Natural Family Planning as a Family Binding Tool: A Survey Report
Walter Rhomberg, Michaela Rhomberg, and Hubert Weissenbach

In 2008, on behalf of the marriage- and family centers of the Austrian dioceses of Salzburg and Feldkirch, a survey concerning the performance of natural regulation of conception and its potential influence on family life and spousal relations was conducted by the Institute for Natural Regulation of Conception (INER), Vöcklabruck, Austria among its own members, a group of declared users and/or teachers of the method. Questionnaires were mailed to 1131 members in Germany, Austria, Switzerland, and Italy. The return rate was 43.5%. The results support earlier publications indicating that natural family planning (NFP) is associated with positive spousal relationships and family stability. NFP, here specifically the symptothermal method of J. Rötzer, improves communication and mutual respect between the spouses and is associated with a low divorce rate (3%). Periodic continence is regarded as beneficial by a majority of respondents. Since the method is free of any undesirable side effects and associated with a favourable Pearl Index, it should become more widely known.

BACKGROUND

The sympto-thermal method (STM) is one of several methods of natural family planning (NFP). It is a means of birth regulation based on the combined observation of the secretion of cervical mucus and the wake-up body temperature. In Western countries, the method has received only moderate attention since its introduction in 1965 by Josef Rötzer, where it is used by less than 5% of the population.

In 2008, an international survey was performed among the German-speaking members of the Institute of Natural Conception Regulation (INER) to clarify to what extent its members practice the method and whether the method may have an influence on family life and the quality of spousal relationships.
MATERIALS AND METHODS

The survey among the members of INER was conducted between July and December 2008. It was initiated by the marriage- and family centers of two Austrian dioceses, Salzburg and Feldkirch, and by the INER, located in Vöcklabruck, Austria. Members of INER are persons who are committed to Rötzer’s method of natural regulation of conception; some of these members are also teachers of the method.

The Sympto-Thermal Method (STM)

The method is based on the combined measurement of the so-called basal body temperature and the observation of the secretion of cervical mucus at the vagina. The basal body temperature has to be taken upon waking in the morning. In contrast to other natural methods, the Rötzer method attaches importance to living periodic abstinence in the few days of fertility if responsibility for a child cannot be taken. The duration of fertile days in a menstrual cycle can be limited to a maximum of 8 days. On condition that records on the menstrual cycle are kept and the known rules are observed, the method reaches a high reliability showing a Pearl Index of 0.6. The method can easily be learned by most people but it demands some advice and training lessons. Usually, the necessary observations soon become routine and take only few minutes a day.

Data Collection and Response

Envelopes with two questionnaires at a time were mailed to 1131 members of INER who resided in Germany, Austria, Switzerland, and Italy (region of Alto Adige) in July 2008. The questionnaires contained 14 main questions with 37 total items, which covered gender, age, education, employment, finances, civil status, number of children, religious confession, religious practice, practice and consequences of living the sympto-thermal method (STM), and some issues of family life. There was space for remarks or comments at the end of the questionnaire. The evaluation of the survey data was restricted to answers that had been returned as of the end of December 2008.

At that time, 491 envelopes with 811 questionnaires filled out had been returned corresponding to a response rate of 43.5%. Fifty-eight percent of the responders (n=473) used the opportunity to make some comments.
**Characteristics of the Responders**

Answers came from 332 males (41%) and 479 women (59%). The median age group was that between 40 and 49 years. The responders showed a higher degree of education than the general population (Table 1).

<table>
<thead>
<tr>
<th>Table 1: Education as Given in the Completed Questionnaires (801 of 811 possible answers)</th>
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<tbody>
<tr>
<td>All responders</td>
</tr>
<tr>
<td>----------------</td>
</tr>
<tr>
<td>Primary school</td>
</tr>
<tr>
<td>Technical college</td>
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<tr>
<td>University</td>
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The vast majority (96%) of the respondents said they were very content (46%) or content (50%) with their professional life; only 4% denied this. The financial situation was described as balanced by 83%, as tense by 16% and as desperate by 1% of the asked sample.

Ninety-one percent were married, 3% single, 3% divorced, 2% cohabitating, and 1% widowed; 97% of the married people had a church wedding. The median duration of the marriages was 20 years (range, 0.1–50). Premarital sexual relations with other partners were admitted by 29% of the couples. The median number of children was 3 (range, 0–11).

**Religious Confession**

The participants of the survey claimed to be Roman Catholic at 74%, Protestant at 20%, other confessions at 4% and without confession at 2%. There was no substantial difference between males and females but there were significant differences in the distribution of confessions between the countries: e.g., 95% Roman Catholics in Austria versus 49% in Switzerland.

**A Score System for Religious Practice**

For assessing religious behaviour and practice, the respondents were allocated to three groups according to their answers relating to the performance of three main religious activities: Church attendance, personal prayer, and prayer together with the spouse (Table 2).

<table>
<thead>
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<th>Table 2. A score-system for religious practice; assignment to three groups</th>
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<tr>
<td>Regular</td>
</tr>
<tr>
<td>Church attendance</td>
</tr>
<tr>
<td>Personal prayer</td>
</tr>
<tr>
<td>Prayer together with the spouse (partner)</td>
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</tbody>
</table>
Group I: 8–12 points; optimal religious practice
Group II: 4–7 points; intermediate religious practice
Group III: 0–3 points; non-optimal religious practice
*To be classified in Group I, at least church attendance and personal prayer had to reach 4 points.

RESULTS

Reasons to Have Chosen NFP/STM for Conception Regulation

Figure 1 shows 92% of the answers to the question: What was your motivation to choose an NFP method for birth control?

Other reasons for this choice were advice by medical personnel, wish to have children, reading the respective literature, or problems with artificial contraceptive methods. Only 5% of the surveyed persons received information on NFP/STM within a “preparation-course for marriage.”

Practicing the Method

The authentic sympto-thermal method (STM) was lived by 83% of the answering women, 12% did it from time to time, and 5% did not practice it. The median time of practicing the method was seventeen years (range, 0–37), the median time of keeping written records on the menstrual cycle was likewise seventeen years (range, 1–40). Nevertheless, 40% of the inquired women admitted to having also used artificial contraception at a
time during their present marriage. This, however, is seemingly a contra-
diction to an authentic living of the method; it will be discussed below.

**Communication and Satisfaction in Family Life**

The survey revealed that 61% of the respondents associated NFP/STM with an enrichment of the personal relation to the marriage partner, and 63% stated that the family life became more pleasant by living NFP/STM. Communication with the partner was improved in the opinion of 61%. Fifteen percent denied this, and 24% said “I don’t know.” In this context, 1.4% of the respondents commented on these two questions by stating that it was not easy to answer these questions since the communication and/or their family life were satisfying since the beginning of the marriage, and, therefore, no comparison was possible for them. It was quite clear, however, that living NFP/STM opened up the possibility of having talks about sexuality with the partner: 85% said “yes” to this question, 15% denied it. The rate of evaluable answers was 97% (763 answers).

**Periodic Abstinence Associated With STM**

A correlation between continence, family life and number of children is shown in Table 3. The corresponding question of the survey was: Did you practice continence if you could not take responsibility for a further child? The answers “yes” and “no” were related to different parameters of family life.

<table>
<thead>
<tr>
<th>Periodic abstinence</th>
<th>NFP/STM has enriched the partnership</th>
<th>Family life became more pleasant</th>
<th>Number of children, mean (range)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>360</td>
<td>71%</td>
<td>68%</td>
</tr>
<tr>
<td>No</td>
<td>60</td>
<td>51% ($p &lt; 0.05$)</td>
<td>50%</td>
</tr>
</tbody>
</table>

Rather surprising was the outcome to the question: Do you experience—despite a higher demand—periodic sexual abstinence as positive? Agreement came from 592 persons (82%), denial from 87 (12%). Only forty persons (6%) felt that STM is hard to live. The rate of evaluable answers to this question was 92%.

**Divorce Rates**

A divorce has been reported by twenty-five persons, eleven men and fourteen women, corresponding to a 3% divorce rate. Divorces were not related to the religious confession but to some extent to the religious practice.
Marriages were divorced after a median time of 12 years (range, 1–26). Among the subgroup of divorced couples some interesting trends and features were observed: They had a median number of 2 children (range, 2–6). Only half of the divorced persons (12) practiced NFP; one couple did it in part.

Artificial conception methods within marriage were used by 17 divorced persons, 5 denied this and 3 did not answer. So, the use of artificial birth control in 17 of 22 evaluable respondents (77%) is much more frequent compared to the whole sample (40%).

Figure 2 shows the percentages of divorces in relation to the religious practice according to the score system described in Table 2. It is not surprising to see a correlation between an optimal religious practice and a low divorce rate but it is noteworthy to realize the divorce rate of 12.5% among people with a “non-optimal religious practice” (group III). Such a number is still far below the average rates in the German-speaking European countries.

Voluntary Comments

The periodic continence that is associated with an authentic living of the STM was mentioned in 31.5% of the comments given by women. The vast majority regarded continence as being favorable for two reasons: First, it seemed to be convenient for some women not to be constantly at the partner’s disposal, and secondly, periodic abstinence strongly enhances anticipation and excitement in the eyes of these women (many husbands shared this latter view but not expressly the first one). The tenor of these comments may be summarized as follows: “The STM with lived continence keeps the joy of sexuality maintained.”
DISCUSSION

The sample size of this survey seems to be sufficient. Of course, this is a selected population of persons who stand behind the sympto-thermal method and who have, in general, relatively high educational attainment and a Christian religious background. The mailed envelopes had a response rate of 43.5% which is within the expected range. The questionnaires, however, were also sent to members who were no longer tightly connected to the INER, explaining in part the limited return rate. This return rate was compensated by the completeness and useful evaluability of the questionnaires. In addition, there was a large number of voluntary comments given in 58% of the answered mail, predominantly by women.

There is seemingly a tension between the report of authentically living the STM (83%) and the use of artificial birth control (40%) at some time of a marriage. Unfortunately, the questionnaire did not ask at which time and how long the artificial birth control was used. Many couples used this practice (hormonal contraception, condoms, intrauterine coil) only at the beginning of the marriage when the STM was not yet known to them. So, the discrepancy between an authentic living of STM and the high frequency of using artificial birth control at some time may be partially justified.

According to the answers in this survey, the sympto-thermal method fosters communication and facilitates dialogues on intimate issues. It increases mutual respect between the partners and seems to bring peace to the marriage. Our results are in accordance with an earlier publication of Mercedes Wilson indicating that NFP is associated with positive spousal relationships and family stability. These aspects of NFP were recently supported by new data of KD Skocovsky and his respective review of the world literature.

Stability of families may also be measured on the basis of the divorce rate of a sample. The overall divorce rate in this survey was 3%. The divorce rate is dependent on several factors. Primary influence can certainly be ascribed to religious belief and faith. As expected, the divorce rate was very low in the group with the favourable religious score (group I, 1.7%) and lowest in a subgroup of people who practice regular prayer with their partners in addition (0.6%). These observations are in complete accordance with what Mercedes Wilson found in 1989. However, it is of interest that the divorce rate in group III (non-optimal religious practice) still lies far below the different national values. For instance, the present divorce rate in Austria has reached 48% (ranging from 37% in Tyrol to almost 60% in Vienna). From this finding the question arises whether the practice of STM per se could be a factor that contributes to the stability of marriages. The fact of an improvement of communication between the partners by living
STM—only 15% of the respondents have denied this aspect—strongly supports this assumption. In addition, and this is a very interesting point, family life seems to be happier if periodic abstinence is included into the practice of the STM and not bridged over by different artificial methods of contraception (Table 3). Nevertheless, we are aware that a causal relationship between STM and a low divorce rate can—as yet—hardly be postulated since the data is retrospective in its nature and this was not a controlled study.

Although periodic abstinence is the most frequent source of discontent, a third of the voluntary comments of the responders indicates that continence has positive aspects too. Despite all comments about the difficulty of living periodical abstinence and, for example, the problems associated with the regular watching the temperature in the morning, only 1 out of 453 women would not recommend NFP/STM to other people.

Because of this and the fact of a very favorable Pearl Index, the sympto-thermal method of NFP—which is also free of any of the harmful side effects caused by chemical or some barrier methods of contraception—warrants not only further dissemination in the public but also a more exact description in textbooks and the syllabi of gynecologic departments.

Notes


2. This figure comes from statistics for Austria only, but there is no evidence to suggest that rates are higher in other Western nations. G. Doblhammer, W. Lutz, Ch. Pfeiffer, “Family- and Fertilitysurvey (FFS),” Austrian Institute for Family Studies 28 (1996): 54, 162.


4. For details, see J. Rötzer, Natürliche Empfängnisregelung. Die symptothermale Methode, 34th ed. (Freiburg: Herder, 2010).


6. K. D. Skocovsky, Fertility Awareness-Based Methods of Conception Regulation: Determinants of Choice and Acceptablility (Brno: Masaryk University, 2008).

7. Wilson, “Natural Family Planning.”
