

“Tormented by Difficulties of Every Kind”: Catholic Teaching on Contraception in Social Context

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The Catholic Church notably condemns all forms of artificial birth control and advocates natural family planning as the only morally licit means of spacing births. This teaching is presented as the quintessential pathway to the fullness of human sexuality, but many Catholics struggle with it, and the magisterium itself recognizes that this path is not an easy one to follow. This article uses recent developments in Catholic moral theology around the notion of structural sin to examine the structural constraints complicating ordinary Catholics' pursuit of their tradition's vision for marital sexuality, demonstrating that larger structural forces can considerably affect the perceived viability of Catholic teaching on contraception. As a result, the article highlights the importance of linking Catholic sexual ethics and social ethics to provide a more credible vision for a more compassionate approach to married life.

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ARGUABLY NO moral teaching is more closely identified with the Roman Catholic Church than its distinctive ban on artificial forms of birth control.¹ From practically the moment the Anglican Church offered its approval of artificial contraception at Lambeth in 1930, the Roman Catholic

¹ Cathleen Kaveny has gone so far as to suggest that the Catholic opposition to contraception has become “a cultic norm that marks and defines Catholic identity” in much the same way that the observance of kosher laws marks Orthodox Jewish identity.

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Church has found itself on an isolated journey among Christian denominations, condemning as immoral a practice that virtually all others tolerate or overtly support, at least for married couples.² Over the years, the uniqueness of this position has become fodder for some of the opposition to it, as otherwise committed Catholics question how the magisterium could be right in defending a position that they take to be so clearly at odds with not just the conventions of the day, but a broadly construed *sensus fidelium*.³ Nevertheless, the Catholic Church has steadfastly maintained its official magisterial position, asserting that there is a deep and abiding truth, beauty, and goodness in this teaching, through which “sexuality is respected and promoted in its truly and fully human dimension.”⁴ At the same time, magisterial documents regularly

Cathleen Kaveny, “Catholic Kosher: Is the Ban on Contraception Just an Identity Marker?” *Commonweal* 139, no. 11 (June 1, 2012): 6.

- ² John Noonan’s assertion that the Anglicans’ pronouncement in 1930 was not so much a watershed as a belated acknowledgment of a newly common practice among Christians, at least those in western European nations, provides a plausible explanation for why Roman Catholicism quickly found itself isolated in its opposition to artificial forms of birth control. John T. Noonan Jr., *Contraception: A History of Its Treatment by the Catholic Theologians and Canonists*, enlarged ed. (Cambridge, MA: Belknap Press of Harvard University Press, 1986), 409.
- ³ Charles E. Curran, “*Humanae Vitae* and the *sensus fidelium*,” *National Catholic Reporter* (June 19–July 12, 2018), 6–7. The contested reception of the teaching on contraception has led to explicit debates about the authority of the teaching in light of the *sensus fidelium*. See John E. Thiel, “Tradition and Reasoning: A Nonfoundationalist Perspective,” *Theological Studies* 56, no. 4 (December 1995): 627–51; and Janet E. Smith, “The *Sensus Fidelium* and *Humanae Vitae*,” *Angelicum* 83, no. 2 (2006): 271–97. Notably, the definition of the *sensus fidelium* is itself a contested theological question, which transcends any simplistic elision of the *sensus fidelium* with the extent of a particular teaching’s popular reception, even as the International Theological Commission acknowledges that the laity have a regular role to play in “the development of the moral teaching of the Church.” International Theological Commission, *Sensus Fidei in the Life of the Church* (2014), §73; see also Charles E. Curran and Lisa A. Fullam, eds., *The Sensus Fidelium and Moral Theology* (New York: Paulist Press, 2017).
- ⁴ John Paul II, *Familiaris Consortio* (November 22, 1981), §32, http://www.vatican.va/content/john-paul-ii/en/apost_exhortations/documents/hf_jp-ii_exh_19811122_familiaris-consortio.html. For more on the personal, spiritual, and even social benefits of the Catholic vision for marital sexuality that its advocates identify, see Julie Hanlon Rubio, “Beyond the Liberal/Conservative Divide on Contraception: The Wisdom of Practitioners of Natural Family Planning and Artificial Birth Control,” *Horizons* 32, no. 2 (2005): 270–94, at 276–91. This official position, of course, has not been without contestation, even at the official level, as the Pontifical Commission on Population, Family and Birth convened by Pope John XXIII to study the question of contraception famously recommended a change in Catholic teaching on this issue in its so-called Majority Report. For the report and details surrounding its development, see Robert Blair Kaiser, *The Encyclical That Never*

admit that fidelity to this teaching is not always easy to attain, particularly given the real-life context of couples who are “at times truly tormented by difficulties of every kind, not only individual difficulties but social ones as well.”⁵ As a result, the Catholic position on birth control is more intriguing than the usual polarized discourse about it might suggest, for if both the magisterium’s claims are true, then there is a teaching that offers great benefits to all people of good will, but which also at the same time appears to be unattainable for many if not most.⁶

This article examines this tension and identifies more clearly the kinds of structural reforms that would be necessary to make this high ideal seem more attainable for more Catholics. To arrive at these insights, the article proceeds through three parts. The first briefly describes the current state of Catholic theological reflection on the influence of broader social and cultural factors on moral agency, relying primarily on recent developments in the ethical category of structural sin to defend the claim that structural forces can have a consequential impact on moral choices even while moral agents maintain their innate freedom. The second part then employs these categories to conduct a qualitative analysis of two case studies in which Catholic couples are struggling to practice natural family planning (NFP) in the United States, applying the categories from the first part to highlight the structural forces that facilitate and frustrate their efforts to observe the Catholic Church’s teachings on “the responsible transmission of life.”⁷ The particularity of this

Was: The Story of the Commission on Population, Family and Birth, 1964–66 (London: Sheed and Ward, 1987).

- ⁵ *Familiaris Consortio*, §33; see also Paul VI, *Humanae Vitae* (July 25, 1968), §25, http://www.vatican.va/content/paul-vi/en/encyclicals/documents/hf_p-vi_enc_25071968_humanae-vitae.html.
- ⁶ Notably, scholars have engaged in a lively debate about the veracity of the first of these two magisterial claims (i.e., that the teachings of *Humanae Vitae* have genuine benefits for all people of good will), particularly in light of women’s varied experiences with natural family planning and artificial forms of birth control. For details of the debate, see Emily Reimer-Barry, “On Women’s Health and Women’s Power: A Feminist Appraisal of *Humanae Vitae*,” *Theological Studies* 79, no. 4 (December 2018): 818–40; see also Rubio, “Beyond the Liberal/Conservative Divide on Contraception.” For the sake of this article, we prescind from this debate and focus on the internal coherence of the magisterial teaching on its own terms to show its inherent intersections with other elements of Catholic theology, especially insights at the heart of Catholic social teaching.
- ⁷ Second Vatican Council, *Pastoral Constitution on the Church in the Modern World* (*Gaudium et Spes*) §51, in Norman P. Tanner, ed., *Decrees of the Ecumenical Councils*, 2 vols. (Washington, DC: Georgetown University Press, 1990), 2:1104. Also available at https://www.vatican.va/archive/hist_councils/ii_vatican_council/documents/vat-ii_const_19651207_gaudium-et-spes_en.html.

analysis is crucial because structural forces are closely intertwined with culture, so the opportunities and challenges shaping moral decisions will vary from place to place.⁸ Consequently, any detailed structural analysis must be context-specific. The evaluation in this article thus focuses on experiences in the United States, not to suggest that these experiences are representative for the rest of the world, but to show how a meaningful form of structural analysis can proceed within a specific context. The process has relevance for a similar evaluation in other global contexts, but the immediate observations are necessarily confined to and directed at the US context. The US-specific structural analysis ultimately leads to the third part of the article, which proposes three specific structural reforms that would create more favorable conditions for the practical embrace of the Catholic Church's vision for responsible parenthood in the United States.⁹

All together, the article demonstrates that real stumbling blocks to the observance of Catholic teaching on birth control currently exist and, significantly, that the burden of these stumbling blocks is borne unevenly. Critically, the article argues that the insufficient attention these structural obstacles receive in the official promotion of Catholic teaching on contraception as a positive good for marriage (and society) ultimately reinforces the unevenness of these burdens by diverting attention away from the things Catholics could be doing to shift the weight of these constraints. In this way, the article establishes a close connection between the Catholic Church's sexual ethics and its social ethics, demonstrating that it will always be disingenuous to promote Catholic teachings about sexual morality without championing Catholic social teaching with equal vigor.

Structural Influences on Agency: A Non-Deterministic Approach

To make sense of the magisterium's claims about the challenges of observing the Catholic teaching on birth control in a way that remains faithful to the accounts of couples' experiences with those challenges, one must

⁸ For a discussion of the interrelationship between structure and culture, see Daniel J. Daly, *The Structures of Virtue and Vice* (Washington, DC: Georgetown University Press, 2021), 81–83.

⁹ As discussed in more detail in the following, the magisterial promotion of “responsible parenthood” found in *Humanae Vitae* and beyond primarily involves a careful and prayerful discernment of when and how many children a married couple is called to have, after accounting for a host of factors. In the magisterial vision, refraining from the use of prohibited forms of birth control is a necessary but not sufficient condition for the realization of responsible parenthood. Throughout this article, we refer to responsible parenthood in this technical sense, but wish to stress the more encompassing vision and not just the prohibition on artificial means of birth control.

appreciate how external social forces can shape moral behavior. Of course, this is something of a delicate point to acknowledge because a recognition of social influence can quickly sound like a denial of personal responsibility if the relationship between social context and moral agency is not sufficiently nuanced. Fortunately, Catholic moral theology has the resources to describe just such a nuanced account due to developments in the concept of structural sin.

From the start, Catholic theological reflection on the notion of structural sin has been colored by the fear that any acceptance of social influences on the moral life could undermine the Catholic understanding of personal moral agency and responsibility.¹⁰ As the Second Vatican Council's invitation to attend to the global voices in the Catholic Church began to take hold, however, theologians and bishops' conferences advocated for an explicit incorporation of the idea of social sin or structural sin into the magisterium's vocabulary.¹¹ Eventually, their entreaties received a hearing in Rome, resulting in John Paul II's gradual adoption of the term, first with the acknowledgment of social sins in "the relationships between the various human communities" in his 1984 apostolic exhortation *Reconciliatio et Paenitentia* and then with a full-throated embrace of "structures of sin" as an analytic category in his 1987 encyclical *Sollicitudo Rei Socialis*.¹² In both cases, however, a degree of ambiguity persisted. John Paul II gave clear support to the idea that structures of sin had a profound negative impact in the world but just as clearly maintained that they "are rooted in personal sin," and thus always tied back to personal responsibility.¹³ As a result, the notions of both social sin and structural sin were incorporated in magisterial teaching, but a definitive account of the interactions between personal agency and structural influence remained elusive.

In the years since John Paul II's pronouncements about social sin and structural sin, theologians have sought to resolve some of the tensions

¹⁰ Thus, in the discussions that led to the drafting of some of the Second Vatican Council's documents, there is evidence of a resistance to the language of "social sin"—the broader category of negative social influences of which structural sin is now understood to be a specific manifestation—"lest the centrality of personal agency in formal sin be undermined." Margaret Pfeil, "Doctrinal Implications of Magisterial Use of the Language of Social Sin," *Louvain Studies* 27, no. 2 (Summer 2002): 132–52, at 134.

¹¹ Pfeil, "Doctrinal Implications of Magisterial Use of the Language of Social Sin," 136–38.

¹² John Paul II, *Reconciliatio et Paenitentia* (December 2, 1984), §16, http://www.vatican.va/content/john-paul-ii/en/apost_exhortations/documents/hf_jp-ii_exh_02121984_reconciliatio-et-paenitentia.html; John Paul II, *Sollicitudo Rei Socialis* (December 30, 1987), §§36–40, http://www.vatican.va/content/john-paul-ii/en/encyclicals/documents/hf_jp-ii_enc_30121987_sollicitudo-rei-socialis.html.

¹³ John Paul II, *Sollicitudo Rei Socialis*, §36.

surrounding the power of social forces and the primacy of personal agency.¹⁴ The chief result of these reflections was a twofold acknowledgment that social pressures can have a real impact on moral choices and that personal moral agents remain responsible for the choices they make even when those choices are shaped by the structures agents inhabit. Yet, none of the initial analyses fully resolved what Daniel Daly has come to characterize as “the structure-agency problem in Catholic ethics.”¹⁵ More recently, however, a group of scholars (including Daly) has turned to the critical realist school of sociology to better define social structures and their causal influence, yielding an insightful account of how social structures can have a genuine impact on agency without usurping the individual agent’s free will. It is this account that offers the most valuable resources for an analysis of the obstacles that shape the observance of the Catholic teaching on contraception in the United States today.

The chief architect of the critical realist turn has been Daniel Finn, who provided an account of the causal influence of social structures that is in keeping with the profound respect for freedom found in Catholic theological anthropology.¹⁶ Following critical realist sociologists, especially Margaret Archer, Finn has proposed that “social structures emerge from the actions of individuals and require the participation of individuals for their continued existence. But structures have an independent existence and independent causal effects in the lives of those individuals.”¹⁷ In this claim, Finn is consistent with the work of other theologians who have tried to acknowledge the power

¹⁴ Most efforts focused on the process by which sinful social structures were constructed and maintained. For various theological interpretations of the location of personal moral agency between these two poles, see Kenneth R. Himes, “Social Sin and the Role of the Individual,” *Annual of the Society of Christian Ethics* 6 (1986): 183–218, esp. 185–87; Joseph H. McKenna, “The Possibility of Social Sin,” *Irish Theological Quarterly* 60, no. 2 (June 1994) 125–40; and Daniel J. Daly, “Structures of Virtue and Vice,” *New Blackfriars* 92, no. 1039 (May 2011): 341–57.

¹⁵ Daly, *The Structures of Virtue and Vice*, 33.

¹⁶ Finn is quite attentive to this concern, establishing a respect for freedom as one of the four theological criteria that must be preserved if theologians wish to employ insights from the social sciences. In addition to this non-deterministic view of influences on freedom, the other criteria yield an approach that is non-individualistic, non-collectivist, and non-empiricist in order to preserve the commitments of Catholic theological anthropology. Daniel K. Finn, “What Is a Sinful Social Structure?,” *Theological Studies* 77, no. 1 (March 2016): 136–64, at 142–44. These criteria are honored in the interpretation of the case studies following, where the critical realist account of the structures shaping these women’s experience are used to identify real though often invisible forces (non-empiricist) that make their choices in their marriages and families (non-individualistic) more complicated, even as those choices remain theirs to make (non-collectivist) as an expression of their real though constrained freedom (non-deterministic).

¹⁷ Finn, “What Is a Sinful Social Structure?,” 151.

of structural sin, but what Finn adds from his critical realist interlocutors is a clearer sense of how these independent structures exert their “independent causal effects.”

First, Finn describes the “systems of human relations among social positions” that define everyone’s daily interactions in a functioning society.¹⁸ He gives the example of a university professor whose social position is defined in relation to their colleagues (equal to some, subordinate to others), their students (over whom the professor has authority but to whose end-of-semester evaluations they remain beholden), and various aspects of the university itself (like committees with the powers of promotion, tenure, and termination).¹⁹ These relations among social positions create a series of “restrictions, enablements, and incentives” that make some choices more appealing and others more fraught for the people occupying a specific position.²⁰ Personal moral agents remain free to pick whatever path they want to follow through this system of restrictions, enablements, and incentives, but they also must reckon with the fact that some pathways will generate rewards while others will introduce costs. Thus, a new tenure track professor at a research university remains free to decide to focus on teaching above all else, but they will surely pay a price for the lack of publications when senior colleagues on the tenure committee review their CV. In this way, “persons retain their freedom . . . [but] that freedom is exercised within constraints that make some choices more costly than others.”²¹ As a result, “conscious human persons [always] make decisions in light of those restrictions, enablements, and incentives—decisions that might be quite different had this person been facing different restrictions, enablements, or incentives.”²²

Here then is an account of the causal power of social structures that can make sense of the magisterium’s own acknowledgment that social difficulties affect the reception of Catholic teachings on birth control. What Finn’s research establishes is not simply the commonsense assertion that people in different circumstances often make different decisions, but the plausible expectation that the *same person* will likely pursue different choices depending on the restrictions, enablements, and incentives presented to them at the time. The Catholic Church’s teachings on sexual ethics, particularly its teachings on contraception, therefore, cannot be separated from Catholicism’s social ethics because Catholics must account for the ways in which social

¹⁸ Finn, “What Is a Sinful Social Structure?” 151.

¹⁹ Finn, “What Is a Sinful Social Structure?” 152–53.

²⁰ Finn, “What Is a Sinful Social Structure?” 151.

²¹ Finn, “What Is a Sinful Social Structure?” 152.

²² Finn, “What Is a Sinful Social Structure?” 151.

structures can shape not only the appeal of Catholic moral norms but also the apparent feasibility of following them. For some Catholics, the enablements and incentives accompanying their social position will make practicing NFP a straightforward choice, but for others, the restrictions connected to their social positions might make a rejection of artificial forms of birth control appear prohibitively costly in much more than an economic sense. As free agents, the couples in both contexts are always capable of choosing to follow the magisterium's teachings; the structural forces they experience are non-deterministic and therefore can never be said to "make" someone violate moral norms. Yet the structural forces do have a real impact, and as a result the path to the observance of magisterial norms is not identical in both cases. To simply expect everyone to hew to the same standard, when some are effectively rewarded for that decision by their social context while others can do so only at great cost due to theirs, is not simply unrealistic but also downright callous.

Given these factors, the Catholic conversation around contraception needs to account for the larger social structures facilitating and frustrating the observance of the magisterium's teachings. Others, especially theologians, have called for this kind of recognition before, but almost always by appealing to the distinctiveness of individual experiences to suggest that agents ought to be given greater discretion in their personal moral discernment.²³ By employing the lens of structural influence that emerges from the recent research on structural sin, however, we can shift the conversation in two important ways. First, we can appreciate how the challenges, when they are felt, are not just the isolated experiences of individual agents, but are often reflective of much larger structural forces that create broadly shared constraints on moral agency. This can helpfully promote a more compassionate, pastoral approach to the challenges of practicing the Catholic Church's vision for marital sexuality—an approach that more closely aligns with Pope Francis's call to embrace "the way of mercy."²⁴ Second, and relatedly, we can state emphatically that the responsibility for addressing the gap between theoretical teaching and concrete practice does not fall on a single couple alone but must be shared by the whole church, as the people of God, so that the costs of following the official

²³ See, for example, Cristina L.H. Traina, "Papal Ideals, Marital Realities: One View from the Ground," in *Sexual Diversity and Catholicism: Toward the Development of Moral Theology*, ed. Patricia B. Jung and Joseph Coray (Collegeville, MN: Liturgical Press, 2001), 269–88; and Florence Caffrey Bourq, "Multi-Dimensional Marriage Vocations and Responsible Parenthood," in *Leaving and Coming Home: New Wineskins for Catholic Sexual Ethics*, ed. David Cloutier (Eugene, OR: Cascade Books, 2010), 147–72.

²⁴ Francis, *Amoris Laetitia* (March 19, 2016), §296, http://www.vatican.va/content/dam/francesco/pdf/apost_exhortations/documents/papa-francesco_esortazione-ap_20160319_amoris-laetitia_en.pdf.

prescriptions are no longer uniquely burdensome to those who occupy certain social positions while all but nonexistent for those who have the luxury of privilege.

The only way to make these shifts, however, is to appreciate the specific restrictions, enablements, and incentives that shape decisions about birth control in real-life contexts. To get a better sense of these factors, the second section now turns to two Catholic women's accounts of their own experiences with NFP to identify the social structures influencing their moral discernment. As noted at the outset, these accounts reflect the situation of Catholicism in the United States, where the use of NFP is far less common than in other nations.²⁵ This outlier status, however, makes the United States a particularly relevant starting point for the structural analysis advocated in this article, for one way of accounting for the discrepancies is by attending to the structural forces that unevenly create burdens and opportunities for women in the United States.

Experiential Evidence: Two Illustrations of Structural Influence

For our qualitative analysis, we rely on the accounts of two women, Kendra and "GS," who navigated the practice of NFP with their husbands for years before ultimately deciding to abandon it.²⁶ Their accounts come from two different blogs and are part of a larger phenomenon of Catholic couples, and especially Catholic women, sharing their experiences with the challenges of NFP via internet forums, typically out of a desire to portray a more "realistic" sense of what NFP looks like for real practioners of it. In keeping with the ethnographical turn in theological ethics, we treat each case study as a Catholic cultural artifact, delving into each text in some detail so as to arrive at a clearer sense of the structural obstacles and supports influencing their

²⁵ According to research on fertility-awareness based methods, such as NFP, upward of 20 percent of couples in other nations use fertility-based methods for family planning. Estimates for US rates vary from 1 to 4 percent. Stephen R. Pallone and George R. Bergus, "Fertility Awareness-Based Methods: Another Option for Family Planning," *Journal of the American Board of Family Medicine* 22, no. 2 (March–April 2009): 147–57, at 149; Rubio, "Beyond the Liberal/Conservative Divide on Contraception," 274n22; "Guttmacher Statistics on Catholic Women's Contraceptive Use," *Guttmacher Institute*, February 2012, <https://www.guttmacher.org/article/2012/02/guttmacher-statistic-catholic-womens-contraceptive-use#:~:text=Only%201%25%20of%20all%20women,sanctioned%20by%20the%20Catholic%20hierarchy>.

²⁶ In the original article, "GS" is offered as the only pseudonym for the woman whose experiences are shared in the blog post. To avoid any confusion with the Second Vatican Council's *Pastoral Constitution on the Church in the Modern World* (*Gaudium et Spes*), all references to the conciliar text in this present article—which are exclusively in the notes—will be spelled out in full so that the original pseudonym can be preserved.

decisions. As scholars championing the application of ethnographic insights to theological ethics have maintained, “in order to have anything like generalized claims of what ought to be, Christian theologians and ethicists ought to start with the particular as integral to their methods of inquiry. In other words, before such scholars can state what is normative, they need to cultivate a ‘thick description’ (Geertz) of what is real to and within concrete congregations and communities.”²⁷ Certainly, one way to answer this call is to undertake firsthand ethnographic research, as an increasing number of theological ethicists have done.²⁸

Part of what we want to show here is that the instincts animating the ethnographic turn are relevant even for those theological ethicists and moral theologians who do not, or cannot, conduct their own ethnographies. By viewing personal narratives as worthy sources for theological and ethical reflection, theological ethicists can employ the same “empathetic listening . . . [that] asks, ‘what is going on here?’” and which “can situate Catholic ethics in the complex contexts of the everyday person’s struggles of Christian discipleship.”²⁹ Although a detailed view of these struggles is valuable for Catholic theological ethics in general—especially in light of Pope Francis’s call for a model of moral theology that is oriented toward accompaniment—it is even more vital for the questions surrounding sexual ethics at the heart of this article.³⁰ Broader numbers and aggregate data will tell only one part of the story behind the (globally) atypical family planning practices of US Catholics but, to discern what is really going on here, we need to spend time with the “thick” descriptions of personal accounts and analyze them carefully.

Motivated by these methodological considerations, we prioritize depth over breadth in this section to achieve the sustained engagement with the

²⁷ Christian Scharen and Aana Marie Vigen, “The Ethnographic Turn in Theology and Ethics,” in *Ethnography as Christian Theology and Ethics*, ed. Christian Scharen and Aana Marie Vigen (New York: Continuum, 2011), 28–46, at 28, quoting Clifford Geertz, *The Interpretation of Culture* (New York: Basic Books, 1973).

²⁸ See, for example, Emily Reimer-Barry, *Catholic Theology of Marriage in the Era of HIV and AIDS: Marriage for Life* (Lanham, MD: Lexington Books, 2015); Todd David Whitmore, “Crossing the Road: The Case for Ethnographic Fieldwork in Christian Ethics,” *Journal of the Society of Christian Ethics* 27, no. 2 (fall/winter 2007): 273–94; Lorraine Cuddeback-Gedeon, *The Work of Inclusion: An Ethnography of Grace, Sin, and Intellectual Disability* (New York: T&T Clark, 2023).

²⁹ Emily Reimer-Barry, “The Listening Church: How Ethnography Can Transform Catholic Ethics,” in Scharen and Vigen, *Ethnography as Christian Theology and Ethics*, 97–117, at 99.

³⁰ For Francis’s vision for moral theology, see Francis, *Amoris Laetitia*, §311; see also, Conor M. Kelly, “The Role of the Moral Theologian in the Church: A Proposal in Light of *Amoris Laetitia*,” *Theological Studies* 77, no. 4 (December 2016): 922–48.

particular that can lead to a richer understanding of the real context in which ethical norms are encountered and received. Other women's descriptions of their own challenges with NFP, and the limited quantitative data discussed following, indicate that the two accounts we examine are not extreme outliers, but our point in this section is not to suggest that these specific accounts are representative of every Catholic couple's experience with NFP.³¹ Rather, informed by the Catholic vision of the common good as "the good of all and of *each individual*"³² and inspired by St. Paul's admonition that "if one member [of the Body of Christ] suffers, all suffer together with it" (1 Corinthians 12:26), we believe that these experiences of genuine anguish can stand on their own as a sufficient reminder of the collective responsibility all Catholics must bear to address the structural challenges inhibiting the moral agency of their brothers and sisters, even if others have different experiences.

The two women whose stories are discussed in this section adopted similar dispositions. Both were Catholics who began their married lives committed to the Catholic Church's teaching prohibiting artificial forms of birth control. Both had significant reasons for postponing childbirth, and so each intended to use NFP as a means of practicing the "responsible parenthood" that led them to "decide not to have additional children" immediately.³³ The difficulties of observing periodic abstinence as their sole means of postponing childbirth, however, ultimately led both women to "quit NFP," albeit in two different directions: Kendra resigned herself to an unrestricted acceptance of future pregnancies while GS's husband had a vasectomy. Both stories illuminate the structural constraints Catholic couples currently face in their efforts to embrace this dimension of the Catholic Church's moral teachings on

³¹ For additional accounts relaying similar struggles, see Jennifer Fulwiler, "Never Say Never, and Other Thoughts on Having More Kids," personal blog, May 7, 2013, <https://jenniferfulwiler.com/2013/05/never-say-never-and-other-thoughts-on-having-more-kids/>; and the full series on NFP at *Women in Theology*, starting with Katie Grimes, "Women Speak about Natural Family Planning: Tell Us Your Stories," *Women in Theology*, February 19, 2012, <https://womenintheology.org/2012/02/19/women-speak-about-natural-family-planning-tell-us-your-stories/>. Rubio's discussion of Catholics who advocate for the practice of NFP and those who defend the use of artificial contraception both underscores the notion that two stories cannot exhaustively cover the breadth of a diverse tradition and corroborates the assertion that Kendra's and GS's struggles are hardly unique. See again Rubio, "Beyond the Liberal/Conservative Divide on Contraception." With respect to quantitative data, one challenge is the dearth of recent studies on NFP usage. Though well-designed studies occurred the 1980s, interest in this topic seems to have dropped off shortly thereafter.

³² For this Catholic description of the common good, see John Paul II, *Sollicitudo Rei Socialis*, §38 (emphasis added).

³³ Paul VI, *Humanae Vitae*, §10.

marital sexuality and highlight the need for a broader recognition and stronger embrace of the interconnectedness between sexual ethics and social ethics in the Catholic tradition.

Kendra's Story

Kendra is a Catholic blogger whose 2013 blog post “Why I Don’t Do NFP” generated both praise and controversy.³⁴ The blog post details her personal experience following church teaching on natural child spacing throughout the course of her marriage. Kendra writes that she and her soon-to-be husband were excited by the ardent NFP testimonials they heard during their marriage prep classes and anticipated that the practice would benefit their marriage. Upon marrying, Kendra and her husband decided to avoid pregnancy because he was pursuing a graduate degree. In practice, they bent their NFP method’s rules and ended up having two babies back to back. When Kendra looks back at this time in her life, she sees their failure to practice stringent NFP as God’s wisdom prevailing over their human strategizing.³⁵

After giving birth to her second child, Kendra referenced NFP educational material and tried to begin charting again. She was pregnant within two months. After giving birth to her third child, she decided to learn another method because she was getting pregnant outside of the normal fertile window. With this new method, she got pregnant with her fourth child despite having intercourse on a day that was significantly outside her predicted fertile window. Just three days prior to this fourth pregnancy, Kendra and her husband found out that he had stage III melanoma. With the benefit of hindsight, however, she came to conclude that having a “husband with cancer is absolutely the BEST time to be pregnant.”³⁶ Thinking about their growing fourth child gave them a welcome, joyful distraction from worrying about his cancer treatments and, after the baby was born, her husband’s time off work (recovering from treatments) provided meaningful bonding time, resulting in a special connection to their fourth child. When Kendra was in doubt about whether she would lose her husband, she writes that she felt very grateful that if she did lose him, she would have this baby as “one last piece” of him.³⁷ She was glad that NFP had failed to prevent this pregnancy. Number five was on the way soon thereafter, conceived before Kendra’s regular menstrual cycle returned.

³⁴ Kendra Tierney, “Why I Don’t Do NFP,” *Catholic All Year*, May 9, 2013, <https://catholicallyear.com/blog/why-i-dont-do-nfp/>.

³⁵ Tierney, “Why I Don’t Do NFP?”

³⁶ Tierney, “Why I Don’t Do NFP?”

³⁷ Tierney, “Why I Don’t Do NFP?”

Kendra writes that she experienced anger toward NFP only when she began to practice it more effectively. After five children, her husband “really felt that it was important that we figure out how to practice NFP responsibly and well” because he had just sold his company and was looking for another job.³⁸ Kendra began charting carefully and conservatively, adding extra days of abstinence to increase the likelihood of avoiding pregnancy. However, Kendra did not enjoy practicing NFP so stringently. She found it “messy and time consuming and complicated.”³⁹ Furthermore, her conscience bothered her about postponing pregnancy, even for grave reasons. She knew the Catholic Church recognized economic reasons as a legitimate cause to delay childbirth, but she did not like “being in charge of how many babies [she] would have and when [she] would have them.”⁴⁰ After a year of charting in this way, she convinced her husband that NFP was not good for them, and they stopped using NFP altogether.⁴¹ A sixth, seventh, eighth, ninth, and tenth pregnancy followed. “I have no intention of ever practicing NFP again,” she explains. “I’m not good at it, I don’t like it, and I don’t think it’s worth it. . . I really suffered every month of our time doing NFP.”⁴² Kendra believes her and her husband’s decision not to contracept contributed to the happiness of their loving family.

Kendra takes a very positive approach to her journey living with the Catholic Church’s teachings on birth control. She began her marriage committed to avoiding artificial birth control and discovered that many blessings unfolded in her life as a result of that sustained commitment. Like so many other women, however, Kendra found NFP to be difficult in practice. Due to her irregular cycles, Kendra struggled to identify her fertile period for the purpose of abstaining and preventing pregnancy.⁴³ Ultimately, when Kendra and her husband were unable to postpone pregnancies through NFP, they stopped trying to postpone directly and opted to welcome any children as life-enriching blessings.

³⁸ Tierney, “Why I Don’t Do NFP?”

³⁹ Tierney, “Why I Don’t Do NFP?”

⁴⁰ Tierney, “Why I Don’t Do NFP?”

⁴¹ Kendra’s experience is representative insofar as earlier studies on NFP users noted that negative attitudes toward NFP were strongly correlated with couples’ decisions to abandon the practice, although in many of those cases, discontinuance typically meant starting a new form of (artificial) birth control. Kerry J. Daly and Edward S. Herold, “Natural Family Planning: A Comparison on Continuers and Discontinuers,” *Population and Environment* 6, no. 4 (winter 1983): 231–40.

⁴² Tierney, “Why I Don’t Do NFP?”

⁴³ Although the challenges of charting through irregular cycles is not an uncommon experience, one study reported that it “is not an important factor in NFP use” or discontinuance. Daly and Herold, “Natural Family Planning,” 239.

Kendra's experience is, in many ways, a success story. She and her husband had the opportunity to eventually welcome ten children and build a flourishing family.⁴⁴ Her tale is not, however, a success story for NFP. As she makes abundantly clear in her blog post, her happy ending came only as a result of her and her husband's decision to abandon NFP. Kendra and her husband never had to contradict the Catholic Church's teachings on sexual morality, but they did have to relinquish their desire to exert some control over the spacing and number of their children. Happily, they found much joy in this radical openness, but one must not gloss over the fact that this is not actually what the Catholic Church asks of married couples, particularly those who have discerned—as Kendra and her husband did—that they have “serious reasons” to delay childbearing.⁴⁵ They discovered that they were able to make an extraordinary choice, and this allowed them to abide by the moral teachings to which they were committed. That commitment was certainly part of the picture, but a closer look at Kendra's story reveals that there were also larger structural forces undergirding her and her husband's decision to reject NFP in a way that did not violate Catholic sexual ethics. In their case, the specific structural supports of safe housing, an extended family network, and sufficiently lucrative career(s) combined to buoy their commitment to Catholic teaching and create a wide margin for error in the pursuit of responsible parenthood. By attending to these unique features of Kendra's story, we are better able to identify the enablements and incentives that make it more manageable for couples to adhere to Catholicism's ban on artificial forms of birth control.

First, safe housing and a supportive community network significantly eased Kendra and her husband's initial transition to parenthood. At the time, Kendra and her husband were intending to delay pregnancy while he was in graduate school at Stanford University. When things did not go according to plan and they conceived, Kendra left her job as a flight instructor to take care of their son.⁴⁶ Their finances at the time did not leave enormous flexibility, but they were able to live in family housing on Stanford's campus. Thus, Kendra became a mother in a safe, supportive environment surrounded by other moms and families with small children. This not only helped with her own transition to full-time parenting but also gave her and her family considerable stability.⁴⁷ Significantly, she only had access to this housing and its

⁴⁴ Kendra Tierney, “About,” *Catholic All Year*, 2020, <https://catholicallyear.com/about>.

⁴⁵ Paul VI, *Humanae Vitae*, §10.

⁴⁶ Kendra Tierney, “A Vocation to Motherhood,” *Catholic All Year*, February 18, 2013, <https://catholicallyear.com/blog/a-vocation-to-motherhood/>.

⁴⁷ Kendra Tierney, “Parenting with Authority,” *Catholic All Year*, March 5, 2013, <https://catholicallyear.com/blog/parenting-with-authority/>.

unique benefits as a result of her husband's social position at the time. He was a graduate student, enrolled in one of the richest universities in the United States, and this social position created a distinct relationship with Stanford and its subsidiary departments responsible for student well-being. The university had every reason to make housing as attractive as possible for its students because the strongest universities are often competing for the strongest students, and cost of living as well as a safe environment can be a valuable recruitment tool.⁴⁸

By virtue of her husband's social position as a graduate student who successfully secured admission to one of these topflight schools, Kendra had a unique structural support that is not widely available to first-time mothers in the United States.⁴⁹ Although it certainly did not transform parenthood into an easy task, the safe and secure housing environment removed one major anxiety, freeing Kendra and her husband to welcome their initial unplanned pregnancy even more fully as a gift from God. In this way, housing access cushioned their experience with the unpredictability of NFP and thus became an important enablement supporting their subsequent decision to abandon NFP altogether in favor of an approach to responsible parenthood that sought no direct limits on the number or spacing of their children.

The second structural support enabling Kendra and her husband's choice was a highly involved extended family network. Kendra writes that she "needed all the help [she] could get" as a new mother, and she indicates that she received a great deal of that help not only from her husband but also from other family members, particularly her mother and mother-in-law.⁵⁰ This is not surprising, as anthropologists argue that the successful evolution of humans depended on a network of "alloparents"—people who provide infant care but who are not an infant's immediate parents—to ensure comprehensive care for babies without completely exhausting a mother's or father's physical and emotional energies. Shaped by this legacy, human babies even today demand more than an individual parent or set of two parents can be

⁴⁸ Seb Murray, "Business Schools Fight to Lure the Best Students," *Business Because*, August 17, 2014, <https://www.businessbecause.com/news/other-masters/2736/business-schools-fight-to-lure-the-best-students>.

⁴⁹ Outside the unique context of one of the nation's wealthiest private universities, subsidized housing through the US government is available for only approximately one-third of the households who qualify. Additionally, as we discuss following, the subsidized housing that is available is often inadequate for structural reasons. National Low Income Housing Coalition, "The Gap: A Shortage of Affordable Rental Homes," March 2023, <https://nlihc.org/gap>.

⁵⁰ Tierney, "Why I Don't Do NFP?"

expected to provide.⁵¹ Kendra, like all new parents quickly discovered this truth, but unlike many of her peers in Western nations like the United States, she also found that she had the supports to overcome this challenge: her mother and her mother-in-law offered precisely the alloparenting she and her baby needed to thrive.⁵² Without this structure, Kendra and her husband likely could have found other people to augment their own parenting, but in the US context, this almost certainly would have involved market exchange, either through a babysitter, nanny, daycare, or some combination thereof. Given the dramatic expense of childcare, the ready provision of care through Kendra's extended family network becomes a clear structural enablement facilitating her adherence to the Catholic Church's prohibition against artificial forms of birth control even when the form of NFP she was using failed.⁵³

Third, Kendra acknowledges that she and her husband benefitted from considerable economic security. Although she does not specify her family's yearly income or her husband's salary, she does mention that he was in the Marines, earned a graduate business degree from Stanford, and created a business successful enough to sell, all of which indicate a certain amount of financial stability.⁵⁴ In addition, Kendra notes that despite giving up paid employment when she became a mother, she has since been able to work successfully as a writer, generating additional income for her family.⁵⁵ In response to one reader who commented about the challenging financial struggles many couples have to face when discerning whether they can accept unreliability in their practice of NFP, Kendra explained that she would be willing to make any number of financial sacrifices in order to have a large family, but also indicated that she was quite fortunate that she did not have to do so.⁵⁶ None of this is to say that her journey has been easy, but it is to acknowledge (as she does) that Kendra and her husband

⁵¹ Sarah Blaffer Hrdy, *Mothers and Others: The Evolutionary Origins of Mutual Understandings* (Cambridge, MA: Harvard University Press, 2009), 65–109.

⁵² For more on how Western parenting norms depart from what researchers understand to be evolutionary parenting norms, see Michaela Doucleff, *Hunt, Gather, Parent: What Ancient Cultures Can Teach Us about the Lost Art of Raising Happy, Helpful Little Humans* (New York: Avid Reader Press, 2021), 24–25.

⁵³ For one account of the relative costs of childcare, see Jody Heymann, *The Widening Gap: Why America's Working Families Are in Jeopardy and What Can Be Done about It* (New York: Basic Books, 2000), 48.

⁵⁴ Tierney, "Why I Don't Do NFP."

⁵⁵ Kendra Tierney, "Women's Work: Do I Ever Feel Guilty about Not 'Using' My College Education?," *Catholic All Year*, January 14, 2016, <https://catholicallyear.com/blog/womens-work/>.

⁵⁶ Tierney, "Why I Don't Do NFP?"

had a significant degree of economic security undergirding their decision to abandon NFP without relying on artificial birth control as a replacement. In this way, Kendra's experience reveals the well-documented fact that access to wealth expands one's opportunities, underscoring the reality that class functions as a social structure with a meaningful impact on moral agency.⁵⁷ Kendra's story thus serves as a reminder that Catholic moral theology, especially in its teachings on sexual ethics, needs to account more fully for this dimension.

Ultimately, the financial stability provided by Kendra's husband's career combined with her extended family network and helpful housing resources supported her and her husband's desire to adhere to Catholic teaching. This is not to suggest that her journey was simple, straightforward, or predetermined. Kendra faced significant hurdles to using NFP instead of artificial birth control to postpone pregnancy. She had to contend with irregular cycles and the difficulty of prolonged abstinence that accompanies them. She also supported her husband through cancer treatments while raising small children. Her posture through these ordeals was one of trust in the providence of God, and this is important because another person with the same structural supports could just as easily have made a different decision. Such an acknowledgment, however, does not remove the fact that implicit in her story are significant enablements emerging from her social position that facilitated her commitment to following church teaching. These enablements did not cause her decision—she and her husband still needed to exert their own moral agency—but they did affect her perception of the possibility of adhering to Catholic teaching even when NFP did not work well.

By making these supports explicit, we arrive at a more accurate picture of the challenges involved in embracing the Catholic Church's ban on artificial forms of birth control, particularly in a US context. Such perspective is important because it highlights the peculiarity of Kendra's experience, allowing the people of God to avoid idealizing her story in a way that further marginalizes those who struggle to follow *Humanae Vitae's* challenging teachings without the structural supports Kendra and her husband enjoyed. It is not merely incidental that couples who use NFP in the United States typically have higher levels of educational attainment and higher incomes than those who abandon

⁵⁷ For one discussion of the structural impact of wealth and class, see Heather Beth Johnson, *The American Dream and the Power of Wealth: Choosing Schools and Inheriting Inequality in the Land of Opportunity*, 2nd ed. (New York: Routledge, 2015), 124–54; for the effects on moral agency, see Kate Ward, *Wealth, Virtue, and Moral Luck: Christian Ethics in an Age of Inequality* (Washington, DC: Georgetown University Press, 2021).

the practice and those who never started it.⁵⁸ A careful structural analysis thus reveals that there can be a fine line between God's providence and a person's privilege and asks the church to consider what it would mean to promote Catholic morality in a way that encourages reliance on the former without presuming the existence of the latter. Our second story underscores the importance of this distinction and demonstrates that the church still has room to grow in its understanding of the ways its current teachings on sexual ethics can indeed depend on both.

GS's Story

Much like Kendra's account, GS's story became publicly available through a blog post, but in this case GS submitted her story to a series on women's experience with NFP created by the *Women in Theology* blog.⁵⁹ Given the contentious nature of the topic and the controversies notoriously fomented by online comment sections, GS's story was published on the website with simply her (potentially pseudonymous) initials, allowing her to speak more openly about her "real-life experiences with NFP without fear of getting a public internet pounding."⁶⁰ Her post provides a detailed account of one couple's painful journey to contraception. Like Kendra's story, GS's account reveals the close connection between social structures and sexual ethics, but from the flipside, illustrating how difficult it can be to adhere to the Catholic Church's official position on birth control in the absence of structural supports.

GS and her husband decided after marrying to use NFP "not to delay pregnancy, but," in GS's terms, "just to learn about my body."⁶¹ GS had trouble getting accurate basal body temperature readings and, like Kendra, she and her husband soon dropped NFP altogether with plans to accept whatever children God gave them. GS became pregnant within the first year of their marriage. After giving birth, she suffered postpartum depression. Relying on breastfeeding to prevent pregnancy, she was pregnant again by the time her infant was six months old. Following the birth of her second child, GS's postpartum depression and stress increased, and she and her husband took classes to learn NFP in earnest. GS began charting and once again found her cycles to

⁵⁸ Andrea M. Bertotti and Sinead M. Christensen, "Comparing Current, Former, and Never Users of Natural Family Planning: An Analysis of Demographic, Socioeconomic, and Attitudinal Variables," *Linacre Quarterly* 79, no. 4 (2012): 474-86.

⁵⁹ Grimes, "Women Speak about Natural Family Planning: Tell Us Your Story."

⁶⁰ Katie Grimes, "Women Speak about Natural Family Planning: GS's Story," *Women in Theology*, February 25, 2012, <https://womenintheology.org/2012/02/25/women-speak-about-natural-family-planning-gss-story/>.

⁶¹ Grimes, "Women Speak about Natural Family Planning: GS's Story."

be irregular and confusing. As a result, she and her husband “tossed the charts, and were pregnant again within three weeks. I miscarried. Six months later, we were pregnant again. I miscarried.”⁶²

After giving birth to two children and suffering two miscarriages, GS and her husband decided to learn the Creighton method. They enlisted the help of a Creighton teacher, yet her charts continued to be unreadable. After six abstinence-filled months, they conceived again, and GS carried the child to term. Postpartum depression and financial instability followed. When her third living child was three months old, GS found out she was pregnant. They were in the middle of a major move for the sake of a low-paying job and were in serious financial straits. By that summer, they had become homeless. GS and her children moved one thousand miles away to stay with relatives while her husband worked for low wages. When the family reunited, it was in low-income housing. GS decided to return to school to increase her earning power because “we were on WIC, and I was determined not to become pregnant again because I needed to get that degree to get us out of the low-income housing. Our kids were being exposed to things we never wanted them to be.”⁶³

Still, the couple remained committed to avoiding artificial birth control through the practice of NFP. They worked with another Creighton teacher in an attempt to decipher GS’s confusing cycles. GS’s cycles were very long, requiring many weeks of abstinence and adding strains to their marriage that highlighted the anxieties around pregnancy:

One particularly long cycle, we had abstained for six weeks, and I was certain we were finally safe. We made love that night, and—surprise!—two weeks later I had a positive pregnancy test. I cried for two days straight. Several weeks later, I miscarried. I felt nothing but relief and joy—and guilt and sadness for feeling that way.⁶⁴

Then, GS was diagnosed with a serious chronic illness. The couple continued to use the Creighton method, following it strictly because GS now required medicine to manage her illness, and doctors had stressed the importance of avoiding pregnancy while taking those medications. GS and her husband were able to avoid pregnancy for two years in this manner while she progressed through her degree program, but they conceived again and she gave birth to a fifth child near the end of her studies. She was hospitalized soon thereafter as a result of declining health due to caring for a newborn while doing clinical

⁶² Grimes, “Women Speak about Natural Family Planning: GS’s Story.”

⁶³ Grimes, “Women Speak about Natural Family Planning: GS’s Story.”

⁶⁴ Grimes, “Women Speak about Natural Family Planning: GS’s Story.”

rotations and managing a chronic illness. The couple continued NFP but “always with long periods of abstinence and frequent falls into ‘sin.’”⁶⁵

GS grew increasingly angry with God, the church, and NFP. Though she began a successful career, she “found it harder and harder to believe that the life we were living as a couple was the kind of life God intended for couples to live.”⁶⁶ She experienced another unintended pregnancy and another miscarriage. A sixth unintended pregnancy was carried to term, greatly complicated by her medical condition. After the birth of their sixth child, GS’s husband informed her that he was having a vasectomy. They talked at length about the morality of the procedure and GS repeatedly emphasized she did not want him to feel pressured into violating church teaching. He decided to have the procedure, confess it, and abandon himself to God’s mercy. GS confessed as well, stating her only reason for confession was fear of hell. She was absolved and told to be at peace. GS concludes: “I have nothing but admiration for those couples who really do love NFP and find it wonderful and healthy for their relationships. I wanted and planned to be just like them! But I failed utterly in that department and will have to face God for it on judgment day.”⁶⁷

GS’s commitment to avoiding artificial birth control was frustrated by restrictive forces beyond her control.⁶⁸ Consequently, when symptothermal NFP failed for GS, as it did for Kendra, and she likewise found it necessary to accept more unexpected pregnancies, she became overwhelmed by the hardships accompanying her choice instead of discovering the joy Kendra and her husband found. The difference is, in large part, a result of Kendra’s and GS’s differing social positions, which afforded Kendra access to certain enablements

⁶⁵ Grimes, “Women Speak about Natural Family Planning: GS’s Story.”

⁶⁶ Grimes, “Women Speak about Natural Family Planning: GS’s Story.”

⁶⁷ Grimes, “Women Speak about Natural Family Planning: GS’s Story.”

⁶⁸ Significantly, there are important theological resources that could have been helpful for GS and her husband as they navigated this challenging journey with NFP. Some theologians have pointed to constraints like the ones GS experienced as sufficient evidence of the inadequacy of the magisterial teaching on birth control. Others, without explicitly rejecting this teaching, stress that these challenges diminish one’s responsibility to adhere to the teaching in practice, without introducing any form of sin into the equation. See, for example, Traina, “Papal Ideals, Marital Realities,” 275–80, 282–84; Joseph Selling, “Contraception and Sin,” in *Moral Theology for the Twenty-First Century: Essays in Celebration of Kevin Kelly*, ed. Bernard Hoose, Julie Clague, and Gerard Mannion (New York: T&T Clark, 2008), 113–19; and the discussion of gradualism in relation to the reception of *Humanae Vitae* in James Keenan, *A History of Catholic Moral Theology in the Twentieth Century: From Confessing Sins to Liberating Consciences* (New York: Continuum International Publishing, 2010), 146–51. For context on this application of gradualism, see Jason King, “Which Gradualism? Whose Relationships?,” *Horizons* 43, no. 1 (June 2016): 86–105.

and left GS with challenging restrictions. Lacking the social enablements that Kendra enjoyed, GS and her husband ultimately chose to stop living out their faith in the way they had hoped. By evaluating the same three structural supports that served as enablements in Kendra's case, one can more clearly see in GS's story how the absence of these structures can turn into a significant restriction affecting moral agency. Revealing the inverse of Kendra's experience, GS's account thus bolsters the argument that Catholic sexual ethics—particularly the discussion of birth control—must better account for the social dimensions shaping the laity's ability to flourish while following official teaching.

To begin, GS's story demonstrates that she and her husband had legitimate reasons to postpone pregnancy. When they got married, they were open to a pregnancy as Catholic teaching requires and the matrimonial rite reminds.⁶⁹ In fact, they were not initially seeking to delay childbirth at all, so the difficulties of NFP were minor inconveniences because they “just figured they would accept children as they came.”⁷⁰ GS suffered postpartum depression, however, leading her and her husband to determine that they needed to be much more vigilant about avoiding pregnancy. This determination is in line with the magisterium's description of the need to evaluate not only “physical, economic . . . and social conditions” but also “psychological” ones in a couple's discernment of their call to responsible parenthood.⁷¹ Later, when GS was subsequently diagnosed with a chronic illness that required medical management and ultimately hospitalization, it added another rationale for delaying pregnancy that likewise fit clearly within the magisterium's parameters. When GS and her husband sought to use NFP as a means of postponing conception, then, they were taking the demands of responsible parenthood seriously and showing deep respect for the Catholic Church's official teachings. Their efforts to follow this plan, however, were thwarted by significant structural restrictions that made it much more difficult for GS and her husband to take Kendra's approach of abandoning NFP and forgoing intentional efforts to space children.

⁶⁹ “Rite of Marriage,” §4, see also §25, in *The Rites of the Catholic Church*, 2 vols. (Collegeville, MN: Liturgical Press, 1990), 1:720, 1:726. The English translation of the “Rite of Marriage” has since been updated. For the relevant sections in the new translation, see United States Conference of Catholic Bishops, *The Order of Celebrating Matrimony* (Totowa, NJ: Catholic Book Publishing, 2016), §§3 and 60.

⁷⁰ Grimes, “Women Speak about Natural Family Planning: GS's Story.” This is a common feature of couples' decisions around NFP, as one study noted that NFP use is more common among “those who are delaying rather than preventing a pregnancy and who would not be upset with an unplanned pregnancy.” Daly and Herold, “Natural Family Planning,” 239.

⁷¹ Paul VI, *Humanae Vitae*, §10.

First, GS indicates that adequate housing was a true obstacle to accepting a growing family. The issue was not a matter of space but safety, most especially the psychological safety that allows children to preserve their innocence. This is the challenge contained in GS's concern that her children "were being exposed to things we never wanted them to [see]" while they were living in low-income housing.⁷² For parents, the desire to shield one's children from psychological trauma is a natural and consequential instinct. Child development research indicates "that prolonged exposure to traumatic events can be toxic to the developing brain and lead to lifelong problems, including difficulty learning, depressive disorders, behavioral dysregulation, psychosis, and physical health problems (e.g., alcoholism and drug abuse)."⁷³ Significantly, "the first few years of life are a period in which young children are particularly susceptible to trauma" because the negative effects can compound over time.⁷⁴ A stable homelife and secure environment are thus essential to the healthy development of children, but GS and her husband discovered that access to this basic need varies greatly by social position in the United States. Obviously, they had access to government-subsidized housing, which should have been an effective structural support for young families. The problem, however, is that this kind of subsidized housing has not been crafted to serve as an enablement.

Due to policy decisions made in the 1950s and 1960s (many of which were tainted by reactionary attempts to enforce racial segregation), public housing in the United States has been intentionally restricted in a fashion that "transformed public housing into a warehousing system for the poor" without the communal support "to make public housing a decent place to live."⁷⁵ GS and her husband experienced this legacy of disinvestment, and their access to public housing became a restriction constraining their agency rather than

⁷² Grimes, "Women Speak about Natural Family Planning: GS's Story." Safety violations in government-subsidized housing are regularly identified by the government's own inspectors at an alarming rate. Jeff Donn and Holbrook Mohr, "Health and Safety Conditions Worsen in US-Subsidized Housing," *Associated Press*, April 9, 2019, <https://apnews.com/article/health-north-america-us-news-business-ms-state-wire-f21ef3620f6543e0916fcb731edb276c>. We proceed with the assumption that GS refers to legitimate safety concerns and note a number of reasons that, sadly, this would not be surprising in light of the current state of subsidized housing in the United States.

⁷³ Jen Nietzel, "Addressing Trauma in Early Childhood Classrooms: Strategies and Practices for Success," *Young Exceptional Children* 23, no. 3 (September 2002), 147–68 at 158.

⁷⁴ Nietzel, "Addressing Trauma in Early Childhood Classrooms."

⁷⁵ Richard Rothstein, *The Color of Law: A Forgotten History of How Our Government Segregated America* (New York: Liverlight Publishing, 2017), 37, see also 17–37 more broadly.

an enablement supporting it. The contrast with Kendra and her husband, who benefitted from a different kind of subsidized housing, can be traced to the causal power found in the relation between social positions. Occupying the social position of a graduate student at an elite school, Kendra's husband was understood to have "earned" his access to graduate student housing, which provided a safe and secure environment complete with a supportive community to facilitate his and Kendra's transition to parenthood. GS and her husband, meanwhile, languished in the type of subsidized housing that most communities only tolerate under the assumption that the people whose need is dire enough to rely on a government "handout" should be grateful for whatever they can get. Heavily coded in relation to larger debates about the "deserving" and the "undeserving" poor, Kendra's and GS's opposite experiences with different forms of subsidized housing reveal the influence of social position on access to the safe and secure environment children need to develop well.⁷⁶ The ability to provide this support for a newborn is thus not merely a matter of personal decisions over which an individual agent has complete control; there is a decidedly *structural* dimension that affects the range of options realistically open to a couple discerning responsible parenthood.

Second, GS and her husband did not have the support of an extended family network in their immediate geographic vicinity. Although this might appear to reflect an unfortunate accident of circumstance, there are structural dimensions to this restriction as well. GS and her husband had an invested extended family network, but they could not rely upon it because their pursuit of employment opportunities removed them from their circle of kin. The need to make this kind of move, though, reflects broader structural trends. Specifically, the increasingly neoliberal nature of US capitalism has made jobs ever more contingent, leaving economists to argue that geographic mobility is the key to economic opportunity and a quintessential element of the US economic model.⁷⁷ In this context, it is not surprising that GS and her husband made a dramatic move even though it severed their family connections. When they discovered that even this move did not provide the economic security they sought, GS and her children moved again to seek family support, separating a wife from her husband and children from their father in a manner that makes it very difficult for parents to fulfill their obligations to

⁷⁶ For the implicit assumptions about the moral worthiness of recipients built into different forms of government assistance in the United States, see Thomas J. Massaro, *United States Welfare Policy: A Catholic Response* (Washington, DC: Georgetown University Press, 2007), 54–55, 58.

⁷⁷ Enrico Moretti, *The New Geography of Jobs* (New York: Houghton Mifflin Harcourt, 2013), 156.

cultivate a “domestic church” through their “togetherness.”⁷⁸ The lack of easy access to familial support—a challenge affected by structural features of the US economic model—thus added considerable stress to GS’s marriage, limiting her and her husband’s ability to feel as though they could manage another unexpected pregnancy should NFP continue to fail.

Finally, GS and her husband found that their structural restrictions were exacerbated by their lack of financial resources. Without the graduate degree from an elite institution that aided Kendra’s husband access to a lucrative career path, GS and her husband struggled financially, especially during the years when they first encountered the limits of NFP. GS was thus motivated to return to school in the hopes of gaining the credentials—and social position—she needed to secure a higher-paying job and accompanying pathway out of low-income housing for her growing family. Given that wealth and income are closely tied to ancestry in the United States today, there are certainly structural features to GS’s experience of limited economic opportunity.⁷⁹ At the same time, GS’s story reveals how the absence of wealth is itself a structural force defining the relation between social positions in a way that leaves those who are poorer with fewer opportunities than those who are richer, particularly when it comes to the expensive task of raising children in the United States.⁸⁰ For GS and her husband, limited financial resources were thus a powerful restriction limiting their confidence in their ability to manage the unpredictability that they had found so unavoidable with NFP. It was therefore an influential factor in their determination that they had no viable options apart from violating the Catholic Church’s prohibition on artificial forms of birth control.

Together with Kendra’s story, GS’s experience demonstrates that structural factors can dramatically influence a couple’s journey with NFP and, by extension, their fidelity to Catholic sexual ethics.⁸¹ Especially when the practice of

⁷⁸ John Paul II, *Familiaris Consortio* §51.

⁷⁹ A 2012 report on economic mobility in the United States noted that “Americans raised at the bottom and top of the family income ladder are likely to remain there as adults, a phenomenon known as ‘stickiness at the ends.’” Pew Charitable Trusts, *Pursuing the American Dream: Economic Mobility across Generations* (Washington, DC: Pew Charitable Trusts, 2012), 2, https://www.pewtrusts.org/~media/legacy/uploadedfiles/pes_assets/2012/pursuingamericandreampdf.pdf.

⁸⁰ The US Department of Agriculture estimated that the cost to raise a child born in 2015 through age seventeen in a “middle-income” family was \$233,610, *excluding* the cost of college education. Mark Lino, “The Cost of Raising a Child,” *USDA*, February 18, 2020, <https://www.usda.gov/media/blog/2017/01/13/cost-raising-child>.

⁸¹ These are, of course, not the only lessons one can take from Kendra’s and GS’s accounts. Their experiences, for instance, can be read as datapoints for ongoing theological discussions about the extent to which NFP supports the unitive dimensions of marital

NFP itself becomes difficult to maintain—as it often does for even the most dedicated and well-intentioned couples—the extent to which one’s social position affords access to the structural supports of safe housing, an extended family network, and financial security can have a dramatic effect on whether adherence to magisterial teaching appears as a viable option. For those, like Kendra, who are fortunate enough to experience these structural supports as enablements that will soften the challenges of raising additional children, alignment with Catholic sexual ethics will seem like a feasible or even attractive possibility. For those, like GS, who experience the lack of these structural supports as a genuine restriction, however, the church’s vision will look far less attainable. Of course, this does not diminish the role free will plays in the process. Moral agents benefitting from structural enablements could still choose to reject Catholic teaching, and those who face structural restrictions could still find ways to embrace it. Nevertheless, one set of circumstances supports a couple’s desire to follow the dictates of their faith while the other actively undermines it because the costs of adherence are dramatically different. If the Catholic Church is serious that its teachings represent the “true nature and nobility” of married love,⁸² then the people of God must take it upon themselves to address this gap, for it would be a violation of solidarity and the preferential option for the poor to accept that this holy ideal should be easily accessible only to the privileged few while remaining all but impossible for the marginalized.⁸³ Building on the diverging experiences of Kendra and GS, then, we close with a brief discussion of three structural reforms that might transform some of the current restrictions into genuine enablements for more couples seeking to realize the Catholic Church’s vision of married sexuality. Consistent with Pope Francis’s assertion that pastoral solutions should be tailored to a particular “culture and sensitive to its traditions and local needs,”

sexuality—and the extent to which artificial forms of contraception disrupt it. Other theologians have taken up these questions, so we do not focus on them here. Instead, we emphasize the structural implications of these personal stories because there has, to date, been insufficient attention to the *structural* analysis that connects Catholic sexual ethics and social ethics in an explicit and detailed fashion. For the theological debates around the effects of both NFP and artificial forms of contraception on the unitive ends of marriage, see Richard McCormick, *How Brave a New World: Dilemmas in Bioethics* (Washington, DC: Georgetown University Press, 1981), 431–47; Agneta Sutton, “Couples Practicing Contraception: A Call for Dialogue,” *Marriage, Families, and Spirituality* 20, no. 2 (2014): 260–68.

⁸² Paul VI, *Humanae Vitae*, §8.

⁸³ On the importance of the preferential option for the poor (and some of its links to solidarity) in Catholic social thought, see Thomas J. Massaro, *Living Justice: Catholic Social Teaching in Action*, 2nd classroom ed. (Lanham, MD: Rowman & Littlefield, 2012), 113–16.

these reforms are US-specific, even as they may have practical implications for other contexts.⁸⁴

Structural Reforms: Combining Catholic Social Teaching and Catholic Sexual Ethics

The first reform to explore is one that would address the challenges around housing. Catholic social teaching has long argued that adequate shelter is due, as a matter of justice, to each human person.⁸⁵ This has made housing an essential concern of the state, which must consider access to dignified housing as part of its responsibilities to promote the common good.⁸⁶ As Kendra's and GS's stories indicate, access to safe housing is a serious concern for parents, and lack of adequate housing can negatively affect a couple's openness to NFP. A significant part of the challenge is the lack of affordable housing in the United States, a problem that the US Catholic Bishops highlighted in their 1987 pastoral letter on the US economy and that has only been exacerbated in the intervening years.⁸⁷ As researchers are quick to point out, government policies have a dramatic effect on these shortages.⁸⁸ This fact, combined with Catholicism's vision of the state's responsibilities in relation to

⁸⁴ Francis, *Amoris Laetitia*, §3.

⁸⁵ Leo XIII, *Rerum Novarum* (May 15, 1891), §34, http://www.vatican.va/content/leo-xiii/en/encyclicals/documents/hf_l-xiii_enc_15051891_rerum-novarum.html; *Gaudium et Spes*, §26.

⁸⁶ Leo XIII, *Rerum Novarum*, §34; John XXIII, *Pacem in Terris* (April 11, 1963), §64, http://www.vatican.va/content/john-xxiii/en/encyclicals/documents/hf_j-xxiii_enc_11041963_pacem.html. See also *Sollicitudo Rei Socialis*, §17.

⁸⁷ US Conference of Catholic Bishops, *Economic Justice for All: Pastoral Letter on Catholic Social Teaching and the U.S. Economy* (Washington, DC: United States Conference of Catholic Bishops, 1987), §165. In 2021, the government-backed mortgage giant Freddie Mac estimated that the US housing supply was 3.8 million homes short of the levels required to meet current demand. Nicole Friedman, "U.S. Housing Market is Nearly 4 Million Homes Short of Buyer Demand," *Wall Street Journal*, April 15, 2021, <https://www.wsj.com/articles/u-s-housing-market-is-nearly-4-million-homes-short-of-buyer-demand-11618484400>. Meanwhile, the National Low Income Housing Coalition estimated that the shortage was even more severe for lower-income families looking to rent affordable homes: the country needs an additional 6.8 million affordable rentals to meet the demand of "extremely low-income renters, whose household incomes are at or below the poverty guideline." "The Gap: A Shortage of Affordable Rental Homes," *National Low Income Housing Coalition*, March 2021, <https://reports.nlihc.org/gap>.

⁸⁸ For example, zoning and permitting are major policy hurdles that can make the difference between a crisis in affordable housing and a successful housing system for all. Carolina K. Reid, Carol Galante, and Ashley F. Weinstein-Carnes, "Addressing

housing, gives Catholics every reason to champion policy changes that would redress the housing shortages, shifting the structural restrictions and enablements around housing that currently affect couples' abilities to practice their faith in marital life. One of these changes would be to support zoning updates that would dismantle some of the stringent density restrictions that limit the construction of new homes and rentals in "desirable" areas. As David Cloutier points out, this act of solidarity would be reflective of some of Catholicism's most authoritative teachings on the role of the family in society, and, as we have shown from Kendra's and GS's examples, it would help more Catholic families realize their vocations as well.⁸⁹

On the level of macro policy reforms, Catholics could also advocate for a shift in public housing strategy in the United States. In previous generations, when the nation faced a housing crunch, public housing was deployed as a tool to address the needs of all.⁹⁰ Opposition from real estate lobbyists, however, led to the decision that government involvement in the housing market should be limited to income-restricted projects. As a result, "the condition of public projects rapidly deteriorated, partly because housing authority maintenance workers and their families had to leave the buildings where they worked when their wages [suddenly] made them ineligible to live there."⁹¹ Although a shift toward income-restricted housing might seem consonant with the Catholic Church's promotion of the preferential option for the poor, that principle is grounded in the pursuit of solidarity between the marginalized and those who have more access to a society's resources and advantages.⁹² The history of housing policy in the United States demonstrates that these restrictions have been inimical to that spirit of cooperation and have served instead to further alienate those in poverty. If Catholics were to take the initiative in promoting a return to a public housing strategy that facilitated the integration of low- and middle-income families into middle- and upper-income areas, then, they could have a profound effect on both the

California's Housing Shortage: Lessons from Massachusetts Chapter 40B," *Journal of Affordable Housing and Community Development Law* 25, no. 2 (2017): 241–74.

⁸⁹ David Cloutier, "Wanting 'the Best' for 'Our' Kids: Parenting and Privilege," in *Catholic Perspectives on Sex, Love, and Families*, ed. Jason King and Julie Hanlon Rubio (Collegeville, MN: Liturgical Press, 2020), 259–69 at 265–66.

⁹⁰ "Public housing's original purpose was to give shelter not to those who were too poor to afford it but to those who could afford decent housing but couldn't find it because none was available." Rothstein, *The Color of Law*, 18.

⁹¹ Rothstein, *The Color of Law*, 37.

⁹² Francis, *Evangelii Gaudium* (November 24, 2013), §§197–201, http://www.vatican.va/content/francesco/en/apost_exhortations/documents/papa-francesco_esortazione-ap_20131124_evangelii-gaudium.html.

perception of public housing and the opportunities available to those who live there. This would reflect the true preferential option for the poor advocated in Catholic social teaching and chip away at one of the structural burdens making Catholic sexual ethics appear like it is the exclusive purview of the privileged few.

The second area in which structural reforms could significantly shift couples' perceptions of the viability of Catholic sexual ethics is childcare. For both Kendra and GS, access to some form of support for childcare (specifically, extended family members) was a central deciding factor in their discernment about whether they needed to rely on other forms of contraception after their versions of NFP proved inadequate. Their experiences reflect not only the natural human need for alloparents to support childrearing but also the collapse of the informal community networks that used to provide such assistance. In the United States' increasingly individualistic cultural context, the assumption has become that every parent must forge these bonds for himself or herself, and children now benefit or suffer according to the social and economic capital of their parents and not the resources of their community as a whole.⁹³

For Catholics sincerely concerned about the practical attainability of their church's vision for sexual morality, this uneven situation demands a response. On a personal level, Catholics could look for ways to create new alloparenting opportunities within their existing social networks, thereby taking steps to counteract the disintegration of community bonds with a renewed form of solidarity.⁹⁴ To give just one such example, a babysitting cooperative, or other openness to watching friends' or neighbors' children on a semi-regular basis without the expectation of remuneration, would address the real challenges of childcare while simultaneously reintroducing the Catholic "*principle of generosity* and the logic of gift . . . [in] *normal economic activity*," as Pope Benedict encouraged.⁹⁵ On the social level, meanwhile, Catholics could also respond to this need by appealing to an idea regularly cited in Catholic social teaching: subsidized support for families, which parents could use either to pay for childcare or to free one of the parents to stay at home during those

⁹³ Robert Putnam, *Our Kids: The American Dream in Crisis* (New York: Simon & Schuster, 2015).

⁹⁴ Marcus Mescher, *The Ethics of Encounter: Christian Neighbor Love As a Practice of Solidarity* (Maryknoll, NY: Orbis Books, 2020), 147–54.

⁹⁵ Benedict XVI, *Caritas in Veritate* (June 29, 2009), §36, http://www.vatican.va/content/benedict-xvi/en/encyclicals/documents/hf_ben-xvi_enc_20090629_caritas-in-veritate.html, emphasis in original. This approach has parallels in the vision for an "open" rather than "closed" household in David Matzko McCarthy, *Sex and Love in the Family: A Theology of the Household* (Eugene, OR: Wipf and Stock, 2004), 101–08, 236.

intense infant years.⁹⁶ Although not as radical, because this approach still seeks allopayers through the market, subsidies nevertheless offer an immediate opportunity to find childcare within the existing cultural assumptions and therefore represent an important part of the solution to this second structural obstacle.

The third structural element shaping Kendra's and GS's divergent experiences was access to economic resources. In this area, a policy long-championed by Catholic social teaching—the family living wage—can introduce a new structural enablement with the potential to impact economic security, housing, childcare, and even the effectiveness of NFP itself.⁹⁷ *Laborem Exercens* notes that “work is a condition for making it possible to found a family, since the family requires the means of subsistence which [is normally gained] through work.”⁹⁸ Yet in GS's case, even a cross-country move could not ensure that her husband would find adequate work to support their growing family. This is due to the absence of a “family wage,” which *Laborem Exercens* argues must “suffice for establishing and properly maintaining a family and for providing security for its future.”⁹⁹ Indeed, Catholic social teaching argues that a family wage must provide for more than the everyday necessities of family life. It must also be sufficient to allow the family to build up enough savings to buy property, which will allow the family to preserve its freedom through the stability and resiliency that property ownership brings.¹⁰⁰

Catholic advocacy for a family living wage should focus on making sure that unskilled laborers, the poor, and the working poor have as much access to family life as the members of other social classes. The requirements of justice go beyond the minimum wage necessary for a family's physical survival; Catholics must advocate for a family living wage sufficient to make property ownership a feasible goal for all families. As long as the minimum wage is insufficient to support a family, families like GS's will find the choice to follow

⁹⁶ For the support of this policy in Magisterial texts, see the discussion of “family allowances” in John Paul II, *Laborem Exercens* (September 14, 1981), §19, http://www.vatican.va/content/john-paul-ii/en/encyclicals/documents/hf_jp-ii_enc_14091981_laborem-exercens.html; and the promotion of “social policies which have the family as their principle [sic] object,” in John Paul II, *Centesimus Annus* (May 1, 1991), §49, http://www.vatican.va/content/john-paul-ii/en/encyclicals/documents/hf_jp-ii_enc_01051991_centesimus-annus.html.

⁹⁷ The promotion of a family living wage has been explicit in the papal tradition of Catholic social teaching, beginning with the first social encyclical. Leo XIII, *Rerum Novarum*, §§43–47.

⁹⁸ John Paul II, *Laborem Exercens*, §10.

⁹⁹ John Paul II, *Laborem Exercens*, §19.

¹⁰⁰ Leo XIII, *Rerum Novarum*, §11.

church teaching by forgoing artificial birth control an oppressively burdensome, or even life threatening, decision. A legal minimum wage floor set at the level required to meet the actual needs of raising a family, however, would give all married couples greater freedom to pursue the Catholic vision for married love without the anxieties that often surround the use of NFP when financial resources are tight. If further augmented by the state support for the “remuneration for domestic work” advanced in Catholic social teaching’s promotion of family allowances, the family living wage floor could thus create a significant enablement dismantling the structural stresses that currently leave many Catholic couples questioning their ability to embrace Catholic sexual ethics.¹⁰¹

Finally, an important part of economic security for Catholics seeking to practice NFP is access to the forms of NFP that work best for each particular couple. Both Kendra and GS struggled to track ovulation due to their irregular cycles. Unfortunately for GS, the forms of NFP that are most effective for irregular cycles are also the most expensive.¹⁰² Meanwhile, most health insurance policies are now legally required to cover artificial birth control for free but can choose not to cover the fertility monitors or test strips used in the more high-tech forms of NFP.¹⁰³ Consequently, someone like GS who is experiencing both economic insecurity and irregular cycles will likely find that avoiding artificial birth control becomes prohibitively costly. Thus, economic reforms like a universal family living wage can serve as a structural enablement empowering couples to follow the teachings of their faith in more than one way.¹⁰⁴

¹⁰¹ John Paul II, *Laborem Exercens*, §19.

¹⁰² Simcha Fisher, “Natural Family Planning Can Be Hard and Expensive to Use. Can New Tech Help?,” *America*, January 24, 2020, <https://www.americamagazine.org/faith/2020/01/24/natural-family-planning-can-be-hard-and-expensive-use-can-new-tech-help>. Marquette Method, whose efficacy is 98.4 percent with perfect use, costs about \$45/month, estimated by Vitae Fertility. <https://www.vitae fertility.com/cost-to-practice-marquette-method-nfp/>.

¹⁰³ “Fertility Awareness Methods,” *Bedsider*, https://www.bedsider.org/birth-control/fertility_awareness. Current federal guidelines require insurance policies to cover only “instruction in fertility awareness-based methods” (emphasis added), which can leave individuals to cover the costs of the materials required by certain methods. Notably, prior to 2016, fertility awareness-based methods were not considered part of the required coverage at all. “Facts about Affordable Care Act Implementation Part 54,” *Center for Medicare and Medicaid Services*, July 28, 2022, <https://www.cms.gov/files/document/faqs-part-54.pdf>.

¹⁰⁴ To this reform, one could also add the US Catholic bishops’ long-standing promotion of universal access to health care as a means of addressing the imbalance in health insurance. See US Conference of Catholic Bishops, “Health Care,” <https://www.usccb.org/committees/domestic-justice-and-human-development/health-care#tab-background-information>.

Not only will they alleviate some of the stress surrounding the prospect of an additional pregnancy when resources are tight, but they will also give couples more options to choose the most effective form of NFP, allowing those couples who have discerned that they must postpone childbirth to achieve the aims of responsible parenthood more securely.¹⁰⁵

Conclusion

The Catholic Church has remained adamant in its prohibition of artificial birth control despite near-universal acceptance by other Christian traditions. As a result of the widespread embrace of artificial forms of birth control, the contemporary cultural context in Western countries such as the United States is not designed to promote Catholic practice. Instead, structural constraints significantly complicate the observance of these Catholic norms, undermining access to the myriad goods that the Catholic tradition associates with its vision for marital sexuality. Although structural constraints do not deprive Catholics of their freedom to choose to eschew artificial birth control, they do affect how practicable these teachings *seem* as well as the personal and social costs associated with observing them. As the examination of Kendra's and GS's stories showed, even Catholics who are deeply committed to practicing responsible parenthood exclusively through the church's only approved form of birth regulation run into serious obstacles in practice.

The Catholic Church, understood comprehensively as the people and not just the institution, must take these challenges more seriously and tackle them more directly, both to strengthen the credibility of their tradition's teachings and to demonstrate that this community of faith is genuinely committed to the compassionate accompaniment exhorted in the gospels.¹⁰⁶ The best way to do this is to underscore the intrinsic relationship between Catholic sexual ethics and Catholic social ethics because the same reforms around housing, family assistance, and living wages advocated in Catholic social teaching are the ones most needed to shift the structural constraints affecting the perceived viability of the Catholic vision for responsible parenthood. To achieve this end, however, significant steps are needed at the parish level. Parish catechesis needs to make the currently implicit relationship between Catholic

¹⁰⁵ Robust sociological data on the usage rates of various NFP methods is not yet available. However, the variety of NFP methods available speaks to the need for options when deciding which fertile signs are the most effectively tracked for each woman.

¹⁰⁶ Francis, *Fratelli Tutti* (October 3, 2020), §67, https://www.vatican.va/content/francesco/en/encyclicals/documents/papa-francesco_20201003_enciclica-fratelli-tutti.html.

social teaching and Catholic sexual ethics more explicit, reinforcing the idea that they do not operate on separate planes but rather form a unified vision for the moral life. Likewise, catechetical presentations of the church's teaching on sexual morality, and especially NFP, must help parishioners appreciate the uneven structural enablements and restrictions shaping fidelity to these teachings.¹⁰⁷ For the middle- and upper-income parishioners who experience more enablements, these discussions should strive to elicit their support for structural reforms designed to build a world in which their enablements are shared by all. For those parishioners who face serious obstacles to living their faith in this area, meanwhile, parishes should make it a priority to help them access forms of NFP that will be most effective for them, something they might achieve by creating a parish or diocesan fund not only for training but also for the technology and materials that might be necessary.

Ultimately, the Catholic Church has work to do if it wishes to present its positive vision for the fullness of human sexuality as anything more than an idealized abstraction. Given the structural enablements behind many of the "success" stories of couples who managed to remain faithful to magisterial teaching, it is hardly surprising that data indicate US Catholic women rely on artificial forms of birth control much more than NFP when they recognize a need to space or prevent births.¹⁰⁸ If the Catholic Church in the United States sincerely wants to change this trajectory, then all its members will need to recognize their responsibility to work for the structural reforms championed in Catholic social teaching. Only by tackling structural constraints can

¹⁰⁷ These conversations should open the door to catechesis on the "law of gradualness" that has been an explicit part of magisterial teaching on contraception since *Familiaris Consortio*, and ideally would incorporate Catholic teachings on conscience and discernment into the discussion. See John Paul II, *Familiaris Consortio* §34; King, "Which Gradualism? Whose Relationships?," esp. 87–98; Joseph Parkinson, "Humanæ Vitæ II: Conscience, Contraception and Holy Communion," *Australasian Catholic Record* 90, no. 3 (July 2013): 297–310; Todd A. Salzman and Michael G. Lawler, "Amoris Laetitia: Towards a Methodological and Anthropological Integration of Catholic Social and Sexual Ethics," *Theological Studies* 79, no. 3 (September 2018): 634–52, at 636–40. Consistent with the links between Catholic sexual ethics and Catholic social teaching advocated in this article, however, these conversations cannot remain at that level alone and must also call attention to Catholics' collective responsibility to challenge the unjust social structures involved.

¹⁰⁸ A comprehensive survey sponsored by the US Centers for Disease Control and Prevention found that 98.6 percent of self-identifying Catholic women used some form of birth control at some time, but only 22 percent reported "a periodic abstinence method" like NFP. Kimberly Daniels, William D. Mosher, Jo Jones, "Contraceptive Methods Women Have Ever Used: United States, 1982–2010," *National Health Statistics Reports* 62 (February 2013): 1–15, at 8.

the Catholic Church contribute to a world where following Catholic teaching can become less economically costly and less physically and emotionally dangerous and thus, by extension, more common. Without these reforms, even the Catholic couples most dedicated to their church's official teachings will continue to be "tormented by difficulties of every kind," and the Catholic vision for the fullness of marriage and family life will remain a distant hope for far too many.