1. Infertility in Marriage and Assisting Reproduction

1.1 Advice for Pastoral Counselors

I remember going to a first birthday party for my best friend’s son. My husband and I had been trying to conceive, but had met with no success. I knew it was going to be uncomfortable at times, but I thought I could handle it. After all I had been in worse situations. Or so I thought. As other one-year-old children filled her backyard, I found myself creeping toward the corner. When the cake was brought out, I looked into my friend’s eyes. They were filled with joy. It was one of the happiest moments of her life, and unfairly, one of my saddest. After quickly sneaking out, I sat in my car and cried my eyes out, I’d never realized the intensity of my pain. I hadn’t allowed myself to feel it, until it exploded out of me. ---Eileen, age 30 (1)

I remember driving home from work on the freeway a couple of days after I learned that my wife’s IVF procedure was not successful. A news broadcast came on the radio. Another baby was found in a dumpster in New York. I lost it. I started screaming at the radio like a lunatic. “Are you...kidding, you threw it away!” It was incredible to me. Here I was doing everything I could in life to get my wife pregnant, and some sick person threw away their baby. Their own flesh and blood. How could it be that they could have it and discard it like a piece of trash, something we wanted more than anything in the whole world? Preoccupied with the broadcast, I got too close to the car in front of me. Fortunately, I still had a split second to slam on my brakes. Otherwise, that little broadcast could have put me over the top. ---Matthew, age 40 (2)

Infertility is not just a physical problem. Experiencing infertility is emotionally stressful, for both women and men. They may experience an array of negative emotions: anxiety, fear, isolation, depression, guilt, frustration, and helplessness. (3) They may feel “inadequate, damaged, defective as a man or woman” taking the “inability to reproduce as evidence of being not quite whole.” (4) They may experience a “diminished sense of masculinity or femininity” along with developing a “negative body image and self-esteem.” (5) The partner who has a physical problem causing infertility may feel guilty about depriving his or her spouse of children. (6) A couple may feel a sense of unfairness about their infertility, and react with anger. (7) In fact, “just looking at another pregnant woman, seeing a woman breast-feeding a baby, watching a baby pushed in a stroller, or running into a person buying disposable diapers in the market can create resentment.” (8)

In working with couples experiencing infertility, pastoral counselors must recognize that the situation is not one of “cold rationality.” The pastoral counselor must be aware of and sensitive to the emotional struggles of the couple. Infertile couples are people who are intensely hurting.
Pastoral counselors should not underestimate the strength of a couple’s desire to have a child. This may lead them to be willing to “do anything” to have their wanted child. As one woman who was dealing with infertility commented: “You start out going, well, I don’t think we’ll do this, and I don’t know if I’ll ever do this. But as you get going, you get to the point where ‘I’ll do anything.’ I’ll dance naked through the streets if I have to, to have this baby.” (9)

A couple who visit a reproductive clinic for professional help will be given factual information about their problem and about the reproductive options available to them. Clinicians are unlikely to explore with them the moral dimensions of possible courses of treatment. This task may well fall to the pastoral counselor.

It is true that the Church is restrictive about the methods that can be used to address infertility problems, ruling out commonly used assisted reproductive technologies (e.g., in vitro fertilization, use of donor sperm or ova, surrogacy). Church teaching on assisted reproductive technologies is a “hard sell.” The pastoral counselor should communicate the values underlying the Church’s stance on assisting reproduction (see section 1.2) and should emphasize the measures that can be taken in accord with Church teaching (see section 1.3). Using analogies, the pastoral counselor may need to remind the couple that, just because something is technologically possible, this does not mean that it is morally permissible to do it.

For some couples a point may come when they simply have to accept their infertility. The pastoral counselor may point out that such a situation “can be for spouses the occasion for other important services to the life of the human person.” (10) A story from a priest in Wisconsin illustrates this:

I know such a couple who very much longed for children of their own. After years of trying to conceive and unsuccessful attempts at corrective surgeries, they adopted two boys with severe disabilities. It seems that the Lord has endowed them with the special gifts that they need to care for these boys. Few people could care for them as they do. Because they were unable to conceive, they discovered their unique vocation to share God’s life and love in a manner that few could. (11)

Pastoral counselors should be prepared to raise the option of adoption and to make appropriate referrals as well as to discuss other ways in which infertile couples can interact with children (e.g., serving as foster parents, volunteer work with children).

In trying to deal with the emotional and even spiritual distress that may be caused by infertility, couples (and pastoral counselors) may find helpful the book The Infertility Companion for Catholics Spiritual and Practical Support for Couples by Angelique Ruhí-Lopez and Carmen Santamaria (Notre Dame, IN: Ave Maria Press, 2012; Imprimatur by Bishop Thomas Wenski, 2011). After offering a survey of causes of infertility, church teaching on various reproductive technologies, and treatment options open to Catholics, the book has chapters on discerning God’s will, the cross of infertility, a spirituality of infertility, infertility’s effect on marriage, a male perspective on infertility, the loss of miscarriage, how family and friends can help, and on the option of adoption. The book is written by persons who have themselves walked the journey of dealing with infertility.
As well as speaking with infertile couples who are still trying to have a child, pastoral counselors may encounter couples who have already had a child (or children) using assisted reproductive technologies regarded as morally wrong by the Church. In some cases, couples may have used these technologies in ignorance of Church teaching. Pastoral counselors may also encounter couples coming into the Catholic Church from other faith traditions who have used assisted reproductive technologies not sanctioned by Catholic moral teaching.

Pastoral counselors should work to bring such couples to an understanding of Catholic moral teaching on assisted reproductive technologies, including the values underlying the rejection of particular technologies. They should encourage Catholic couples to take advantage of the healing available through the sacrament of reconciliation. At the same time, pastoral counselors should assure these couples that the Church still values the children whose lives have been brought about by these means. Their value is acknowledged in the Instruction on Respect for Human Life in its Origin and On the Dignity of Procreation (Donum Vitae) from the Vatican Congregation for the Doctrine of the Faith. Using in vitro fertilization (IVF) as an example, this document affirms that “although the manner in which human conception is achieved with IVF and ET cannot be approved, every child which comes into the world must in any case be accepted as a living gift of the divine Goodness and must be brought up with love.” (12; italics added).

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Notes


2. Ibid., p. 385.


4. Ibid.

5. Ibid.


8. Ibid., p. 384.

9. Marjorie Pacholec in the video Infertility, series The Doctor Is In, Dartmouth-Hitchcock Medical Center.

