

***Franciscan University Presents***  
**“Human Rights vs Religious Freedom?”**  
**With guest, Helen Alvaré**

**“In Defense of Life, Love, and Freedom**

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Prof. Helen Alvaré discusses religious liberty and the effect of a 50-year social experiment shaping views about human life and sexuality

by Alton Pelowski

A rule issued in August by the U.S. Department of Health and Human Services mandates coverage of contraception and sterilization in most private health insurance plans. The U.S. bishops, saying the directive does not offer appropriate exclusions for religious institutions, view the mandate as an attack on religious liberty.

In September, the U.S. bishops formed an Ad Hoc Committee for Religious Liberty to address concerns affecting religious liberty and conscience protection of individuals and religious institutions. The committee, chaired by Supreme Chaplain Bishop William E. Lori of Bridgeport, Conn., has focused on a number of recent public policy concerns related to the Church’s teachings about human life and sexuality. For example, the U.S. bishop’s Office of Migration and Refugee Services was recently denied federal funding for its services, due to new U.S. Department of Health and Human Services regulations requiring that contraception and abortion be made available to victims of human trafficking.

To explore the implications of such policies, Columbia interviewed Helen M. Alvaré, an associate professor of law at George Mason University School of Law in Fairfax, Va., and former spokeswoman for the U.S. Conference of Catholic Bishops’ Secretariat for Pro-Life Activities.

**Columbia:** How does the Department of Health and Human Services mandate for insurance coverage of contraception and sterilization in virtually all private health insurance plans relate to religious freedom and to public health?

**Helen Alvaré:** What the U.S. Department of Health and Human Services did was to mandate coverage of contraception, sterilization, and some emergency contraception that can act in an abortifacient way, under the rubric of “preventive health care services.” They provided what they called a “conscience clause,” but framed it so narrowly that any religious entity that either serves or employs people of other faiths cannot take advantage of this exception.

The U.S. bishops’ delivered excellent First Amendment comments to HHS. The comments delivered by a conscience task force team that I chair at the Witherspoon Institute focused not only on the indispensable contribution of religious freedom to American society, but also on current scholarship indicating convincingly that the HHS

mandate is not “preventive health.” To the contrary, it could even have the effect of increasing unintended pregnancies, out-of-wedlock births and abortions. This is due to a phenomenon called “risk compensation,” whereby, when the federal government floods the population with birth control, more people engage in the risk of sex outside of the committed relationship of marriage. The notion that this mandate is “preventive” is really absurd.

**Columbia:** Similar requirements by HHS and the U.S. Agency for International Development threaten the work of Migration and Refugee Services and Catholic Relief Services, respectively. What is the foundation for such policies?

**Helen Alvaré:** In both cases, there is demand that the Catholic Church — a long-term, high-quality and renowned service provider — engage in services that violate its conscience. I believe this demand flows out of an ideological commitment to abortion and contraception. The former is called a “tragedy” even by its supporters and there is no proof that the latter has solved any of the health problems it has been deployed to cure. At the same time, there are a lot of people, whether in international or domestic service programs, who want a service provider who respects all human life and the full meaning of human sexuality. Undoubtedly, there are many recipients of the Church’s services who would like to avoid providers that believe the body is an object, sex is an animal instinct, and the unborn child is less than human.

The federal government, more than ever before, will not abide the slightest dissenting voice on the subject of human sexuality. They have put their vision of the human person directly in conflict with religious freedom.

**Columbia:** How might Catholic medical institutions be affected by such laws pertaining to conscience rights and religious freedom?

**Helen Alvaré:** If the federal government refuses to back down, it is possible that Catholic institutions will change in a variety of ways. Some might disappear whether because of funding cut-offs or because they are simply not permitted to operate under the terms of a law. Others might begin employing and serving only their fellow Catholics, withdrawing from the public square in that way. Despite the fact that religious institutions have been superior providers in education, health care and social services, the federal administration appears to prefer that the government cooperate with, or even allow to exist, only those organizations strictly agreeing with the government’s philosophy. As a result, religious institutions could grow smaller and, in some cases, disappear.

**Columbia:** In light of the widespread use of contraception, the Catholic Church’s teachings related to life and sexuality are often seen as out-of-touch, or at least as purely private religious beliefs. How do you respond to this?

**Helen Alvaré:** For the last 40 to 50 years, policies at both the federal and the state level have suggested that separating procreation from sex will make people happier, alleviate poverty, and prevent out-of-wedlock pregnancy, abortion and sexually transmitted

diseases. The Center for Disease Control and other experts tell us that the vast majority of women who have ever had intercourse have used contraception. It is very difficult to imagine that you could saturate the population any more. Yet, we have the highest rates of nonmarital pregnancies and births in our history, and continuing high rates of abortion and sexually transmitted diseases — higher than before the government became so activist on birth control. There remains, however, a tendency for both federal and state governments to continue to propose more birth control as the answer to nearly everything, and the greater availability of abortion as the answer to everything else.

The fact that this solution has been proposed for so long and has failed so utterly is actually leading to public reflection. Maybe this is precisely the time to encourage a new disposition toward human sexuality. When you separate sex from babies and reduce sex to just another activity, it's not only the children who suffer because of the resulting abortions and unstable family situations, but the adults as well. Women, in particular, are made miserable in the new market for relationships made possible by widespread birth control and abortion; they feel they must submit to sex as the price for a relationship. The current situation is the result of a gigantic, half-century experiment of distorting the sacredness of sex.

We have an opportunity right now to speak about the fact that the Catholic approach, which is based on natural law, is actually the better path for happiness, for authentic equality between men and women, for the wellbeing of children, and for the health of society. It is a different approach to sex, to marriage, to parenting that people will find attractive, because they have new evidence and have seen the government's experiment go terribly awry.

**Columbia:** What accounts for such an aggressive push for contraception despite the fact that the data is opposed to it?

**Helen Alvaré:** The fact that government leaders won't confront the data is a really stunning feature of this debate. First, I think that they have decided to place their faith in technology — they simply refuse to believe that a technological fix, involving more effective contraception, won't move these problematic numbers in a more favorable direction.

Second, it appears that they can't abide a proposed solution — the kind the Catholic Church would promote — that involves sexual restraint and putting the dignity and sacredness back into human sexual relationships. Rather, I believe that policymakers have adopted a philosophy that some authors have called “sexualityism.” Sexualityism is a belief that sex has nothing to do with procreation or even the unity between two people, but only wants to preserve the good of expressing yourself sexually for the pleasure — psychological, physical or otherwise — it gives you as an individual. If the government retreated on its current policies on contraception and abortion, people would once again have to think about sex in its relationship to the good of the other partner and the good of the child.

In addition to the birth control mandates, I think the clearest expression of the federal government's embrace of this ideology is its refusal to defend the Defense of Marriage Act. Think about it! This means that our federal government is affirming sexual expression with no possibility for procreation — in same-sex relationships — as of equal value with sexual expression intrinsically related to procreation.

**Columbia:** Amid the spectrum of political issues that voters have to consider, how important is it for Catholics to vote for candidates and policies that uphold the Church's principles about these issues?

**Helen Alvaré:** It is very important now for all Catholics as citizens to know what the Church teaches about human sexuality, marriage and family, and to recognize that this teaching has to do with human happiness and freedom, the wellbeing of the vulnerable and the equality of men and women. The health of their own families, communities and really their nation is at stake. Catholics need to take these teaching seriously and seek out candidates who support this view of the human person. They also need to contact members of their federal and state delegations, because there is a tremendous amount going on right now with regard to marriage, respect for life, health care and educational policy that closely relates to whether or not Catholics will even be permitted to act publicly, or even speak publicly, about their convictions in these crucial areas.

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