

---

## N.F.P. Yesterday-today-tomorrow

### KOREA\*

---

Nineteen hundred and eighty three, this year, we celebrate ten years of N.F.P. activities in Korea. We are grateful to God for the many graces and blessings received within this first decade.

Looking back we can say that the challenge of ten years ago was quite different from the challenge we face to-day. The Ovulation Method was first taught in the Pastoral care center of St. Coulumban Hospital in Mokpo, a small town in the south coast. We had limited materials, traslation being a problem, no experience and no money. The hospital administrator was reluctant to invest scarce resources in this strange new venture. The nurses however showed a great interest and during their lunch-break made hundred copies of the ovulation chart by hand. We used this in our pilot study.

The first group who learned the method were of workingclass families, some Catholic and a number did not have any religion. We taught the couples all we knew and in turn we learned much from the couples. We know of a number of those couples who are happily practising N.F.P. today. Our teaching was monitored by John and Lyn Billings by mail from The Research Center in Australia.

\* 이 글은 행가운 전국협의회 사무국장인 「매리맥휴」수녀님께서 오는 11월 20일부터 열흘간 홍콩에서 열리는 국제가정생활 증진협회 총회에서 발표할 한국의 자연가족계획 활동에 관한 내용이다.

In the early days there was widespread enthusiasm for a natural method other than Rhythm which obviously did not work for everybody. Disenchantment with the Pill and IUD because of related health problems led to a great demand for N.F.P. too. Couples learned the method quickly and became autonomous after 3-4 months. The teachers received much gratitude for their services and there was a high degree of satiesfaction and motivation.

Today mammoth programmes with all kinds of incentives for sterilization, penalties for more than two children is taking its toll. After every directive appears, i.e. denial of medical insurance for a third child, priorities in jobs and housing where a certificate of sterilization is shown, young mothers pregnant with a third child flock to clinics, contemplating abortion.

There is a high degree of anxiety and tension in a client who has had two children; this affects her learning process. Young teachers also experience tension, which of course if transmitted. We are experiencing teacher 'burn-out' in some cases. Still there is a demand from young people for N.F.P. especially for Pre Cana programmes and after the first birth. NFP offers peace of mind during partial and full breastfeding and gives freedom to plan the next pregnancy.

## GROWTH AND DEVELOPMENT

The programme was started in response to the Bishops Conference of Korea in 1972. At the time the Bishops were greatly concerned with the rising tide of abortion throughout the country and requested the Catholic Hospitals Association to advise them on this matter.

In 1974 Bishop Stewart established NFP centers in all Catholic hospitals, clinics and parishes in his diocese of Chunchon. Teacher training took the form of seminar cum apprenticeship, learning on the job with a more experienced teacher. All experiences were pooled and monitored. We learned too by our mistakes. Clients were mainly from rural and working-class families. There was a great demand for service; mothers were so happy to have found a friend and confidence in the NFP teacher.

In 1975 the Bishops Conference appointed Bishop Stewart to head the Family Life Commission. In May of that year The Catholic Hospitals Association with representatives from all the dioceses met in Seoul to launch the Korea Happy Family Movement as a National Organization.

Following this historical event, centers were established in all Catholic hospitals and Clinics throughout the country. Centers were established in each diocese comprising of a priest-director and a qualified NFP couple, outreach to parishes and out-mission stations was gradually undertaken in each diocese. The Co-ordinating office is situated in the Catholic Medical College in Seoul.

## GOALS AND OBJECTIVES

The goal of the KHFM is to make NFP

available to every couple in Korea and to teach fertility awareness to young people as a wholistic approach to human development. The philosophy of the programme is Humanae Vitae and more recently, Familio Consortio. While teaching couples to understand their fertility and infertility, they are helped to grow in love and understanding, mutual sharing and forgiveness.

Mother and child care, preventive medicine, and counselling is a component of the Korea Happy Family Movement programme, especially in hospital and clinic based programmes.

The N.F.P. teacher at parish level in rural areas does a lot of referrals and picks up disease in its early stages.

One of our national level teachers is now completing a masters degree in Family Counselling at Eha University.

## FUNDING

Funding is difficult for this type of programme.

The total budget for 1980-1982

	Total Budget	Overseas Funding	Diocese Self-Support
1980	₩67,400,000 \$ 84,250	₩18,080,000 \$ 22,600	₩49,320,000 \$ 61,650
1981	₩77,250,000 \$ 96,562	₩28,570,000 \$ 35,712	₩48,680,000 \$ 60,850
1982	₩64,810,000 \$ 81,012	₩18,000,000 \$ 22,500	₩46,810,000 \$ 58,512

Major expenses are salaries, printed materials and workshops'.

## NFP SERVICE AND EDUCATION DEVELOPMENT

In 1978 Korea was one of 6 countries in the WHO teaching evaluation package. The

symp tothermal method was introduced into four centers at that time. This method is popular where the NFP center is associated with the OB Gyn. Departments in hospital. Teachers have proved to be of invaluable assistance to the Infertility Clinics, as well as in other problem areas.

We have at present 194 teachers working from 77 centers. Half of these are salaried; 20% receive a part-time salary and the remainder are volunteer-workers. The drop-outs are from volunteers trained during the last 3 years. We used to evaluate teachers on the number of clients and pregnancy rates, after investigation of course. The varying factors influencing the work of the teacher today makes a fair evaluation difficult. Some personalities can take more pressure than others. We tend to evaluate "case by case", according to their particular situation and personal attributes.

### ON-GOING EDUCATION

A national 2-day live-in seminar is held every year for teachers. It is usually multidisciplinary in nature covering spiritual, psychological and scientific aspects of family life. It is also a happy get-together for everybody; building moral support and having fun. Lectures on detection of early disease in mothers and children are given by medical consultants and public health nurses.

Seminars for priests and sisters are also held every year, dealing with the Pastoral aspects of family life and it's relation to NFP. Dioceses conduct their own teacher-training workshops with help from the coordinating office in Seoul. The format of the seminars vary from place to place, usually an afternoon seminar one day a week for 6 weeks, with consultation and superv-

ision on a followup basis for one to two years. A week-end seminar is preferable, where mothers are free to attend.

### MATERIALS USED

We use a slide-presentation as a introduction to methods of NFP. Also used are some of the teaching aids from the WHO programme, and The Human Life Foundation (New York). The Atlas the Ovulation method-"The Joy of being a Woman" and "I married you" by Trobish. Humanae Vitae and The Gospel. Films... "First Day of Life"; "Abortion-A Woman's Decision" are shown.

### TEACHER TRAINING

The main requirement for teacher-training is that she should be an experienced user. That she should have a reasonably good marriage. Normally we require them to be Catholic, but we do have Protestants and Buddhist teachers who accept our philosophy. This too adds a dimension to the programme. All teachers are first thoroughly instructed in the O.M. and special circumstances relating to it. The sympto-thermal method is then thoroughly taught to all teachers. Four centers teach S.T. method and the remainder 73 teach O.M. In our surveys we do not differentiate between the methods used, as long as it is N.F.P.

We use the system "like to like"; country people learn better from a teacher who is one of themselves and factory workers learn better from a factory worker. Nurses and school-teachers are looking for more sophistication, so the teacher-training programme varies from place to place. Most of our teachers are high-school graduates, a few college graduates and Registered Nurses.

Over the last 10 years, through seminars, retreats, personal reading and experience, our teaches have become the most dedicated apostles you can find in NFP today.

### SERVICE DELIVERY

Statistics 1980-1982	1980	1981	1982
Learned N.F.P.	8,619	9,374	9,619
Surveyed	6,678	5,688	6,725
Not surveyed	1,941	3,686	2,894
Happily practising N.F.P.	4,816	4,544	4,827
Reverted to other methods or gave up N.F.P.	1,535	796	1,553
Husband abroad in a foreign country			150
Pregnancy	227	248	95

Among those not contactable or who did not contact us, we know there are drop-outs, we also know that couples who give up the method for a year or two, return again to learn and practise N.F.P. I have met many such mothers many times in different centres.

Our pregnancy rate dropped from 248 to 95 this year. After monitoring teaching centres we found we needed to concentrate on teaching the O.M. during Breat-feeding. We are happy about this and our less experienced teachers have gained confidence.

### Information and Recruitment

Information seminars are given regularly to Catechumenate classes in parishes. In Seoul highschoools, the graduating class of girls is usually a thousand. We have a full schedule providing fertility awareness and an introduction to NFP on twice yearly programme. We also give this programme in

colleges and universities throughout the country. Approximately 50% of clients are Catholic, the rest are Christian denomination, Buddhist and no religion.

### Pre-Cana

The Happy Family Movement is a vital part of the Pre-Cana Conferences. We teach the NFP in detail to the couples and refer them to their local centers for follow-up. Many return to us for follow-up; young couples are anxious to spread the good news to their non-Catholic friends. We have sent out questionnaires to this group-90% indicated that they wanted to practise NFP. The programme is also in great demand in factories, with bus-conductresses, bank clerks and office-workers. We are already meeting mothers who were first introduced to NFP at the above type of programme. There is a marked difference in the confidence of the woman where the couple are introduced together and where the young woman learned the method in a female group before marriage. We see Pre-Cana Conferences as a golden opportunity for the growth of NFP.

### NFP in Medical and Nursing Schools

NFP is part of the curriculum for medical and nursing students of the Catholic Medical College in Seoul. Students are instructed by a competent NFP teacher. Female students chart their own cycles. Male students sometimes bring their girl-friends along to learn about NFP.

Five nursing colleges have our programme as part of the curriculum for public health. We find young people and especially young couples eager to learn.

## **Evaluation and Accountability**

Each diocese is accountable for overall administration of their programme. At the annual general meeting in November of each year all Diocesan Family Life Directors, with the principal teachers meet with Bishop Stewart and the Co-ordinating Committee to review past performances and difficulties, as well as charting the course for the coming year. This is always a very stimulating meeting. NFP Principal Teachers consult and collaborate with the co-ordinating office regarding teacher-training and teaching effectiveness. Teachers and Centers are visited on a regular basis by the National Co-ordinator. These visits are to encourage mutual sharing of experiences as well as offering encouragement and support. This entails a lot of travelling but has proved worthwhile. An annual survey of the work of each diocese with a progress-report is taken every year and circulated to all the dioceses. We also realise the need for development in this area. A quarterly newsletter is circulated throughout the country.

It costs \$ 10-15 for a client to become autonomous.

## **Recommendations**

We consider the Church related structure of the programme a big help in promoting KHFM. NFP is accessible to everybody in Korea. The relationship with the Catholic

Medical College has also helped to establish the credibility of NFP. We believe we have a well-trained group of dedicated teachers. Our greatest challenge today is to keep on going in the face of massive counter-propaganda programmes; keeping teachers motivated-I might add *highly-motivated* in the present social climate. Monetary incentives would be helpful. Raising the necessary funds is also a challenge. Our greatest needs are financial and material resources.

## **Research**

Our programme would certainly benefit from any sound research. We would like to see more bio-medical research, pin-pointing ovulation. We also need more information on the psycho-social factors affecting the practise of NFP.

## **Country Data**

Korea is 98,000km<sup>2</sup>, peninsular and situated in South Asia. The population is forty million. It is one of the most densely populated countries in the world.

The Government is democratic. National Security State.

All methods of family planning are available including abortion. 55% of all married women practice contraception, 13% practice noncontraceptive methods including NFP.

The government has a rigidly enforced population policy concentrating on female sterilization during the past two years.