse for a woman’s infertile period was acceptable to limit births, the contraceptive pill had recently been developed. There was talk of the hierarchy sanctioning its use for Catholic couples because it used naturally occurring hormones to mimic the infertile period of pregnancy.

A new generation of theologians, led by Dr. Hans Küng of Switzerland, was arguing that there was no good theological basis for the ban. So conservatives decided to take the issue of contraception off the table for the Second Vatican Council and convinced the pope to establish a separate commission to discuss contraception. This commission consisted of six people; four of them laymen. After Pope John XXIII died, the commission was continued by his successor, Pope Paul, who expanded it to 13 members and later 58, including five married women as part of its contingent of 34 lay members.

In retrospect, it is not entirely clear why Pope Paul continued the commission. Historian Garry Wills notes that the commission—whose existence was kept entirely secret—gave the pope “options for maneuver” on the issue of family planning, principally by removing it from discussion by the Second Vatican Council. The findings of the commission were to be handed over to the pope, who, Wills notes “could use or suppress them at his discretion.” In addition, because the lay members selected to participate on the commission were conservative Catholics in good standing and because the Vatican believed deeply that the prohibition on contraception was correct—even if some of the reasoning used to support it in the past was faulty—the idea of a “runaway” commission probably never crossed the pope’s mind.

The commission, however, took its job seriously. It studied the history of Catholic teachings on contraception and found that many of the scientific and theological underpinnings of the prohibition on contraception were faulty or outdated. Lay members presented the findings of surveys they had conducted of devout Catholic couples...
about their experiences with the rhythm method. Some of the women present testified about their own use of the method. What the commission heard challenged their thinking about the role of fertility and contraception within marriage. Contrary to the assertion of the hierarchy that natural family planning brought couples closer together, they heard that it often drove them apart. They heard of couples who became obsessed with sex because of the restrictions on spontaneous demonstrations of affection. And they heard women speak of childbearing as one of many roles they played as wives, mothers and partners and of the importance of the non-procreative sexual bond to marriage.

The commission voted overwhelmingly to recommend that the church rescind its ban on artificial contraception. The members declared that contraception was not “intrinsically evil” nor the popes’ previous teachings on it infallible. But to conservatives in the Vatican, it was impossible that the teaching on birth control could change because this would acknowledge that the hierarchy had been wrong on an issue it had elevated over the years to a central tenet of its teachings. For the last meeting of the commission in the spring of 1965, the Vatican demoted the commission members to “experts” and brought in 15 bishops to make the final report. What followed was a series of contentious meetings, as the increasingly impassioned pro-contraception forces squared off against a minority of members determined to hold the line for the Vatican. When Father Marcelino Zalba, a church expert on “family limitation,” asked the commission in undisguised horror what would happen “with the millions we have sent to hell” if the teaching on contraception “was not valid,” commission member Patty Crowley shot back: “Father Zalba, do you really believe God has carried out all your orders?”

In the end, even the bishops were swayed by the logic of the case for contraception. They voted nine to three in favor of changing the teaching (an additional three bishops abstained). The official report of the commission said the teaching on birth control was not infallible; that the traditional basis for the prohibition on contraception—the biblical story of Onan and his spilled seed—had been interpreted incorrectly in the past; that the regulation of fertility was necessary for responsible parenthood and could properly be accomplished by intervening with natural processes; and finally, that the morality of marriage was not based on “the direct fecundity of each and every particular act,” but rather on mutual love within the totality of marriage.

While there was only one official report of the commission, the dissenting members prepared what would later be known as the “minority report.” This report said that the teaching on contraception could not change—not for any specific reason, but because the Catholic hierarchy could not admit it was wrong: “The Church cannot change her answer, because this answer is true...It is true because the Catholic Church, instituted by Christ...could not have so wrongly erred during all those centuries of its history.” It went on to say that if the hierarchy was to admit it was wrong on this issue, its authority would be questioned on all “moral matters.”

By this time, the existence of the commission and its report recommending that the teaching on birth control be changed had leaked to the public, creating great expectation among Catholics that the Vatican was preparing to rescind the ban on artificial birth control as part of the general modernization of the church that accompanied Vatican II. Lost to most Catholics was the fact that the Vatican had established the commission as a way of containing the problem of the birth control discussion. It was a shock to Catholics—and indeed most of the world—when the encyclical *Humanae Vitae* was finally released by the pope on July 29, 1968, proclaiming the teaching on contraception unchanged and unchangeable.

Pope Paul had completely ignored the work and recommendations of his own commission, despite five meetings over three years and a vote by 30 of the 35 commission’s lay members, 15 of the 19 theologians and 9 of 12 bishops that the teaching be changed.
A Losing Battle

Reaction to the encyclical ranged from dismay and disappointment to outright dismissal. Many Catholics had made up their own minds about birth control in the years the commission had spent debating the issue. Foreshadowing the crisis of authority that would consume the church in later years, prominent Jesuit philosopher Rev. Robert Johann told the New York Times the day after the encyclical’s release that, “educated Catholics are not going to pay any attention to this statement.”

Commonweal magazine said: “For millions of lay people, the birth control question has been confronted, prayed over and settled—and not in the direction of the pope’s encyclical.” A Manhattan housewife told the Times: “I don’t care what the pope says. I have a feeling the clergy are talking to themselves on this issue. I have made my decision and couldn’t care less about people at the Vatican.”

In fact, a survey just a year after the encyclical’s release found that 44 percent of Catholic women of childbearing age who were regular churchgoers were using “artificial” contraception. By 1974, 83 percent of Catholics said they disagreed with Humanae Vitae.12

Just as stunning as the indifference with which the Catholic faithful met the new encyclical was the response of the world’s Catholic theologians and bishops—the very people responsible for explaining the teaching to Catholics and urging them to follow it. No sooner was Humanae Vitae released than it was met with an unprecedented torrent of dissent from inside the church, most of it asserting that Catholics were free to follow their consciences on the issue of birth control. Many of the world’s most noted theologians—including Bernard Häring, Karl Rahner, Hans Küng, Edward Schillebeeckx and Richard McCormick—dissented from the encyclical. The theological facilities of Fordham University, St. Peter’s College, Marquette University, Boston College and the Pope John XXIII National Seminary issued public statements of dissent, as did 20 of the most prominent theologians in Europe.13

In the United States, the dissent crystallized around a group of theologians at Catholic University led by Father Charles Curran. By 3 am on the morning after the encyclical’s release, the group had 87 signatures to a statement of dissent; two days later, they had 172, and eventually, some 600 theologians signed on. The dissenters included the Rev. Bernard Häring, who was considered the church’s foremost authority on moral theology; John Noonan, a law professor who wrote the definitive book on the history of contraception in the Catholic church and was a special consultant to the papal commission; and all six US lay members of the papal commission.

The statement said that the encyclical was flawed in its assumptions and reliance on an outmoded conception of natural law and that “it is common teaching in the Church that Catholics may dissent from authoritative, non-fallible teaching of the magisterium when sufficient reason exists.” It concluded that “spouses may responsibly decide according to their conscience that artificial contraception in some circumstances is permissible.”

Bishops around the world were more circumspect; most officially accepted the encyclical but reaffirmed the right of Catholics to follow their consciences on the birth control decision. The Canadian bishops released a statement saying that Catholics who tried “sincerely but without success” to follow the encyclical “may be safely assured that whoever honestly chooses the course that seems right to him does so in good conscience.” Bishops’ conferences in Belgium, Germany, the Netherlands, France and Holland issued similar statements. The US Conference of Catholic Bishops (USCCB) said Catholics in the United States should receive the encyclical “with sincerity... study it carefully and form their consciences in that light.” Later, it was forced to clarify that Catholics should follow the pope’s teaching, but the die had already been cast.16

The Legacy of Humanae Vitae

Humanae Vitae marked a turning point. The vibrancy and forward-looking attitude that characterized the church in the wake of Vatican II was ended by the encyclical and the efforts that followed it to stifle an ever-widening circle of dissent within the church. Father Curran, who would battle the Vatican for years about its stance on birth control before being forced from his teaching position at Catholic University, recalled: “Even those who lived through the heady days of the Second Vatican Council have difficulty recapturing the spirit of those times. We are optimistic about the life and future of the church.”

At Catholic University, Curran recalled, “students were enthusiastic; lectures were overcrowded; laypeople took a much greater interest in theology and religious education than they had before; priests and religious were eager to find out about the work of the council.” But Humanae
Vitae hit like a storm that dashed the hopes of millions of Catholics. “All the hope and enthusiasm, all the sense that things had changed and that the birth control teaching could change, were crushed by the document,” he recalls today.

Beyond the sense of betrayal felt by many who had invested their energy and hopes in transforming the church, Humanae Vitae also altered the relationship between Catholics and the hierarchy, says Curran. “In a sense, there was one positive outcome from the encyclical in that Catholics realized that they could disagree with the pope on non-infallible issues and still remain a good Catholic. However, the negative outcome was that it created a lot of tension regarding the credibility of the church,” he says.

Statistics on papal authority bear Curran out. In 1963, 70 percent of Catholics believed that the pope derived his teaching authority from Christ through St. Peter; by 1974, only 42 percent believed the same thing. By 1999, more than 70 percent of Catholics believed that a person could be a good Catholic without obeying the church hierarchy’s teaching on birth control. Catholic sociologist Andrew Greeley noted in 1985: “Certainly never in the history of Catholicism have so many Catholics in such apparent good faith decided that they can reject the official teaching of the church as to what is sexually sinful and what is not, and to do so while continuing the regular practice of Catholicism and even continuing the description of themselves as good, strong, solid Catholics.”

The effect of the encyclical was particularly strong on women directly affected by the ban on reliable, modern contraceptive methods. “Humanae Vitae was just a further manifestation of the unequal role that women already had in the church” notes Sheila Briggs, theologian and associate professor of religion and gender studies at University of Southern California, Dornsife. “For many Catholic women, this was the first time they realized that the Church did not trust them with their own bodies. As a result, many women decided to follow their own consciences.”

In fact, the tacit disobedience fostered by Humanae Vitae soon spilled over into other areas of the church, with Catholics increasingly making up their own minds on a host of other issues, including abortion, premarital sex and homosexuality. By 2011, only 19 percent of Catholics thought church leaders were the final moral authority on abortion and only 16 percent thought they were the final moral authority on premarital sex and homosexuality. Only 10 percent of Catholics looked to the hierarchy to be the final moral authority on the matter of contraception. The very thing that Pope Paul had feared most—that changing the teaching on birth control would erode the hierarchy’s authority on other matters of sexual morality—happened precisely because the teaching was not changed.

Humanae Vitae also precipitated a sharp decline in Mass attendance. In 1963, some 75 percent of Catholics in their twenties attended church three times a month or more; by 1972 that number had fallen to 45 percent. A 1976 survey of Catholic attitudes concluded that Humanae Vitae “seriously impaired the credibility and authority of the papacy, leading to a sharp decline in mass attendance and a sharp increase in apostasy in the years immediately after the encyclical.” By 2016, only 14 percent of millennial Catholics attended Mass weekly.

Despite unprecedented dissent and disobedience, the Vatican refused to seek an accommodation that would recognize the reality of widespread contraceptive use, particularly after John Paul II became pope. A refusal to tolerate any public dissent from Humanae Vitae became one of the hallmarks of his papacy. John Paul II raised the teaching on contraception above almost all else in the church, using language that confirmed it was absolutely inflexible and frequently equating it with abortion. In 1983, he issued a statement that said: “Contraception must objectively be judged so illicit that it can never for any
reason be justified," in response to several national bishops’ conferences that had suggested that contraceptive use was not a grave offense in situations such as when a pregnancy threatened a woman’s health.26 In 1988, he told Catholic theologians that they could not question the ban on contraception and to do so would be like questioning “the very idea of God’s holiness.”27 In 1989, he sidestepped the fact that the teaching had never been declared infallible by proclaiming that Humanae Vitae had been “written by the creative hand of God in the nature of the human person.”28

Efforts to repair the damage done by Humanae Vitae were short-circuited by Vatican campaigns to stifle public dissent on the issue of contraception. In 1980 at a synod in Rome, Archbishop John R. Quinn, the head of the US Conference of Catholic Bishops, called on the Vatican to reopen the birth control discussion in light of the fact that more than 75 percent of Catholic women in the United States used banned contraceptive methods and that only one-third of US priests believed contraceptives were immoral.29 The US bishops were quickly rebuffed by the Vatican and forced to issue a statement clarifying that they did not “reject or challenge the doctrine of the Catholic church on contraception.”30

In one of the most high-profile showdowns, in 1986 the Vatican stripped Father Curran of his teaching post at Catholic University and his right to teach Catholic theology because he refused to retract his view that using contraceptives was not inherently wrong. Curran had maintained his right to dissent on issues such as birth control and other areas of sexual morality that had not been declared infallible by the pope.31

Nevertheless, there is little doubt that Humanae Vitae has been ineffective in convincing Catholics not to use contraception. Catholics in the developed world have largely followed their own consciences on contraception or remain largely unaware of Humanae Vitae at all. In the United States today, 99 percent of sexually active Catholic women have used a method of contraception other than natural family planning, which is the only method approved under Humanae Vitae. Approximately 71 percent of Catholic Americans have never heard of Humanae Vitae and only 14 percent know it affirms the Vatican ban on birth control. Only 17 percent agree with the ban.32 Globally, 78 percent of Catholics support the use of contraceptives, and this support is evident throughout South America and Europe: 90 or more percent of Catholics in Argentina, Colombia, Brazil, Spain and France support the use of contraception.33

**Humanae Vitae and Global Health**

While many women in the Global North and large parts of Latin America continue to use contraception despite Humanae Vitae, in developing countries—especially where the Catholic hierarchy holds sway over government family planning policies—the impact of this ban has been deadly. The Catholic hierarchy’s insistence that Humanae Vitae guide the health policies of governments, and often foreign assistance for these policies, has led to a persistent unmet need for modern family planning in developing countries. This gap has set back development progress, led to increased abortion, death and disability for women denied the ability to limit pregnancies and hurt efforts to stem the spread of HIV/AIDS.

Today, an estimated 214 million women globally have an unmet need for modern contraception, which contributes to high rates of maternal mortality.34 A wide-scale study found that contraceptive use reduced maternal mortality by almost 44 percent. Increasing the contraception prevalence rate in low-performing developing countries would not only avert some 27 deaths per 100,000 women, but would “reduce the burden on [the] maternal health system for serving more women effectively and efficiently.”35

Despite this evidence, the Catholic hierarchy is a vociferous opponent of modern contraception on the African continent, which has the world’s lowest rate of contraceptive use. Pope John Paul II called the promotion of contraceptives in developing countries attacks on the family and part of a “culture of death.”36 Bishops routinely make false charges that modern contraception is harmful to women’s health, that the increased use of contraception leads to increased levels of abortion and that international family planning programs are western plots to destroy African society.37 This is especially concerning because Catholicism is growing fastest in Africa—the Catholic population on the continent has increased by 238 percent...
since 1980 and Catholics are predicted to account for nearly 25 percent of the population by 2040. Catholic bishops have been especially influential in promoting these views in countries with large Catholic populations, such as Angola, Congo, Gabon, Kenya, Nigeria, Rwanda and Uganda, which have persistently high rates of unmet need for contraception. In Nigeria, Catholic bishops refuse to acknowledge the role that modern contraceptives play in reducing maternal mortality. In 2015, the Nigerian bishops charged that international family planning programs were part of a “culture of death” designed to promote a “radical” program of abortion and contraception pushed by “wealthy philanthropists, donor nations and international organizations” that would result in the “hyper-sexualization of our youth.” In 2016, the Catholic bishops in Uganda instructed all Catholic facilities, which include 115 health centers and nine hospitals, to stop dispensing contraceptives, citing *Humanae Vitae* as the reason and calling contraceptives immoral.

As a result, support for contraceptive use among African Catholics is persistently lower than in other parts of the world. The same 2014 survey that found that 78 percent of Catholics worldwide support contraceptives, found that only 44 percent of Catholics in Congo and 43 percent in Uganda back modern methods of contraception. A 2014 Pew survey found some of the lowest levels of support for contraceptives in the world in Nigeria and Ghana, where 54 and 52 percent of the population respectively say using contraceptives is “morally unacceptable.” A survey of women’s reasons for not using family planning found that women in Africa were more likely than women in other developing regions to cite personal or family opposition to contraceptives. It found that “opposition to contraception is somewhat more frequently cited as a reason for nonuse than in earlier years,” which could be due to a growing tide of cultural conservatism or fears about the health effects of contraceptives. Fully 38 percent of women in Nigeria and 28 percent of those in Congo not using contraceptives cited such opposition as the reason.

Nevertheless, some developing countries have been able to overcome battles with the Catholic hierarchy and meet women’s needs for contraception. Kenya, for instance, has successfully promoted the use of modern contraceptives, despite its influential bishops’ conference. The Ministry of Health partnered with international NGOs to meet its goal of 52 percent of married women using contraceptives by 2015 and by 2014 it already had 53 percent usage rates, resulting in a global Excellence in Leadership for Family Planning Award. Kenya is on target to expand family planning access to nearly 60 percent of married women by 2018, two years ahead of target.

Yet these efforts have come under attack from the Kenyan bishops’ conference, which has painted the program as a western attack on African culture and society. “The drive by foreign agencies ... to target millions of girls and women in Africa for the artificial family planning ... is unimaginable, dangerous and could lead to the destruction of human society,” said the bishops’ statement when Kenya’s government first announced its family planning campaign in 2012. Calling contraceptives “unholy,” Kisumu Archbishop Zachaeus Okoth announced an anticontraceptive initiative in December 2017 to “educate couples on natural family planning” and oppose the use of popular modern methods such as Norplant, a contraceptive implant, which Okoth falsely charged is causing harm to women.

In the Philippines, Catholics voice strong support for contraceptives but have been limited in accessing them by the hierarchy. According to the 2014 poll of Catholics worldwide, 68 percent of Catholics in the Philippines support contraceptive use. The country had a successful government-backed family planning program in the 1990s, providing free and reduced-cost contraceptives to its large low-income population. But when Gloria Macapagal-Arroyo became president in 2001, she paid back the Catholic bishops for supporting her candidacy by ending the program and making natural family planning the country’s official method of birth control. As a result, the country’s rate of unmet need for modern contraceptives shot up to 38 percent by 2012. Its high rate of poverty grew even higher, as the number of poor people increased by 4 million between 2003 and 2006. The decline in the country’s maternal mortality rate, which had decreased at two percent per year between 1990 and 2000 also reversed.

Several reproductive health bills were introduced
throughout the 2000s to restore the country’s family planning program, but were successfully blocked by the politically influential Catholic bishops. They falsely charged that these bills would legalize abortion and threatened to excommunicate legislators who voted for them. But grassroots support from Catholics finally overwhelmed the bishops. In 2012, the Reproductive Health law passed that guaranteed all women access to modern contraceptives and instituted a program of sex education for schools.

The bishops refused to relent, and in 2013, the country’s supreme court blocked implementation of the Reproductive Health law after sustained lobbying from the bishops, who claimed it violated freedom of religion. In 2014, the court allowed partial implementation of the law. Finally, in 2017, President Rodrigo Duterte issued an executive order that allowed for the full implementation of the Reproductive Health law. Nevertheless, the Catholic bishops were successful in blocking distribution of condoms in schools, signaling that they will continue to impose Humanae Vitae on a population that has disregarded the teaching.

**Humanae Vitae and the AIDS Epidemic**

Nowhere has the public health impact of *Humanae Vitae* been felt more acutely than in efforts to combat HIV/AIDS. Despite scientific evidence that condoms are critical in HIV/AIDS prevention, the Vatican has refused to relax the ban on contraceptives and has spread disinformation about the effectiveness of condoms, which undermines efforts to promote condom use.

The Catholic hierarchy teaches that abstinence is the only way to avoid AIDS and aggressively promotes this position. When Pope John Paul II visited Tanzania in 1990 at the height of the AIDS epidemic, he told Catholics that using condoms was a sin. In 2003, Cardinal Alfonse Lopez Trujillo, head of the Vatican’s Pontifical Council for the Family, caused consternation from public health officials around the world when he stated on BBC television that condoms were ineffective in preventing AIDS because the HIV virus could “easily pass” through them. In 2005, Pope Benedict XVI told African bishops: “The traditional teaching of the church has proven to be the only failsafe way to prevent the spread of HIV/AIDS.”

Nevertheless, for decades, some cardinals and bishops have conceded that using condoms to prevent the transmission of HIV, particularly within marriage and the context of responsible sexuality, is a better option than spreading a deadly virus. The US Conference of Catholic Bishops was one of the first to say in 1987 that sexuality education programs “could include accurate information about prophylactic devices ... as potential means of preventing AIDS.” Two years later, however, the bishops changed this position and said that condoms were both “technically unreliable” and “morally unacceptable.”

In January of 1989, Bishop Jacques Gaillot of Évreux became the first to openly advocate condom use to prevent AIDS when he said that failing to tell people at risk of contracting AIDS to use condoms was a violation of the biblical commandment “thou shalt not kill.” In 2000, Monsignor Jacques Suaudeau of the Vatican’s Pontifical Council for the Family summarized the thinking of many in the Catholic hierarchy when he wrote in *L’Osservatore Romano*, the official Vatican newspaper, that “the use of prophylactics” in some circumstances is “a lesser evil but it cannot be proposed as a model of humanization and development.”

South African Bishop Kevin Dowling suggested in 2001 that when people who were HIV-positive could not follow church teaching “for whatever reason,” they should be “challenged to take responsibility for their actions and their effect on others.” He stated, “They should use a condom in order to prevent the transmission of potential death to another.” Despite his efforts to get the bishops’ conference in South Africa to officially endorse condom use, at least for HIV discordant couples, the South African bishops called condoms, “an immoral and misguided weapon in our battle against HIV/AIDS.”

In 2010, Pope Benedict wrote that while condoms were not “a real or moral solution,” they could be “a first step in the direction of a moralization, a first assumption of
responsibility.” The Vatican subsequently clarified that Benedict was not changing church teaching but did believe that for people who were infected with HIV, such as prostitutes, using condoms could be “the first step in taking into consideration the risk to the life of the person with whom they were having relations.”

Despite this somewhat changed rhetoric, Catholic bishops continue to lobby that such programs as the President’s Emergency Plan for AIDS Relief (PEPFAR) contain “conscience clauses” that exempt faith-based providers from having to provide condoms or counsel about their use. For instance, Catholic Relief Services received a $1.5 million contract from the Global Fund to Fight AIDS, Tuberculosis and Malaria for a Sexually Transmitted Infection (STIs) testing, treating and counseling program, which did not mention condoms as a way to prevent STIs or AIDS. Participants instead received counseling from a group called Youth for Christ that focused on abstinence and fidelity to prevent STIs.

The ban on condoms is especially damaging because the Catholic Church is an especially prominent provider of HIV/AIDS care in Africa. Approximately 25 per cent of HIV/AIDS care throughout the world is provided by Catholic affiliated organizations. And under President Donald Trump, it is expected that faith-based organizations will get an even greater share of US global health funding for abstinence-only HIV-prevention programs. Catholic affiliated facilities do not distribute condoms or provide counseling about the use of condoms to prevent the spread of AIDS, even to patients who are HIV-positive and at risk of infecting a partner. In 2017, the Kenyan bishops announced an anticontraceptive initiative that would oppose the free distribution of condoms, which the bishops falsely claim cannot halt the spread of AIDS.

Any hopes that Pope Francis would lift the ban on condoms for humanitarian reasons were dashed when he visited Kenya, Uganda and the Central African Republic in 2015. Pope Francis deflected a question about approving condoms with a favored tactic of the African bishops—claiming that the real problem was not the spread of HIV but rather the number of people who “die because they do not have water, food or housing.” That same year, 45 African bishops denounced “the billions of dollars allotted to the production and distribution of condoms and contraceptives and the establishment of sex-education programs” as a violation of “moral norms.”

While the hierarchy remains unwilling to unequivocally support condoms for HIV/AIDS prevention even in the most dire environments, Catholics the world over do support the common-sense provision of condoms and condom counseling. A survey of Catholics in Kenya, Ireland, Mexico, the Philippines, and the United States found that more than six in 10 Catholics say Catholic hospitals that receive government funding should be required to provide condoms to prevent AIDS and HIV.

More than 70 percent of Catholics in the United States say the church should change its position on condoms.
Humanae Vitae and the United Nations

The Vatican has also used its status within the United Nations to promote its *Humanae Vitae*-centered vision of human sexuality and block global efforts to introduce family planning programs, increase human and reproductive rights for women and fight AIDS.

The Holy See, which is the government of the Roman Catholic church, is a Non-member State Permanent Observer at the United Nations. This designation gives it some of the privileges of a state, such as being able to speak and vote at UN conferences. Because UN conferences seek to make decisions by consensus, the ability to disagree with the majority consensus has significant power. The Vatican has become adept at using its status at UN meetings to create coalitions of nations hostile to contraception and to influence the outcomes of international consensus documents designed to be templates for action on global family planning, development issues and HIV and AIDS prevention.

The Vatican has forged strategic ties at the UN with conservative Christian and Catholic organizations and hardline Islamic governments like those in Iran and Libya to advance a shared vision of “natural family” as one in which contraceptive practice is nonexistent or limited. At the historic 1994 International Conference on Population and Development, the Vatican teamed up with small Catholic countries—including Honduras, Ecuador, Malta and Guatemala—as well as Iran and Libya to undermine the international consensus on women’s right to reproductive health, including the right to contraception. Prior to the conference, the Vatican decried what it called “contraceptive imperialism” and suggested that family planning programs, “frequently made in the name of the health and well-being of women,” were exploiting poor women and forcing them to use modern methods of contraception. The Vatican attempted to undercut support for family planning programs by charging that hormonal methods were abortifacients and that poor women were being sterilized without their consent. During the meeting, the Vatican held up consensus by instituting endless conversations about the meaning of phrases such as “reproductive health” and “reproductive rights” and disputing language designed to extend family planning services to adolescents, all in the name of halting the spread of modern contraceptives to developing nations.

The hierarchy often argues that contraception is inherently harmful to society by undermining marriage and the family, eroding the “special” status of women as mothers and contributing to promiscuity. In 1993 the Vatican tried to link contraception to a host of modern ills, claiming that “contraception has contributed to the rise in divorces and the number of abandoned spouses and children who are left with just one parent.” At the Fourth World Conference on Women in 1995, Vatican officials took issue with the
concepts of “women’s right to control their sexuality” and “women’s right to control...their fertility,” asserting that these rights should be understood to refer only to “the responsible use of sexuality within marriage.” They also condemned “family planning” as “morally unacceptable.”

At the five-year review of the Cairo Conference in 1999 and later at the five-year review of the Beijing Women’s Conference, the Vatican recruited antichoice and anticontraception organizations such as the Catholic Family and Human Rights Institute to apply for accreditation to UN conferences. These groups further amplified the Vatican’s obstructionist tactics, objecting to terms such as “sex education” to slow proceedings and illegally lobbying delegates in an attempt to disrupt the conference.

At the UN Special Session on Children in 2002 designed to reach accord on measures to protect children from disease and poverty, the Vatican teamed up with the George W. Bush administration and delegations from Syria, Libya and Pakistan to challenge the inclusion of a reference to reproductive health services for young adults and to push “abstinence-only” approaches to sex education and AIDS prevention. They succeeded in removing the reference to reproductive health “services,” leaving a document that endorsed young adults’ access to reproductive healthcare but not to specific methods or programs to prevent AIDS or unwanted pregnancy.

Despite these obstructions, Serra Sippel, president of the Center for Health and Gender Equity (CHANGE), believes the Vatican has primarily failed to block international consensus on the need to provide women access to family planning services. “In the end, the Holy See wasn’t that effective at the UN and is no longer a significant force. The Vatican isn’t a major actor anymore because they lost most of their allies, such as many of the Latin American countries that came on board with family planning initiatives.”

It also has little credibility at the UN on HIV/AIDS prevention, she notes. “Especially on HIV/AIDS, they’ve made themselves irrelevant because the data and science are not on their side. And their credibility was irrevocably damaged by bishops like Kevin Dowling who said that condoms save lives.”

By the start of the 2014 UN Commission on the Status of Women, when the Vatican was expected to issue its usual slew of demands about striking references to family planning and sexuality education and adding references to the importance of the “traditional” family, many observers noted that its influence had waned. As many Latin American delegations have become more progressive on issues of sexuality and reproductive health, the Vatican has been increasingly marooned in defending Humanae Vitae.

In 2015, when the UN released its Sustainable Development Goals 2030, the Holy See expressed strong support despite saying it had “firm reservations” about targets promoting access to sexual and reproductive healthcare services and the integration of reproductive health into national strategies and programs.

**Humanae Vitae and US Health Policy**

The Catholic hierarchy has also used the political clout they wield to influence US reproductive health policy by preventing access to affordable, comprehensive choices for family planning despite American women’s nearly universal use of modern contraceptives.

In 2011, the Obama administration announced a plan to require that all health insurance plans sold in the United States include no-cost contraceptive coverage as part of a slate of essential women’s preventive health services that would be covered at no cost. The US Conference of Catholic Bishops, the lobbying arm of the Catholic hierarchy in the United States, was apoplectic. In an effort to allay the concerns expressed by the Catholic bishops, the Obama administration gave churches and houses of worship a narrow exemption when they announced the proposed regulation for the contraceptive benefit. Two state supreme court cases in New York and California had upheld a similar exemption. But the bishops were not satisfied. Faced with overwhelming public opinion in support of the contraceptive benefit, they changed tactics.

In September 2011, the USCCB announced the formation of an Ad Hoc Committee on Religious Liberty to answer several “threats” to religious liberty they perceived on the horizon, linking the contraceptive benefit to a number of other policies, including the push to recognize same-sex marriage, which the Catholic hierarchy also forbids. Under the guise of this “religious liberty” fight, the bishops claimed that the government was forcing Catholics, and Catholic institutions, to violate their consciences with the contraceptive benefit and the recognition of same-sex marriage. Over the next few years, the committee
became a platform for the USCCB to stake its positions on these issues, despite not having the backing of the majority of voters, Catholic or otherwise.

The Catholic bishops did have some allies in this fight, however. Groups associated with the Christian right, such as the National Association of Evangelicals and evangelical universities such as Colorado Christian University, took up the mantle of “religious liberty” to argue that they too should be allowed to deny contraceptive coverage, even though no Protestant faith has a ban on contraceptive use. Albert Mohler, president of the Southern Baptist Theological Seminary, the closest thing evangelicals have to a Vatican-like teaching authority, noted how influential *Humanae Vitae* had become in evangelicals’ growing hostility to contraception. He urged conservative Protestant evangelicals to reject a “contraceptive mentality” and said they should “look closely at the Catholic moral argument found in *Humanae Vitae* in assessing whether contraceptive use was moral.” As the Christian right became more radicalized on contraception, the Republican Party in 2011 tried, unsuccessfully, to defund the Title X family planning program, which provides family planning services to some 4 million clients annually. Ultraconservatives also sought to limit reproductive care through attempts to defund Planned Parenthood across 15 states.

The USCCB became a key player in the fight to roll back the contraceptive benefit. The Catholic bishops demanded a broad exemption to the contraceptive benefit requirement for any faith-based organization, such as Catholic hospitals and universities, which objected to providing contraceptives to their employees, staff and students. With Catholic hospitals alone employing more than 750,000 people, many of whom are not Catholic, such a broad exemption was clearly a ploy to impose *Humanae Vitae* and its ban on contraception on the population at large. Again, the Obama administration attempted to appease the Catholic bishops by proposing an accommodation that offered a workaround to allow a broader range of religiously affiliated nonprofits to bypass direct provision of the benefit with a simple declaration of their objections. Still the Catholic bishops balked.

Bishop David Zubik of Pittsburgh, under direct orders from the USCCB, led several Catholic entities to sue the federal government because the workaround was not good enough—claiming that filing a form or another declaration indicating their objection to the contraceptive coverage was a violation of their religious freedom. In short, the goal was a complete exemption for every nonprofit organization even loosely affiliated with religious bodies, imposing one set of religious views on millions of employees and essentially codifying *Humanae Vitae* into public law. The cases eventually were consolidated under the *Zubik v. Burwell* case, which made its way to the US Supreme Court in 2016.

Meanwhile, for profit companies took a page from the Catholic bishops to claim that their consciences as employers would be violated if they provided birth control coverage for their employees. The owners of Hobby Lobby, a chain of craft stores, and Conestoga Wood Specialties, a cabinet manufacturer, argued in the courts that providing insurance coverage for contraception to their employees violated their beliefs that certain kinds of contraceptives were immoral. In June 2014, this argument was upheld by the US Supreme Court in the *Burwell v. Hobby Lobby* decision, which found that closely held private companies had a right to deny contraception to their employees.

The USCCB not only wielded influence in the courts, but in the private sector too. They began a crackdown on the provision of contraception by healthcare providers affiliated with the Catholic church. The Affordable Care Act (ACA) provided incentives for hospitals to buy up physicians’ practices and integrate them into healthcare systems to restrain costs. The breadth of Catholic hospitals across the country meant that many secular physicians’ practices have become integrated into Catholic healthcare systems. When these doctors’ practices are merged with Catholic hospitals, their care falls under the *Ethical and Religious Directives for Catholic Health Care Services* (the *Directives*)—a set of guidelines written and enforced by Catholic bishops that ban the provision of certain types of healthcare, including contraception. The *Directives* serve as a policy manual for implementing *Humanae Vitae* in US healthcare provision.
As a result of these mergers, the number of Catholic hospitals increased by 22 percent between 2001 and 2016.\(^{50}\) Today, one in six hospital beds in America is Catholic owned or affiliated.\(^{51}\)

In 2018, Ascension Health, a Catholic system, announced plans to purchase Providence St. Joseph Health in a merger that would create the single largest health system in the United States, encompassing 200 hospitals in 27 states and numerous ancillary services like doctors' offices.

As a result of these mergers, increasingly more Americans are denied family planning services banned by \textit{Humanae Vitae}. For instance, a woman named Angela Valavanis in Evanston, Illinois, was told by her OB/GYN that she could no longer prescribe contraception after she sold her practice to Presence Health, a large regional Catholic hospital system that owns dozens of doctors' offices. Valavanis was shocked when her doctor gave her the news that Catholic doctrine was affecting her reproductive health choices, calling the doctrine "medieval." A short time later, her husband was denied a vasectomy by a doctor affiliated with the same system.\(^{82}\)

With the inauguration of President Trump, the USCCB and Catholic owned hospitals, schools and social service agencies, found the president’s ultraconservative religious appointees to be powerful allies in implementing their agenda on religious refusals and contraception. On

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October 2017, the Trump administration issued an executive order that allows any employer—for profit or nonprofit, faith-based or not—to opt out of the ACA contraceptive benefit due to religious or vaguely defined “moral” objections. The American College of Obstetricians and Gynecologists called the rollback of a benefit that had helped an estimated 55 million women access no-cost contraceptives “damaging” to “public health and women’s health.”\(^{53}\)

Through court battles, executive orders and private mergers, we continue to see how the Catholic hierarchy in the United States has imposed its ban on contraception on non-Catholics and Catholics alike, despite public opinion on these issues. \textit{Humane Vitae} may be 50 years old, but its consequences seem to be more widespread and consequential than ever before.

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Moving Forward
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Many people in the United States would be surprised to learn that their healthcare in a 21st century secular society is affected by a controversial Catholic encyclical handed down half a century ago. And they would be just as surprised to learn that \textit{Humanae Vitae} was promulgated for political reasons, not for reasons of Catholic theology. They would also be disheartened to learn that women in the poorest communities globally cannot access much needed modern contraceptives that could give them and their children longer, healthier lives because of this dusty piece of dogma.

It is clear that the Catholic church cannot move forward until it honestly confronts the paradox of \textit{Humanae Vitae}: that most Catholics use modern contraceptives, believe it is a moral choice to do so and still consider themselves Catholics in good standing. Yet the Catholic hierarchy denies this reality, forcing silence on this and most other issues related to sexuality.

There are sound reasons for the pope to reconsider the ban on contraception. From a theological perspective, the Papal Birth Control Commission determined 50 years ago that contraception is not “intrinsically evil” and that the teaching can be changed. Numerous bishops’ conferences have confirmed that a couple’s consciences are the final arbiter of the contraceptive decision and that the

Pope Francis confirmed that Catholics have no obligation to “be like rabbits” and serially reproduce. But while he lauded “responsible parenthood” and said he thought a three-child family was about the right size, he offered Catholics no realistic path to achieve this goal.\(^{85}\) Like other members of the hierarchy, Pope Francis has spoken favorably about natural family planning, even though the high failure rate and low uptake among women show

Catholics for Choice
why this method is unsuitable and how little the Vatican understands about what modern couples need.

On the issue of HIV/AIDS, bishops and theologians have stated that the principle of the “lesser evil” makes condom use to prevent the spread of a deadly virus acceptable and that condom use would actually be a life-affirming action, a rationale echoed by Pope Benedict himself.

Despite the emphasis the hierarchy has put on the importance of continuity in its teachings on contraception, this is not sufficient reason to maintain the ban. The Vatican has changed its positions on issues of much greater significance, including the necessity of baptism for infants who die and the concept of limbo. Besides a challenge to its authority, at the heart of the Vatican’s reluctance to change the teaching of Humanae Vitae is its inability to craft a more modern sexual ethic that recognizes a role for sexuality beyond procreation and a role for women beyond motherhood or one that offers women full equality within the church.

Jon O’Brien, president of Catholics for Choice, argues that the fact that “the institutional church invests so much energy in trying to promote laws and policy that affect the supply and availability of contraceptives speaks volumes about the obsessive mindset of conservatives who control and direct the Vatican’s worldview. Some openly question if any of this really matters. Most Catholics, regardless of the ban, simply ignore it. However, having lost the battle for the hearts and minds of lay Catholics, the hierarchy seeks to use its power and influence over national and local laws to legislate adherence to their position.”

After 50 years, the damage that Humanae Vitae has done to the lives of Catholics and non-Catholics around the world, as well as to the Catholic church itself, is clear. The long reach of the encyclical continues to be felt globally and in the United States. Yet Catholics use and approve of contraceptives in growing numbers, furthering the divide between rhetoric and reality in the church. Only by confronting the most fundamental of the hierarchy’s errors can the Catholic church move forward and the shadow of Humanae Vitae be erased.
Notes

5 Ibid.
7 Ibid.
9 Ibid.
10 Ibid.
46 Ibid.
Humanae Vitae and the Damage Done: How the Vatican's Ban on Birth Control Hurt the World


Catholics for Choice shapes and advances sexual and reproductive ethics that are based on justice, reflect a commitment to women’s well being, and respect and affirm the moral capacity of women and men to make sound decisions about their lives.