



# Bulletin of WOOMB International Ltd

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*Credidimus caritati*  
we have put our faith in love



**WOOMB International Ltd  
continuing the work of  
Drs John and Evelyn Billings  
of bringing the  
Billings Ovulation Method®  
to the world.**

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### Your subscription/donation

WOOMB International continues the work of its founders by promoting the Billings Ovulation Method® and ensuring that wherever it is taught globally, it is the authentic Method without variation, and that only WOOMB International approved teaching and training materials are used. The Bulletin provides a medium for sharing articles and news from around the world. We welcome your annual subscription of AUD\$25 which will ensure its continuing production.

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## In this Edition

This year marks two major milestones for the Billings Ovulation Method®. It is seventy years since Dr John Billings accepted the invitation of Rev Fr Maurice Catarinich to assist in finding a way to help young married couples who wanted to live their conjugal lives in accordance with Church teaching but who, for various legitimate reasons, needed to limit the size of their families. Many of you will recall that Dr Billings famously replied that he would give three months to the work. In reality he devoted the rest of his life to it and was joined in the endeavour by his wife Dr Evelyn Billings. Together they changed the course of natural fertility regulation, putting it on a scientific as well as a moral footing, and advancing understanding of human reproduction in both Church and medical circles. Seven decades later we celebrate

### **The “Billings Revolution” : from fertility knowledge to personalized medicine**

which is the title of a Conference to be held in Rome in April to which you are all invited. You can attend in person or online. See further details on page 6.

The conference will be following by teacher training programs (in person only) in English and Italian.

In July of this year we will celebrate fifty years of the Bulletin of WOOMB International, initially entitled the Bulletin of the Natural Family Planning Council of Victoria and later the Bulletin of the Ovulation Method Research and Reference Centre of Australia, before becoming the Bulletin of WOOMB International ten years ago in 2013. The name changes over the years have reflected the growth of outreach of the Billings Ovulation Method® throughout the world which is reflected in our News Around the World segment on page 13. It contains joyous tidings from some troubled parts of the world from friends old and new. Even in the darkest corners love shines brightest and dispels fear and despair.

We begin this issue with another great paper from the past, delivered by Dr Evelyn Billings at Memphis, Tennessee in July 1994, it is as relevant today as it was thirty years ago and speaks particularly to you all as teachers of the Billings Ovulation Method® who, as the Doctors Billings themselves did, have answered the call of *Humanae Vitae* to participate in this “Truly great work ... both for the world and for the Church”.

The Question to Senior Teachers (p 11) reminds us of the importance to carefully review the chart if at first glance the evidence seems to contradict our knowledge.

We end this edition with another wonderful paper, this time presented by the late Professor Nicholas Tonti-Filippini, bioethicist and great friend of Billings Ovulation Method® teachers, also given at a conference in the mid-1990s this time in Melbourne, Australia. It is wonderfully reassuring about the work we do in the face of a culture gone mad!

As we journey together through this Lenten season we look forward to the greatest assurance that love conquers sin and death which we celebrate each year at Easter. May God richly bless you all and your families for your witness and work.

Editor

# The Philosophy and Practicality of *Humanae Vitae*: how to make it a reality in married life

Evelyn L Billings



I believe that it is true to say that it is due to the experience of teaching and living of natural family planning that *Humanae Vitae* has come to be understood and its prophetic insights realised. In the opening lines of *HV* married persons are called "the free and responsible collaborators of God the Creator". It is indeed a weighty statement. Herein is contained a natural freedom which, being in collaboration with God the Creator, must surely mean cooperating with what is supremely good and supremely ordered because it accords with the Divine Will. This supreme goodness leaves nothing better for us to wish for ourselves, our families and those around us. The responsibility is to choose this good. The capability of making this choice comes through the gifts of intellect and most of all of love endowed by the Creator at the beginnings of mankind. Perfect collaboration with the Creator therefore would ensure there would be no harm for the family of man. In this there would be found true freedom.

It was only after working with the Billings Ovulation Method® for years that its inherent goodness was recognised by its effect on the relationship between husbands and wives. We found that if the Method was working the marriage was working. It was seen that all these ordinary couples were living in a truly free and responsible collaboration with God, the Creator, and were undoubtedly happy.

It has often been stated by those who teach the Billings Ovulation Method® that it is not a contraceptive, but it is still difficult for the many people who do not know about natural family planning to deny that it is a natural contraception. The press is particularly prone to do this. The difference in means is incomprehensible to them, if the end is the same.

If it is found in any region or by any couple that the Method is not seen to be working well, it is usually found that it is not free, that it is simply because the collaboration with God has been removed from it by the attitude of unacceptability of the child, who at last becomes dreaded. Where the aim and object is implicitly to avoid conception, abstinence at the time of fertility is seen to be an imposition and a burden. Exclusion of the child tends to include the emphasis "at all cost". Unfortunately often this progresses to make the Method seem more and more secure by the addition of some sort of technology usually beginning with barrier contraception. Now responsibility becomes damaged as it is transferred from the decision-making of the couple to a device whose sole purpose is to ensure that no conception occurs. The exclusion of God which results by breaking His Natural Law leaves the couple fearful of the baby and even hostile to him. Love suffers.

In Section 17 of *HV*, Pope Paul VI speaks of the intervention of public authorities in the solving of social difficulties by methods of contraception which they judge to be most efficacious.

We have indeed lived to see how this has come true in some countries, where the fear of conception has become a very real factor for some people where coercive measures are meted out to those who conceive and are subjected to abortion and sterilisation and various other hardships tied to employment, housing, schooling in unbelievable breeches of basic human rights and kindness to humanity. Living under the threat of such cruelty some directors of natural family planning programs have developed this contraceptive mentality. Often while trying to do their best to obey *HV* they become devastated by the inhuman treatment of their people. Faith in the Method is tried if pregnancies occur. The aim of the government demographers is for the total pregnancy rate to be low or zero and it is often very difficult for the director of a program trying to teach natural family planning to not be infected by this view.

Until the coercive laws change, people must comply with the use of the Method to achieve a low total pregnancy rate and this has been seen to have been achieved by the Billings Ovulation Method® in very populous countries such as Indonesia, India and South Korea. It imposes a very severe incentive and a very unjust one to use the Method for the time being for the avoidance of pregnancy along with the many other incentives imposed by health, economy, war, famine, displacement and similar misfortunes which beset human families. The important thing is that the conjugal love developed by using the Method is equal to all adversity when the focus of the marriage relationship is total love. Thus, the Method must always be taught with this precept in view, even though the removal of freedom by governments, amounting in some cases to martyrdom, is at variance with the freedom of God's love.

In consideration of sexual intercourse as a unitive as well as a procreative act, society has given the unitive aspect a disproportionate value, so that it has become a *sine qua non* [essential element] among sexual partners and also now in marriages. That both aspects of sexual intercourse are absolute requisites in marriage is a false notion. The times come in marriage when the conjugal act can no longer be procreative and so too all through married life the act is physiologically non-reproductive from time to time. So also sexual intercourse may be suspended for extended periods of time, or indeed permanently under some valid and necessary, inescapable circumstances. Under all these circumstances marriage does not cease to exist. Conjugal love is not totally composed of either reproducing or of engaging in physical sexual intercourse, but it is to conjugal love that the joy of bringing forth a child and the happiness of the marital embrace is due. This is so important a concept in the Divine Plan, that it becomes the conscious wish of married couples to collaborate with God the Creator freely and responsibly. When this is frustrated in the childlessness of a loving couple, it in no way diminishes their conjugal love or excludes them from the Divine Plan for them. In the practice of natural family planning both discipline and acceptance of the Creator's Will for the working out of that couple's lives grows day by day, so that if children in the end are denied them, they accept their disappointment but live with a stronger conjugal love.

Great honour is due to the marriage act, simply because it expresses conjugal love in a most appropriate way within the Divine Plan. In so honouring it, we can see very clearly that it must be unique to that particular marriage in both its aspects, unitive by abiding fidelity to be guarded by one's life, and procreative in the total acceptance and the overwhelming love for the child whether given by God as a treasured gift, or the gift withheld as part of another plan of the Creator for that particular couple. Abiding fidelity is at once the product of and the strengthening force of conjugal love. It excludes the succumbing to physical passion in an extra-marital encounter, because such an act becomes supremely unworthy of the individual and the beloved. It denies true love. True love flourishes in the discipline of a natural method.

Acceptance of the child changes the act of intercourse into an act of love.

The love of the child is also at the same time the product of and the strengthening force of conjugal love. It is of course, something more. It is God's plan for His children that they are created through an act of intercourse loving and complete. The understanding that both aspects of the sexual union are so wholly bound together in one act of love, as is made clear in *HV*, opens up to us a world of wonder and supreme confidence in God's eternal plan which began with man's first appearance in the world when the "two in one flesh" concept was initiated by God. It becomes a source of awe and wonder to each couple that is taught the Method and whose marriage is influenced by the spirit of natural family planning.

The fidelity of the conjugal love in all its elements thus expressed excludes a multitude of ills that we see today; particularly in relation to assisted reproduction techniques. Sometimes the desire for a child is more in the nature of self-gratification than in acceptance of the Creator's plan. So we see *in vitro* fertilisation where the sexual act is replaced by a masturbatory specimen of sperm fertilising, in a dish, egg cells which are produced by drug-induced ovulation. This is followed by selection of candidates for implantation, freezing or elimination of the rest in a complete disrespect of the woman, the man and the lives of their offspring. In these procedures fidelity, as cherished in the created sexual act of two in one flesh, is violated. Both husbands and wives have voiced their resentment of the participation of so many technicians in the procreation of their child, where it should be only they alone, involved in an accepting act of love.

Great care has to be taken even with the use of technology to pinpoint ovulation for the purposes of

conception through the normal sexual act in cases of difficulty in recognising the most fertile time in the cycle after, for example, contraceptive medication has disturbed the physiology of the reproductive tract. Sometimes the fixation on producing a child is so great that a man's chief wish is to impregnate his wife, rather than love her and trust to the ordained outcome lovingly and in a true sense of responsibility and collaboration with God. To be sexually used either for the avoidance or the achievement of pregnancy is one of the greatest insults known to woman. Conversely the mutual and responsible and loving collaboration with the Creator of husband and wife, as is seen to occur in living natural family planning as intended, is one of the greatest joys of marriage for a woman.

The acceptance and love of the child, which is within every natural sexual act, keeps safe the respect for human life at all stages from the moment of conception until natural death, because it respects God's laws of love for human beings. He knows at all times the condition of our lives and does not stop loving us for an instant, whether we are an infant slaughtered in a tribal war, a socialite of high degree, or an embryo flushed down a laboratory sink. To love the child is to be aware of his Creator to trust and love Him. To honour the act of creation as ordered by God is to regard all life as precious. Here there is no room for thoughts of self-interest, which result in the expenditure of another human life.

We know that in the world there is still a tremendous ignorance about the scientific reliability and philosophical strengths of natural family planning. Truly this is a great work, as Pope Paul VI states in the final appeal of *HV*. He says, "Truly a great work as we are deeply convinced, both for the world and for the Church since man cannot find true happiness – towards which he aspires with all his being – other than in respect of the laws written by God in his very nature, laws which he must observe with intelligence and love."

*HV*, regarded by many as prescriptive, intransigent and unsympathetic to the problems of sexuality of ordinary men and women, holds out a wealth of love and happiness for families in the fruit of obedience to its precepts.

By reiterating the intrinsic evil of the philosophy and practice of contraception and abortion and the Church's forbidding of it, it has protected all members of families from destruction of body and soul. Some say it heartlessly denies a quick and easy solution to a grave problem whereas so often the practice has led to a stultifying effect on the relationship where intercourse becomes just a sterile pleasure. The Church is being blamed by those who in a sense of false compassion have given bad pastoral advice to couples to use contraception if their conscience and circumstances suggest it, in ignorance of the availability and reliability of a natural and lawful solution as well as in flagrant disobedience to Church teaching.

*HV* recommends the use of natural methods of fertility control. We know that a high level of reliability can be obtained by their use. In the last 25 years we have seen all of the problems of the woman's reproductive system being solved, particularly the common ones due to breast-feeding and the climacteric. These "hard cases" no longer exist, and we have the wherewithal to solve the most difficult cases by mean of the Billings Ovulation Method® which introduced the concept of the Basic Infertile Pattern.

Most of the "hard cases" that we see today are the consequences of contraceptive medication and pathologies due to various manipulations of the reproductive system of the woman, including those of infertility with its attendant anxieties, as well as the remorse and guilt following abortion.

In our teaching, we have come to realise that for most the solution to fertility problems is quickly and easily found. There are others which require patience and time for mutual consideration, self-esteem and love to develop and blossom in the relationship. We see that it is in the striving, not the quick solution by a sterilising operation, etc. that health is restored to a marriage.

The Natural Law, which is safeguarded by the Church, was founded and guaranteed by Christ who promised, "I will be with you always, even until the end of the world", is plainly stated in *HV*.

By our work as teachers, we can see in couple after couple the promise fulfilled, as one by one we teach in the apostolate of "like to life". The blessings that flow into each marriage are our blessings too, as we realise Christ's abiding presence for all days. So here is the keystone of our building, the hand into which we confidently place our own, like a child in the hand of his father. It has all the familiarity and assurance of that love which is God Himself.

**The “Billings Revolution” 70 years later:  
from fertility knowledge to personalized medicine**

International Congress of WOOMB International

Catholic University of the Sacred Heart

Rome, 28th - 29th April 2023

Scientific Committee : C. Giuliadori, M.L. Di Pietro, P. Pellicanò, M. Antonelli, G. Barker

**FRIDAY, 28th APRIL 2023**

8.00 Participants registration

9.00 Opening of the Congress: MARIA LUISA DI PIETRO, Università Cattolica del Sacro Cuore, Italy,

BERNADETTE DAVIES, Director of WOOMB International, Australia

Greeting address : Hon. EUGENIA ROCCELLA, Minister for the Family, Birth Rate and Equal Opportunities, Italy

Introductory interventions : CLAUDIO GIULIODORI, Ecclesiastical General Assistant, Università Cattolica del Sacro Cuore, Italy, MASSIMO ANTONELLI, Director of University Centre of Bioethics and Life Sciences, Università Cattolica del Sacro Cuore, Italy, CLAUDIO CELLI, President of the International Scientific Institute Paolo VI, Italy, ANTONIO GASBARRINI, Dean of the Faculty of Medicine and Surgery, Università Cattolica del Sacro Cuore, Italy, GIOVANNI SCAMBIA, Scientific Director of Foundation Policlinico Universitario Agostino Gemelli IRCCS, Italy

**SESSION I: A revolution for science: history and development of research**

Moderator: NICOLETTA DI SIMONE, Italy

**10.00 John J Billings Memorial Lecture: The “Billings Revolution” 70 years later: an insight that changed history.** PAOLA PELLICANO, Italy

**10.30 Preconceptional health in Italy: knowledge, behaviour and needs of women of childbearing age.** MARIA LUISA DI PIETRO - DRIEDA ZAÇE, Italy

**11.00 Later and later, less and less: the woman’s age as a risk factor for fertility.** ANTONIO LANZONE - ROSANNA APA, Italy

11.30 Break

**12.00 The “continuum” of ovarian activity: hormonal profiles in James Brown’s studies.** GILLIAN BARKER, Australia

**12.30 Cervical mucus, key to fertility: originality and wonder of Erik Odeblad’s discoveries.** MICAELA MENARGUEZ, Spain

**SESSION II: A revolution for procreative health: diagnosis and prevention**

Moderator: ORNELLA PAROLINI, Italy

**15.00 Cervical mucus and the Billings Ovulation Method® : need for a re-evaluation in the era of personalized medicine.** RITA BONFIGLIO - VALERIA VERSACE ANNAMARIA MEROLA, Italy

**15.45 Billings Ovulation Method® and reproductive health : building health awareness.** MARIJA CURLIN, Croatia

**16.15 Clinical impact of the Billings Ovulation Method® : Italian experience.** ELENA GIACCHI - AURORA SAPOROSI, Italy

16.45 Break

**17.15 Maternal microbiota and impact on fertility and pregnancy outcomes.** GIANLUCA IANIRO, Italy

17.45 Fertility preservation: knowledge and attitudes of women with oncological pathology. GIOVANNI SCAMBIA, GIACOMO CORRADO, Italy

**18.15 Male fertility: between pathology, environment and lifestyles.** ALFREDO PONTECORVI, DOMENICO MILARDI, Italy

**SATURDAY 29th APRIL 2023**

**SESSION III: A revolution for culture: anthropology, education, politics**

Moderator: GABRIELLA GAMBINO, Italy

**9.00 Fecundity, fertility, openness to life: intercultural and interreligious debate.**

*Panel Discussion on experiences of promotion and teaching of Natural Fertility Regulation in different contexts: Coptic and Catholic of various Rites of Egypt, Islam, Protestant, Catholic Latin Rite and Maronite Rite, Eastern culture and China*

**Introduction:** Father MARCO VIANELLI, Italy

**Interventions:** MOUNIR FARAG, MARIE CLAIRE FARAG, Egypt, HEINZ HEURZELER, ANN HEURZELER, Switzerland, AGATA KOWALSKA, SAMI AL BITAR NEHME, Poland - Lebanon, MARIE MARSHALL, Australia

10.30 Break

**11.00 At the heart of human sexuality: the anthropological horizon of the Natural Regulation of Fertility.** H. E. Mons. CLAUDIO GIULIODORI, Italy

**Conjugal love and the gift of life: educating in beauty and truth.** LUIS JENSEN – PILAR ESCUDERO, Chile

**12.00 A Country without children is a Country without a future.** Dialogue between: On. ALFREDO MANTOVANO, Italy, ANTONELLA SCIARRONE ALIBRANDI, Italy, STEFANO ZAMAGNI, Italy

Moderator: MARIA LUISA DI PIETRO, Italy

**SESSION IV: The “Billings Revolution” around the world**

15.00 Presidents: BERNADETTE DAVIES and GILLIAN BARKER, Directors of WOOMB International, Australia

Moderator: ALICIA PASTOR, Billings Europe, Spain

Interventions of: Representatives of Centres for the Billings Ovulation Method®, WOOMB International Affiliates, of different Continents

**18.00 - 20.00 : The gift of love and the gift of life: Harmonies of Beauty, in art and beyond art**

Evening of representations and testimonies.

**SPEAKERS:**

SAMI AL BITAR NEHME, PhD, Research Scientist in Microbiology, Libano,

ROSANNA APA Associato di Ginecologia e Ostetricia, Università Cattolica del Sacro Cuore, Italia,

GILLIAN BARKER, WOOMB International Director, Australia,

RITA BONFIGLIO, Ricercatore, Dipartimento di Medicina Sperimentale, Università di Roma Tor Vergata, Italia,

GIACOMO CORRADO, Dirigente Medico UOC Ginecologia oncologica, Fondazione Policlinico, Universitario Agostino Gemelli IRCCS, Italia,

MARIJA ĆURLIN, PhD. Assistant Prof., Department of Histology and Biology, Catholic University of Croatia, School of Medicine, Croazia,

BERNADETTE DAVIES, WOOMB International Director, Australia,  
NICOLETTA DE SIMONE, Ordinario di Ginecologia e Ostetricia, Humanitas University, Italia,  
MARIA LUISA DI PIETRO, Direttore Centro Ricerca e Studio per la Salute Procreativa, Coordinatore Centro Studi e Ricerche per la Regolazione Naturale della Fertilità, Università Cattolica del Sacro Cuore, Italia, PILAR ESCUDERO, Membro Dicastero per i Laici, la Famiglia e la Vita, Instituto de Familias de Schoenstatt, Cile,  
MOUNIR FARAG, Presidente Istituto San Giuseppe per la Famiglia, Bioetica e Regolazione naturale della fertilità, Egitto,  
MARIE CLAIRE FARAG, Istituto San Giuseppe per la Famiglia, Bioetica e Regolazione naturale della fertilità; Coordinatore Metodo dell'Ovulazione Billings, Egitto,  
GABRIELLA GAMBINO, Sotto-Segretario Dicastero per i Laici, la Famiglia e la Vita, Italia,  
ELENA GIACCHI, già Dirigente Medico Centro Studi e Ricerche per la Regolazione Naturale della Fertilità, Università Cattolica del Sacro Cuore; Consultant of WOOMB Directors, Italia,  
CLAUDIO GIULIODORI, Assistente Ecclesiastico Generale, Università Cattolica del Sacro Cuore, Italia,  
ANN HEURZELER, Msc., member Swiss Coordination, Association of NFP-Methods, Svizzera,  
HEINZ HEURZELER, Msc., Board member Swiss Coordination Association of NFP-Methods, Svizzera,  
GIANLUCA IANIRO, Ricercatore, Centro Malattie Apparato Digerente, Fondazione Policlinico Universitario Agostino Gemelli IRCCS, Italia,  
LUIS JENSEN, Membro Dicastero per i Laici, la Famiglia e la Vita, Instituto de Familias de Schoenstatt, Cile,  
AGATA HELENA KOWALSKA, MBBS, Family medicine resident, Polonia,  
ANTONIO LANZONE, Ordinario di Ginecologia e Ostetricia, Università Cattolica del Sacro Cuore, Italia,  
ALFREDO MANTOVANO, Sottosegretario di Stato alla Presidenza del Consiglio dei Ministri, Italia,  
MARIE MARSHALL, WOOMB International Director, Australia,  
MICAELA MENARGUEZ, Profesora de Bioética, Universidad Católica San Antonio, Spain,  
ANNAMARIA MEROLA, Dirigente Medico UOC stetricia e Patologia ostetrica, Fondazione Policlinico Universitario Agostino Gemelli IRCCS; Centro Studi e Ricerche per la Regolazione Naturale della Fertilità, Università Cattolica del Sacro Cuore, Italia,  
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ALICIA PASTOR, WOOMB Associated Director, Founding member of Billings Europe, Spagna,  
PAOLA PELLICANÒ Dirigente Medico, Centro Studi e Ricerche per la Regolazione Naturale della Fertilità, Università Cattolica del Sacro Cuore; Coordinatore Nazionale Metodo dell'Ovulazione Billings, Italia,  
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GIOVANNI SCAMBIA, Direttore Scientifico, Fondazione Policlinico Universitario Agostino Gemelli IRCCS, Italia,  
ANTONELLA SCIARRONE ALIBRANDI, Sottosegretario Dicastero per la Cultura e l'Educazione, Italia,  
VALERIA VERSACE Medico UOC Ostetricia e Patologia ostetrica, Fondazione Policlinico Universitario Agostino Gemelli IRCCS; Centro Studi e Ricerche per la Regolazione Naturale della Fertilità, Università Cattolica del Sacro Cuore, Italia,  
MARCO VIANELLI, Direttore Ufficio Famiglia della Conferenza Episcopale Italiana, Italia, RIEDA ZAÇE, Phd Scienze biomediche e sanità pubblica, Centro Ricerca e Studio per la Salute Procreativa, Università Cattolica del Sacro Cuore, Italia,  
STEFANO ZAMAGNI, Presidente della Pontificia Accademia per le Scienze Sociali, Italia

**Registration:** Mode of conducting the congress: in-person and online

**Congress registration fees,** including lunches and coffee breaks:

- Euro 200, full fee
- Euro 120, fee reserved for Teachers of natural methods, students, Participants in one of the training courses that will follow the congress
- Euro 100, online participation fee



To participate it will be necessary to register online at the following link by 10th April 2023:

[https://fopecom-rm.unicatt.it/fopecomonline/default\\_eng.aspx?Edizione=1&IdEvento=9497](https://fopecom-rm.unicatt.it/fopecomonline/default_eng.aspx?Edizione=1&IdEvento=9497)

Official languages of the Congress are Italian and English. Simultaneous translation service will be provided.

A babysitting service will be available upon request (please, indicate it in notes section)

For those who wish:

Holy Masses

Friday, April 28th at 7 p.m. and Saturday, April 29th at 8 a.m. - Central Church of Sacred Heart Catholic University

Sunday, April 30th

12 noon appointment for the Angelus Prayer in St. Peter's Square.

In the morning, possibility of independent visits.

Recommended sites in the area: - Vatican Museums, free admission last Sunday of the month - it is recommended to arrive very early (<https://m.museivaticani.va/>)

- Castel Sant'Angelo Museum (<http://castelsantangelo.beniculturali.it/>)

- Welcome to Rome, exhibition and film screening Corso Vittorio Emanuele 203 - by reservation only (<https://welcometo-rome.it/>)

**From 30th April afternoon till 3rd May afternoon it will be possible to attend, exclusively in person, one of the Teacher Training Programs in Billings Ovulation Method®**

Course participation fee, including lunches:

- Euro 200, full fee

- Euro 140, for congress participants

Basic Training Program for new Teachers (Italian):

<https://fopecom-rm.unicatt.it/fopecomonline/default.aspx?Edizione=1&IdEvento=10024>

Basic Training Program for new Teachers (English):

[https://fopecom-rm.unicatt.it/fopecomonline/default\\_eng.aspx?Edizione=1&IdEvento=10029](https://fopecom-rm.unicatt.it/fopecomonline/default_eng.aspx?Edizione=1&IdEvento=10029)

Extension Program for Senior Teachers

(English-Italian):

[https://fopecom-rm.unicatt.it/fopecomonline/default\\_eng.aspx?Edizione=1&IdEvento=10025](https://fopecom-rm.unicatt.it/fopecomonline/default_eng.aspx?Edizione=1&IdEvento=10025)

## Hotels

(discounted rates for Congress participants, subject to availability of rooms)

Hotel Excel - Via degli Scolopi, 31

[info.hotelromamontemario@laminhotels.com](mailto:info.hotelromamontemario@laminhotels.com)

+39 06/35058043

Hotel Desiderio - Via della Pineta Sacchetti, 225

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+39 06/35500452

Hotel Pineta Palace - Via S. Lino papa, 35  
info@hotelpinetapalace.com  
+39 06/3013800



St Peter's, Rome, from the Vatican gardens

## Question to Senior Teachers

*I have a chart which shows an 18 day luteal phase after a Peak. Bleeding commenced on day 19. What do I tell this woman? Is it possible for her to have such a long luteal phase?*

This question makes us look more carefully at the chart and ask the right questions.

### **Is pregnancy possible?**

Through the many studies conducted by Professor Brown we have the scientific evidence that menstrual bleeding occurs 11 – 16 days after ovulation. A luteal phase of longer than 16 days indicates the possibility of pregnancy, in a cycle which has not been manipulated by hormones. This is often confirmed when the couple inform us that there was one or more acts of intercourse, or genital contact over the fertile phase. It is therefore important to gently ask the couple if there was any genital sexual activity over this time, explaining that withdrawal and use of barrier methods over the fertile time can result in pregnancy. Perhaps they have not marked this sexual activity on the chart. Some women experience intermittent bleeding during the first trimester of pregnancy. Possibly this bleeding has been mistaken for menstruation.

If she is now in another cycle and pregnancy tests have been negative, it is possible that she had conceived and miscarried. In this case, the bleeding would likely be heavy and unlike normal menstruation. She may have a delayed ovulation in this subsequent cycle so she needs to apply the Early Day Rules and wait for the recognition of Peak.

### **Have the criteria for the Peak been present?**

If it seems that pregnancy is not likely then we need to look closely at the chart, especially at the patterns recognised and the identification of the Peak.

Are we seeing a changing, developing pattern progressing to the slippery sensation? When we think of the ovarian hormones prior to ovulation we can see that the woman's chart is reflecting the rising of the oestrogen level to its peak. We can see that each day there is a rise which is reflected in the woman's cervical response experienced by her at the vulva. She will be able to tell you that rather than every day being the same, once she recognised an interruption to her BIP, each day was a little different. The discharge may have begun as a damp or sticky sensation and has been increasingly wetter and she was then aware of the slippery sensation. She recognises her Peak as the last day of the slippery sensation. It is possible that the slippery sensation is less intense on the day of Peak in comparison to the day before. Remember, the Billings Ovulation Method® Peak Day is the day when the first rise of progesterone has begun, and the Pockets of Shaw have been reactivated.

If she has had some visual observations look closely at her descriptions and ask her what she has actually experienced. In a normal fertile cycle, she is likely to tell you that any visual discharge started off as slight or perhaps thick and cloudy and each day it got progressively thinner until she may have experienced clear strings which she saw leaving her body. She may tell you that the day she had marked as her Peak was based on more noticeable strings or clear discharge.

Perhaps the woman who has an 18 day luteal phase may have not completely understood the criteria for a Peak. Perhaps she has identified her Peak on the day of most discharge, or the last day the strings were present, rather than the last day of slippery sensation.

Perhaps on the day after she marked her Peak she had ignored that she still felt a bit slippery when she wiped but because the slippery sensation was so obvious on the previous day, or because there was no longer any visual discharge, she had ignored the presence of this lesser sensation of slippery. If so, the Peak Day is out by a day.

### **Has she ovulated?**

Another woman may tell you that she did not have a lot of symptoms but she thought she felt slippery

because there were a few days when it was obviously different and she has been expecting to be “slippery”, or she saw a discharge that “looked slippery”, rather than having experienced the slippery sensation at the vulva. She has noticed a change in her oestrogen level, but did it meet the criteria for a Peak?

As well as looking at the days leading up to the Peak, we need to look at what she has written on the days after Peak. The rise in progesterone and therefore the reactivation of the Pockets of Shaw that occur at the time of ovulation play a critical role in the identification of Peak. Does her description indicate the presence of progesterone? Is there a distinct change in her sensation, is she dry or sticky or perhaps damp? Is there a change in any visible discharge, is it now thicker than during the previous days of fertility? Can she say these days were totally different from her days of fertile symptoms?

Discuss the luteal phase symptoms with the woman. Are there any unusual descriptions or patterns in the recorded luteal phase? Are the days following Peak, similar to her normal experience? If she is an experienced user of the Method, can she confidently say that her Peak was the same as her normal experience of Peak - Dr Lyn Billings always used to tell us that the woman will recognise her Peak like she recognises the face of her baby!

Did she recognise a swollen vulva or the lymph node sign? If so, do they fit in with the identification of Peak Day? Has she noticed the changes she normally experiences after ovulation - did she notice breast soreness or changes or more fluid retention /bloating during her apparent luteal phase?

If the woman is now unsure of her recognition of Peak it may be that the patch of mucus with fertile characteristics was in fact one of the identified variants of the Continuum as explained by Professor Brown and rather than this bleeding being menstruation, it is either a breakthrough or withdrawal bleed. We would be asking her questions about this bleed - is she having clots which she does not usually experience? Is she noticing any other sensation at the vulva other than the normal sensation of bleeding? Early Day Rule 3 would be advised.

### **Ovulation and underlying pathology**

If however the woman can satisfy her teacher that she did indeed recognise the criteria for a Peak - she has experienced the changing, developing pattern leading to slippery with a definite change to no longer any slippery sensation, then we need to consider this further.

When the hormonal studies were done on the Billings Ovulation Method®, ovulation was shown to occur in the majority of cycles on Peak day. In a lesser number of cycles, it could occur on day 1 or day 2 after Peak. You cannot know from looking at the chart on which day ovulation has occurred. However, we do know that Peak = ovulation. If ovulation occurs as late as day 2 past the Peak and the woman has a luteal phase of 16 days then menstruation would occur on the 18th or even the 19th day past Peak. Remember, Professor Brown’s studies showed the length of the luteal phase from the day of ovulation, not the Peak day.

As each ovulation is a unique event we cannot predict on which of these days she will ovulate however for the majority of the woman’s cycles she will ovulate on the day of the Peak. Statistically we would not expect a woman to ovulate on day 2 past Peak in every cycle.

In the case where an abnormal mucus pattern or extended luteal phase persists in subsequent cycles, ovarian pathology should be suspected. Referral to a gynaecologist is recommended. The teacher would help her to apply the Method until she is diagnosed and treatment completed.

While we can rationalise why a chart with an apparent 18 day luteal phase may have been based on the count from Peak Day rather than the day of ovulation, do not assume that this is the case - always ask the right questions. Ask the woman about her experiences in this cycle and keep in contact with her to consider referral if it persists.

## News Around the World

### Belarus

Our wonderful WOOMB Belarus Affiliate has been very busy offering the good news of the Billings Ovulation Method® to health professionals. On December 12, 2022, The Gomel Medical University hosted a seminar on "Preserving Reproductive Health of the Younger Generation" attended by medical students (see photos below). It was organised by the Gomel diocese of Belarusian Orthodox Church and Belarusian affiliate of WOOMB International, Gomel charitable NGO Family and Motherhood Support Centre "Mamaletto".

Three members of Mamaletto spoke at this seminar. Ludmila Logunova, psychologist and the chairman of "Mamaletto" spoke on the topic: "What attitude should an Ob/Gyn have while working with adolescent girls. The lawyer of "Mamaletto" talked about sexual inviolability of minors and the protective function of chastity so as not to fall prey to online maniacs. And Olga Nesterova, Ob/Gyn and accredited teacher of Billings Ovulation Method® spoke on the topic that the concept of chastity is not something outdated but how it's deeply grounded in human reproductive physiology. She introduced the Billings Ovulation Method® to the audience and the possibility to learn it as a user and as a teacher. As a result, the head of the Department of Obstetrics and Gynecology expressed a desire to learn more about the Method and cooperate with Marmaleto. There was positive feedback after the seminar from some of the students that the content about chastity was very interesting.

Before this event took place there were hurdles to overcome. Bias against Marmaleto was originally preventing the support of the Department of Obstetrics and Gynaecology but after a meeting with the Dean in which Ludmila was able to clearly explain that if young people were given an appreciation of their sexuality and an alternative to the use of contraception by an understanding of their fertility patterns, young women will make informed decisions, the Department relented and students were permitted to attend.

In addition, Dr Anna Sanko works at a State Women's Clinic in Grodno. She heard of the Billings Ovulation Method® and was referring women to Marmaleto and in October last year she joined the TTCC to train as a teacher. Although the referral of women was Anna's initiative, the Billings team sent a letter of thanks to the head of the clinic. In doing this they sent booklets on the Billings Ovulation Method® to the clinic to be distributed to all the Ob/Gyns.

One further outreach was to introduce the Billings Ovulation Method® to doctors in Lida in the Grodno region. On 27th December 2022 a round table for doctors from maternity hospitals and women's clinic was held. Ludmila Logunova who was invited to this meeting as a psychologist used the opportunity to hand out booklets to the many young doctors who were present.

WOOMB Belarus continues to offer Teacher Training to Russian-speaking people and currently they have trainees from Belarus, Ukraine and Israel.

Alisa Ivanova has instigated the training of much of the authentic literature into Russian. She is currently reading the Bulletins from the [www.woombinternational.org](http://www.woombinternational.org) website and has instigated a new idea to share some of the inspiring and motivating material she is reading. She is developing short podcasts of about 15-20 minutes and is reading in the Russian language, what she has translated. She intends to add a new podcast 4 times a month.



## Hong Kong

We are glad to share that we successfully conducted a 4-day teacher training course in Hong Kong at the end of last October. Training was conducted face to face, not on-line, with a total of twenty teachers who all passed the oral and written examinations. The new teachers include two Sisters from St. Paul de Chaters HK, one Chinese Medicine practitioner with social work training, and the others are all social workers from Caritas Family Service.

We met again on 3rd December to issue certificates to them and discuss the possibility of promoting and teaching the Method in their work settings. As most of the trained HK BOM teachers have retired and migrated to other countries recently, we took the opportunity when the pandemic policy relaxed slightly to, conduct this course and recruit a new group of young women as teachers.

Vanessa Chung  
Caritas Family Service, Hong Kong



Day 1 – all very puzzle with the Early Day Rule 3



Using slide rule to answer questions



Written Exam

## Tanzania

Dr Didas Kapinda has been busy in his role as Training Coordinator. Fifteen trainees attended a Basic Teacher Training Course at the Bethel Spiritual Centre in Dar es Salaam during February. Fourteen of these participants were from the Archdiocese of Dar es Salaam and one attended from Tanga Diocese. Those who satisfactorily completed the Course will now be awarded accreditation through UFATA, the Tanzanian Affiliate of WOOMB International.



## Some Moral Dilemmas for Billings Ovulation Method® Teachers

Nicholas Tonti-Filippini



Billings Ovulation Method® teachers do not simply impart information about fertility and infertility and reproductive biology, they give a practical witness to respect for human life and dignity, particularly the dignity of men and women in the sexual expression of mutual love within the marriage relationship. A philosophy of fertility appreciation and acceptance is an integral part of teaching natural family planning.

Clients come to you seeking information about their fertility but information about fertility necessarily contains information about human relationships. The Billings Ovulation Method® involves periods of abstinence when learning the Method and if pregnancy is to be avoided. Abstinence within a loving relationship has many meanings but fundamentally it involves a view of the human person which sees us as being able to choose freely in regard to sexual expression. We see ourselves as not being dominated by sexual desire but able to control it so that it becomes the basis of a gift of self, not taking or using of the other. Abstinence only makes sense when it is part of an overall perception of sexual expression as a free, fully human gift of self as an act of love for another, not merely absorption with oneself.

The emotional and biological reality of the woman's cycle about which you are an accredited expert is also knowledge about who she is as a person. You know only too well that what happens to her in a cognitive way also affects the cycle itself. More than that, however, by teaching that abstinence is not only possible for both men and women but desirable as a verification of the nature of their love as a gift to each other, you express a profound view of the freedom of the human person. By teaching you are helping to set the spouses free from the view that sexual desires are determinative. Rather you are showing how sexual desire can be creative of greater freedom, the freedom to be able to give oneself fully and without reservation to another, to surrender oneself to them. The truth that sexual desire is subordinate to love is truly liberating.

The Method is a witness to belief in the goodness of the human person as both a physical and spiritual being. Teaching the Method is inseparable from teaching a view of the human person which integrates all the elements, cognitive, spiritual, emotional, psychological.

The human person is a complex being in which each of these elements forms part of a single whole, a single unit. In reality you cannot discuss matters of great intimacy such as those involved in understanding the Method without discussing sexuality and in discussing sexuality you cannot help but discuss matters which engage the emotional and spiritual dimensions of the expression of love in sexual intimacy. The Billings Ovulation Method® teacher does not merely impart biological information, she is actively engaged in an activity which has a direct bearing on the client's perception of self and of her spouse and of their relationship.

In recognising this involvement, you are understandably concerned about the nature of that involvement when it transpires that the woman is planning to use the Method outside of the context of the expression of marital love or for purposes which are contrary to the integral goodness of marriage.

It is important to bear in mind that knowledge about human goodness is available to all. The recent papal encyclical *Veritatis Splendor* emphasizes that moral truth is not merely subjective but is objective. We can, if we are open to the truth, come to know and understand it as a part of who we are. It is wrong to suppose that unless a person is Catholic or has been taught the revealed Word of God that he or she is therefore ignorant of knowledge about human goodness. That is not so. The good of the human person is evident to all. Some choose to ignore it. Some through a hardening of their hearts through pride are not open to it. Recognizing that we are subject to the law of God evident in our human nature requires humility. Humility is a hard-earned virtue.

Moral conscience is a call to be open to the call of the love of God.<sup>1</sup> The dignity of the human person attains its ultimate expression in that open seeking to know and to be guided by truth. As a teacher of the Billings Ovulation Method® you give witness to your own recognition of the truths about the Divine gift of the sexual expression of love and its place in the development of the human person in the image and likeness of God. You seek to impart the wisdom of treating the human person as a physical and spiritual integrity, of not suppressing any part of the meaning of the act of sexual love. That is fundamental to the charism of being a teacher.

Thus there is a problem when you are called to impart your knowledge for a purpose that is not a liberation of the human person in seeking the fullest possible expression of their love for another, but rather is in some way limited or perverse. Some instances of such problems are:

1. Clients who seek to learn the Method so as to employ it to have a child in the context of a lesbian relationship. Such purposes are a denial of the rights of the child to the complementary roles of mother and father. Further the significance of the complementarity of the different type of gift a woman and a man bring to a relationship and the significance of their union as being formed in the image and likeness of God is lost.
2. Couples who are engaged in a casual relationship which is limited through being not permanent, not exclusive and thus not a complete gift of self.
3. Couples who seek the information for use by a reproductive technologist in IVF whose role intrudes into their relationship, displaces them in the origin of the child and establishes a dominance over the child in its origin which is not consistent with respect for the life and dignity of the child.
4. Couples whose approach is so anti-child that abortion is a likely option in the event of an unexpected pregnancy.

These circumstances are likely to be personally confronting to you and for that reason they are stressful. It is important to understand why that is so. You are seeking to impart wisdom about the human person which has already been rejected by your client. More than that, our culture has adopted a view of morality which asserts an exaggerated individuality which denies that there are objective moral truths. In our culture morality is not considered to be a matter of knowledge but of attitude or opinion. If you assert moral truth you are likely to be regarded as acting unprofessionally, being judgemental and acting in bad faith in that you are supposed to be teaching knowledge and you are clouding the issue with moral opinion.

For your own perspective you also have a crisis of conscience. A question arises not about the moral choices that the client may make but in regard to the assistance or cooperation that you provide toward the purposes that the client intends which you judge to be immoral.

In regard to the question of conscience: You need to evaluate your own intervention according to the intention and the objects of the interventions that you make. You are the judge of your own conduct and your judgement is illuminated by your knowledge of human goodness, knowledge that you have in part developed by seeking to understand human reproduction. You know, live and enjoy the greater love that is expressed through valuing fertility and upholding the sacredness of the means of transmitting life through a complete gift of love in the image and likeness of God and of abstaining when necessary in order to plan a family and in that way verifying your love and the freedom of the gift of sexual intimacy. That experience is fundamentally a witness to respect for the life and dignity of the human person made in the image and likeness of God. Importantly you know from that experience that the premise of free, fully human love, that is the premise of natural family planning, is evident as an integral part of using the Billings Ovulation Method®.

You should therefore have the confidence that in teaching about human reproduction you are creating opportunities for your client to come, as you have, to a greater understanding of human love and hence of human goodness through receiving that information. You should not fear that by imparting the technical information you are only creating opportunities for your client to abuse the knowledge made available. To the contrary you are both creating the opportunity for your client to come to a greater understanding of some truths about human nature and in yourself giving witness to the authentic love which is central to natural family planning.



Your intervention is thus a deliberate effort to foster a greater understanding of the bodily and spiritual unity that is the human person and in that way you are seeking to further your client's opportunity to participate in that knowledge about human goodness, that goodness that is inherent in every person, for each is made in the image and likeness of God.

The problem of conscience is whether your intervention is likely to be understood by your client as an approval of her purposes, purposes which you judge to be contrary to the human good. That would be immoral. Your cooperation and assistance should in its nature be such that it is not contrary to the witness to truth. It may even be necessary to guard against that eventuality by clearly expressing your own knowledge of human goodness and the Divine purpose of the gift of sexual intimacy.

That raises the first problem mentioned, that of being charged with being unprofessional.

The new encyclical warns against being prisoners of culture.<sup>2</sup> Moral truths about the human person transcend culture. They remain the same across cultures and between peoples. They are permanent and universal varying only in the way in which they are received, understood and applied.

Because the human person is a material and spiritual unity, you cannot convey information about the human person in a value neutral way. Value free counselling is a myth. If you are to be truly authentic as professional counsellors you should make clear your own perception of moral truth and acknowledge that it is part of the information that you are conveying. It would be professionally dishonest to seek to do otherwise.

At the same time the use to which your information is put, the willingness of your clients to accept your teaching in its entirety are matters which are beyond your control. Ought implies can. You cannot be morally responsible for the purposes to which the information you give is put by your clients. Thus it is morally permissible to present information about reproduction in a way which contains a clear message about human goodness even though you know that the information may be abused. Your aim in doing so is not to further an immoral project but rather to trust in the strength of the teaching itself in its own influence toward goodness in human relationships. Your clients may freely choose evil. That is the way God created them. But your teaching should be directed to showing that true human freedom is only achieved by recognizing the Divine plan for each of us, the ultimate objects of our human existence that are so evident in the complete, complementary and exclusive gift of mutual love between spouses expressed in their sexual intimacy.

#### References:

1. Saint John Paul the Great, *Veritatis Splendor*, 6 August 1993.
2. Saint John Paul the Great, *Veritatis Splendor*, 6 August 1993, n.53

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