



NEWSLETTER

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Family Solidarity

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EDITORIAL

Let's celebrate the remarkable milestone of reaching the 100th issue of this newsletter! Four times a year, this little publication keeps you updated about our activities, both at national and international level, and also about family and pro-life issues.

100 issues are a significant achievement, possible only thanks to your support. Your regular contributions are Family Solidarity's only source of funding, and I cannot emphasise enough how grateful we are for your generous help.

This year marks the 40th anniversary of the first meeting of our organisation. On 10th June, we gathered to hear the memories of some of the founding members of Family Solidarity. It has been a touching experience for the younger participants, and we have remembered those past members who are no longer with us.

Our next event is on Saturday, 1st July, just before the Rally for Life, in Dublin. Last year, we witnessed the remarkable presence of Dr Dermot Kearney, and this year, we are thrilled to welcome a special guest all the way from England: the courageous and resilient Isabel Vaughan-Spruce.

Despite facing adversity, Isabel's unwavering commitment to her pro-life beliefs led her to be arrested not once, but twice, for the simple act of silently praying outside an abortion clinic in Birmingham. Her story will leave you inspired and motivated.

Join us at 12:00 pm at the Abbey Church, right on Parnell Square. Seating is limited, so be sure to secure your spot by registering in advance, simply writing at **familysolidarityireland@gmail.com** .

After the talk, we will all attend the Rally for Life, which begins at 2.00 pm. This is more than just an event; it's an

opportunity to stand united, amplify our voices, and champion the sanctity of life. Let us come together in solidarity and create an unforgettable atmosphere of hope, inspiration, and empowerment.

Angelo Bottone

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MARRIAGE IN IRELAND STILL DECLINING DESPITE A BUMPER 2022



The number of marriages that took place in 2022 saw a significant increase on 2021, but this was mainly due to the postponement of weddings during the Covid pandemic. Overall, the marriage rate in Ireland remains low compared with a few decades ago.

In all, 23,173 marriages were registered last year, according to the Central Statistics Office (CSO). This is the highest number in Ireland's history and represents a 14% increase compared with 2019, the last full year before the pandemic. The marriage rate per thousand adults was 4.4 last year while it was 4.1 in 2019.

What will the rate be next year when all the postponed weddings have already taken place? It is very likely to drop back down again.

In 2012, the rate was 4.5 per 1,000 adults, and in the 1970s, it was 6 or even 7 per thousand. Today, the marriage rate is around the EU average, and the EU average is at near historic lows. It is also worth noting that data about divorces for 2022 are not yet available, but there has been a consistent increase in divorce applications in the past four years.

In terms of the type of ceremonies chosen by the couple, last year the most popular form of celebration for opposite-sex spouses was a Catholic ceremony (42%), followed by a civil ceremony at 26%.

While the percentage of civil ceremonies hasn't changed much in the last ten years, from 28% to 26%, Catholic ceremonies have seen a sharp decline: in 2012 they were 65% of marriages.

In 2022, ceremonies conducted by a religious celebrant accounted for 64% of all marriages, including same-sex unions. Besides the traditional churches, couples have more options nowadays. Only 1.6% of weddings were celebrated by the three main Protestant denominations combined (Church of Ireland, Methodists, Presbyterians).

Many will be surprised that the Spiritualist Union of Ireland, which is counted among the religious celebrants by the CSO, performed almost 10% of ceremonies.

9.3% of couples opted for a Humanistic ceremony, which is considered non-religious. In 2022, 618 same-sex marriages were celebrated, representing the 2.7% of the total. This percentage continues to decline.

People are getting married at an older age. In 2022 the average age of grooms was 37.4. Ten years ago, the average was 34.7. The average age of brides was 35.4 last year, compared to 32.6 in 2012.

Covid had a detrimental impact on the marriage rates. While the number of marriages registered last year has seen a temporary increase, this rise was mainly due to the weddings postponed during the Covid pandemic. Marriage in Ireland is still declining.

NEW SEX EDUCATION PROGRAMME ALL ABOUT GENDER IDEOLOGY

The new Social Personal and Health Education (SPHE) programme for Junior Cycle pupils (aged 12-15) has been approved by the Minister for Education. It incorporates Relationships and Sexuality Education, but incredibly, the new curriculum specification never mentions pregnancy or babies, and 'men' and 'women' are treated as almost alien terms. Instead, the curriculum heavily emphasises topics such as 'gender' and 'sexuality,' which

raises questions about its underlying ideological agenda. This is an extremely ideologically loaded programme. A simple analysis of the language and the concepts used in the official documents shows the priorities of the Department of Education and of the National Council for Curriculum and Assessment (NCCA).

In the 28-page document, the word ‘birth’ appears only once and not in relation to pregnancy, which is a natural consequence of sex. No, the word “birth” occurs only in the definition of gender identity, with the bizarre expression “sex registered at birth”. The NCCA document says: “Gender identity: a person’s felt internal and individual experience of gender, which may or may not correspond with the sex registered at birth.” It seems to suggest that the sex of a newborn is noticed and registered not according to science, in an objective manner, but by some arbitrary or curious cultural practice.

It also says: “when children are born, their sex is largely decided or ‘assigned’ on the basis of their external genitalia, which generally – but not always – reflects their internal hormonal and chromosomal make-up.” These cases exist but are extremely rare. Why do young students need to be told about rare anomalies rather than what normally happens?

While in the 2016 version of the same document, “gender” appeared only 5 times, in the updated Curriculum Specification it is used 19 times – a huge increase – while there is no mention of “woman” or “girl” at all. “Boys and girls” also seems to be a politically incorrect expression nowadays, maybe not sufficiently inclusive of all other identities, and it is avoided by the Department of Education.

The word “female” is used only three times by the NCCA, two of which appear in the definition of ‘gender’: “Gender: Refers to the social and cultural factors influencing what it means to be male and female, i.e. the socially constructed roles, behaviours, activities and attributes that a given society considers appropriate for men and women. It is important to distinguish gender from ‘sex’ which refers to the biological and physiological characteristics that are defined as being male and female.” This is also the only occurrence of the word “women” in the whole document.

It is pretty obvious that the updated SPHE course focuses not much on sex, i.e. the differences between being a boy or a girl according to science, but on the ideological notions of gender identity and gender expression. These are the priorities of the Department of Education and of the NCCA.

Instead of sex education, the new course should be renamed as “gender ideology education”.

EXTEND ASSISTED SUICIDE TO THE POOR, ARGUE CANADIAN ETHICISTS



Assisted suicide should be made available to the poor, the homeless and the disabled, two ethicists from the University of Toronto have argued, and a large number of Canadians agree with them. Once again, we see how quickly assisted suicide and euthanasia can become normalised in a country and be seen as an acceptable way out of a difficult life.

The philosophers, whose article appears in an academic journal, maintain that those who live in ‘unjust social circumstances’ should not be prevented from accessing what is euphemistically termed ‘Medical Aid in Dying’ (MAiD).

Poverty, disability, or homelessness can cause despair. There already have been cases in Canada of people asking for MAiD because they could not afford a house compatible with their medical condition. Experts are concerned by the growing number of prisoners asking for assisted suicide.

One argument against allowing such people access to assisted suicide is that their decision is not really autonomous because of the pressure created by their situations. Nonetheless, the two ethicists reject the idea that “the autonomy of people choosing death in the context of injustice is necessarily reduced”. They believe that decisions taken in desperate and oppressive circumstances have to be respected anyway.

The central requirement for access to euthanasia in the Canadian legislation is “having enduring and intolerable physical or psychological suffering”. It is irrelevant whether suffering is determined by social circumstances rather than medical reasons, the philosophers maintain in their article.

They acknowledge that “it is not feasible to expect medical professionals to assess the extent to which the person in their care has had their options restricted because of oppression.” But they don’t find this a good reason to reject the call for expanding the grounds to access MAiD.

Social conditions could improve but until this happens, they say, it is better for the poor and the disabled to be able to choose to die. They call their approach “harm reduction”.

“In the case of the availability of MAiD in Canada to people who not only might but have explicitly said they would choose differently if they had access to the options they

preferred, we argue that the least harmful way forward is to allow MAiD to be available.”

Not allowing poor people to request assisted suicide would cause them more harm, is the bizarre conclusion of these highly educated ethicists. Refusing options amounts to perpetuating suffering.

Assisted suicide and euthanasia were initially introduced in Canada in 2016 on medical grounds for incurable illnesses when death was foreseeable, but soon the grounds were expanded by court decisions or updates in the legislation.

Pro-life activists’ predictions of a slippery slope are becoming a stark reality, unfolding at an unexpectedly accelerated pace. Safeguards are constantly eliminated or relaxed.

A recent survey showed that large numbers of Canadians believe that the grounds for access to MAiD should include inability to receive medical treatment (51%), disability (50%), mental illness (43%), homelessness (28%), and even poverty (27%). Support for these reasons is higher among young Canadians.

So, we can see that the opinions of the two ethicists are shared by a substantial portion of the Canadian population.

If death is the solution to suffering, there is no reason why it should not be offered to everyone. And if suffering is

caused by social injustice and lack of alternatives, these philosophers will tell us that the right to kill oneself should extend to everyone, including the poor and the disabled. Lack of hope does not undermine autonomy, they say.

This is where the assisted death legislation is leading Canada and it should serve as a cautionary example for Ireland and for all other countries considering similar laws.

ABORTION LAW REVIEW HAS PRO-LIFE MEDICS IN ITS SIGHTS



The official review of Ireland's abortion law, published last week, was exactly as bad as pro-life campaigners feared it would be. Its only aim is to make it even easier to access abortion. It shows no visible concern for the unborn child and no visible wish that abortion should be rare, which is what the Government said it intended at the time of the abortion referendum.

The review recommends fully decriminalising abortion, targeting pro-life doctors and nurses, getting rid of the three-day waiting period, and allowing abortion in cases of a 'fatal foetal abnormality' even when the baby is likely to live more than 28 days beyond birth.

The review, commissioned by the Department of Health, also confirmed that some babies are born alive after an abortion and left to die.

Here are some the worst recommendations:

- Decriminalisation of abortion.

Currently, abortions performed outside the limits of the law are considered a criminal offence. The review wants a full decriminalisation. Even Simon Harris, when he was the Minister for Health, thought that decriminalisation “would present a risk to the lives and health of women and that it would protect women who were forced into seeking an abortion, or where there was a dominant personality or sexual abuse.” The review disregards this thinking, even though it comes from a pro-choice perspective.

- Cracking down on pro-life doctors and nurses.

The review says the health system should “positively discriminate in favour of persons willing to provide termination of pregnancy services” during the recruitment process of doctors. In other words, do not employ pro-life medics. Conscientious objectors are always presented in negative terms in the review.

In addition, it recommends so-called “values clarification” workshops in order to persuade pro-life doctors and nurses to become pro-choice.

It praises the HSE for already running these workshops which aim at “enabling participants to reflect on their values and thoughts about termination of pregnancy services by looking at their own beliefs and attitudes from the [point of view] of women seeking the service.”

Over time, the effect of these measures would be to sharply reduce, if not eliminate completely, the pro-life presence in Irish maternity wards.

- Removal of the mandatory three-waiting period between the first visit to the doctor and an abortion

Waiting periods are a common feature in abortion legislation in other countries. In Italy, for instance, it is seven days; six days in Belgium. It allows women to reflect on their decision. According to HSE data, 17% of Irish women who made an initial appointment with a doctor with a view to ending their pregnancy did not return, indicating they went ahead with their pregnancies. The review ignored official data and used instead figures collected by a pro-choice group that underestimated the number of women who changed their mind.

- Expansion of the current limits for abortion in cases of disabilities

Currently, an abortion can be requested at any moment of the pregnancy when the baby has a medical condition that

might lead to its death within 28 days of birth. The review acknowledges that there is no universal list of such conditions and recommends a relaxation of the current restrictions. It also acknowledges that “fatal foetal anomaly” is not a medical term, something that the pro-life side continuously stressed during the referendum campaign.

– Expanding the range of professionals who can provide abortions

Nurse or midwives should be able to offer abortions, according to the review, in order to increase the number of providers and improve its geographical distribution. Currently, 11 of 19 maternity hospitals or units, and 422 GPs or clinics (around 10% of the total) offer abortions.

– Starve pro-life hospitals of funding

The review recommends the diversion of funding from maternity hospitals not-providing abortions to ones that do so.

The review also recommends the development of specific guidelines to deal with babies who are born alive after an abortion. It says that “foeticide [killing the baby while still in the womb] will prevent parents and labour ward staff from facing the agony of neonatal distress and pain”. No concern is shown for the baby.

The review fails to address important issues such as the cases of misdiagnoses that have led to the aborting of healthy babies, the lack of abortion pill reversal treatment for women who have changed their minds after taking the first of the two abortion pills, the lack of mandatory counselling during the three-day waiting period.

This document says nothing about reducing the number of abortions, even though the Government promised abortion would be rare. The entire aim is to make it easier to access abortions which would only increase the rate. According to Health Minister, Stephen Donnelly, around 8,500 abortions took place last year.

ABORTION PILL RISKS NOT BEING PROPERLY EXPLAINED TO WOMEN



Women are not being made fully aware of the risks that can be associated with abortion pills, a conference organised by Bios Centre in Britain has been told. Over the phone consultation adds more danger to their use. The same applies here in Ireland where 133 “adverse incidents” related to abortion have been reported by women to the State Claims Agency

over the last five years, according to figures obtained by Peadar Toibin.

Abortion pills have become the most common method for terminating a pregnancy, particularly in the early stages of gestation. In Ireland, women up to nine weeks pregnant usually take the abortion pills at home, following a consultation with a GP or a family planning clinic, either in-person, or by phone or video call.

However, the safety and the effectiveness of this method, particularly when used outside a hospital, has been questioned by Dr Greg Pike of the Bios Centre, who was addressing a conference this week organised by the Centre.

Is women's choice really based on informed consent, he asked? Do they know and understand the danger of taking such pills?

“Women have been misled by abortion providers”, he said. They are not made fully aware of risk and the effectiveness of the abortive pills, Dr Pike claimed.

Citing research, he noted that 40% of women who have taken those pills said they experienced more pain than expected. These figures raise questions about whether women are properly informed of these statistics before being prescribed the abortion pill.

Furthermore, the seminar was told, there has been no proper study conducted on the psychological effect of seeing the dead embryo following the abortion. In Ireland, the HSE guidelines rather callously say: “You can decide how to dispose of the pregnancy remains. They can be flushed down the toilet, or wrapped in tissue and disposed of as you wish.”

This is how a Scottish woman who saw her little child expelled after an abortion pill-induced termination recalls the shocking experience: “In hindsight I wish I hadn’t looked but I did, and that was probably the most traumatic thing I’ve ever seen or done. I thought ‘what on earth?’” The possible trauma associated with this dramatic experience needs to be properly investigated, the seminar heard.

Some studies found that the pills can fail up to 10% of the time, with the pregnancy occasionally continuing, the foetus not being spontaneously expelled, or an additional dose of drugs being required.

When this happens at home, there is a higher likelihood that the drugs are not taken as recommended, resulting in higher rates of failure.

An investigation conducted in England has found that “1-in-17 women having an induced medical abortion are subsequently treated at an NHS hospital for complications

arising from an incomplete abortion with retained products of conception.” There are no data available for Ireland.

During the Covid emergency in March 2020, Simon Harris, who was then the Minister for Health, introduced remote consultation by phone or video call for women requesting abortions, also known as teleabortion.

Now that the emergency is ended, this provisional measure should be discontinued but it is likely that the ongoing review of the abortion services will keep it instead.

The HSE has admitted that it does not collect data about complications arising after an at-home abortion. It also recognised that women who have a remote consultation, on the phone or on video call, maybe be subject to coercion.

Dr Pike, who has studied coercion, noted that not all women go back to their doctor after receiving the pills. Others admitted not having used the drugs, and could even have passed them to other women. “There is an association of abortion and trafficking. We know that there is a strong pressure on women involved in trafficking to have an abortion. The tele-abortion model makes it easier for abusers to get hold of the drugs and force them on to women”, he pointed out.

All of these concerns suggest that remote consultation and the use of abortion pills outside of hospitals should be discontinued. The ongoing review of abortion in Ireland should take these issues into consideration.

MARRIED WOMEN ACCOUNT FOR ONLY A SMALL MINORITY OF ABORTIONS IN ENGLAND

The number of pregnancies ending in abortion in England and Wales reached a record high in 2021 of 26.5%, according to a new report. In the case of married women, just 10.4% of pregnancies ended in a termination, versus 35.8% among unmarried women, a difference of three and a half to one. Those figures from the Office of National Statistics demonstrate once again that marriage is the best friend of the unborn child.

A total of 824,983 babies were conceived in 2021 while the number of abortions amounted to 214,256, the highest ever, a very grim figure, equivalent to around 15,000 in Ireland.

The latest data also show that girls under 16 had the highest percentage of pregnancies ending in abortion at 59.8%, while women aged 30-34 had the lowest percentage at 18.3%. Those aged 30-34 also had the

highest number of pregnancies. This is the age at which women are most likely to want to have children.

In the last ten years there has also been an increase in the number of women aged 35 and over who are becoming pregnant. This reflects the fact that women are delaying having babies until the opportunity to conceive at all is almost gone.

Pregnancy rates have instead decreased for all other age groups, which stands to reason if people who putting off having families for so long.

For the first time since record began, married women had a lower pregnancy rate than those outside marriage. Among unmarried women, there were 75.1 conceptions per 1,000 compared with 72.2 per 1,000 among married women. Ten years ago, the latter figure was much higher: 91.6 per 1,000. This means that fewer women are waiting until marriage to conceive children and, as a consequence, also the overall abortion rates have increased, together with the percentage of pregnancies ending in abortion.

Unfortunately, British figures cannot be compared properly with Ireland. Unlike every other Western country, Ireland does not collect demographic data on women who have abortions. This was a deliberate omission when the Irish abortion legislation was written in 2018, something that

the current review of the abortion laws should consider and change.

BRITAIN IS NOW ONE OF THE MOST SOCIALLY LIBERAL COUNTRIES IN THE WORLD

Britain has been found to be one of the most socially liberal countries in the world, according to a recent study. The Policy Institute of King's College, London presented a report which showed that in the past 40 years, social attitudes in the country have changed significantly. Homosexuality, divorce, abortion, euthanasia, suicide, and prostitution are now considered more acceptable.

The study, which is based on the World Values Survey, a global social survey that has been running since 1981, records attitudes, beliefs, and values in different countries. The United Kingdom ranks among the most socially liberal countries in the world on all measures.

The report states that 47% of the British population believes that abortion is always justifiable, which places the country behind only Sweden (74%), Norway (62%), and France (49%). The support for abortion is considerably lower in the US (24%), Germany (29%), and Italy (23%). However, there are significant regional differences within the UK, with only 25% of respondents in Northern Ireland

thinking that abortion is justifiable, while the percentage is almost double in Scotland (49%) and England (48%).

Likewise, regional differences emerged with regard to homosexuality. When asked about the morality of homosexuality, 49% of people in Northern Ireland think it is justifiable, while in England and Wales the percentage is 65%, and in Scotland, it is 64%. Only Sweden (81%), Norway (76%), and Germany (67%) have higher figures than the UK overall (65%).

The study also found that the most liberal countries in the world with regards to the moral permissibility of casual sex are Australia (48%), Spain (46%), Canada (45%), and the UK (41%). The moral justification of prostitution is the only measure for which the UK ranks fifth in the world, slightly lower than for other issues. "Only" 17% of respondents believe it is justified. This is still a remarkable increase since 1981 when only 7% of the UK population considered it acceptable. The countries where prostitution is more accepted are Australia (27%) and Germany (24%).

Interestingly, cheating on taxes is the only issue that Britons find less acceptable now than 40 years ago. The percentage of the British public who said it was justifiable decreased from 7% in 1981 to 1% in 2022.

The World Values Survey also registered significant differences not only between different countries but also

between religious and non-religious respondents in the same country. For example, the percentage of British people who find casual sex acceptable is 53% among the non-religious and 27% among the religious. Only 35% of religious people would accept euthanasia, compared to 56% of non-religious people. However, the survey found no difference with regard to the death penalty.

Finally, the study revealed that the non-religious are also more likely to find it justifiable to avoid paying a fare on public transport and cheating on taxes, while the religious are slightly more sympathetic than non-religious people to those claiming benefits they are not entitled to.

SEX ABUSE OF YOUNG WOMEN SEEMS TO BE ON THE INCREASE



Sexual abuse and harassment seem to be on the increase in Ireland, particularly among young women. This is also certainly contrary to the expectation that as Ireland

becomes more 'open', 'tolerant' and 'liberal', levels of sexual abuse would decline. A new major survey by the Central Statistics Office (CSO) has revealed that 21% of women say they have experienced 'non-consensual sexual intercourse' in their lifetime so far, and 52% of them report they have experienced 'sexual violence'.

The survey defines 'sexual violence' very broadly as "a range of non-consensual experiences, from non-contact experiences to non-consensual sexual intercourse".

According to the survey, the proportion of adults who have experienced 'sexual violence' in their lifetime was 40%, with higher levels for women (52%) compared with men (28%). This means that almost half of the population has been affected by what the survey defines as 'sexual violence' at some point in their lives.

The CSO survey also found that four times more women (21%) than men (5%) reported what the survey calls 'non-consensual sexual intercourse'. This is defined as "where the person was coerced, threatened or forced into having sex".

Additionally, one in ten women experienced non-consensual sexual intercourse as an adult when they were unable to give consent because they were asleep, passed out or under the influence of alcohol and/or drugs.

The survey found that ‘sexual violence’ prevalence rates vary greatly by age, with younger people reporting higher levels than older persons. For example, young women (aged 18-24) reported the highest levels of ‘sexual violence’ in their lifetime to date at 65%. This figure is almost half (35%) for those aged 65 and over. The discrepancy is especially striking given that the older women have seen far more life.

22% of men and women aged 18-24 have experienced ‘sexual violence’ both as an adult and as a child, compared with 8% of those aged 65 and over.

Women aged 25-34 are four times (29% more likely to have experienced non-consensual sexual intercourse as an adult than those aged 65 and over (7%). They also reported the highest prevalence of unwanted sexual intercourse as a child at 10%, compared with 6% of women aged 65 and over. This indicates that the younger generation has experienced, both as children and as young adults, more sexual violence than the older generations.

Commenting on age differences, Dr. Clíona Sáidléar, Executive Director of the Rape Crisis Network Ireland told RTE that younger people may be better “able to name something” [as sex abuse] compared with older people but added, “the CSO would have been very carefully building their tools to try to control for that”. Another reason for

the age variation, she added, “would be just the different and emerging forms of sexual violence. Digitally enabled sexual violence is a huge and emerging form of violence.”

The majority of adults (78%) who experienced ‘sexual violence’ at least once in their lifetime knew the perpetrator, with very little difference between women (79%) and men (75%). This rate is lower for the older age cohort.

Younger women (18-24) are twice more likely to have experienced non-partner sexual violence with a friend/acquaintance (34%) than women aged 65 and over (18%). This suggests that sexual violence, particularly among younger generations, often happens within known relationships or social circles.

Finally, the CSO survey found that only half of adults (47%) who experienced sexual violence in their lifetime told someone about it, with disclosure more likely if the incident involved a non-partner-only (55%) than a partner-only (16%). Women who experienced sexual violence in their lifetime were more likely to have told someone (53%) compared with men (34%). These findings highlight the importance of creating support systems for survivors of sexual abuse, assault and harassment, especially for those who may be hesitant to come forward.

FAFCE BOARD MEETING AND INTERNATIONAL CONGRESS ON FAMILY NETWORK “ANTIDOTE TO LONELINESS”

Between the 2nd and the 4th of May 2023, FAFCE held its bi-annual Board Meeting in Murcia (Spain). FAFCE Members from all over Europe gathered to exchange on their respective activities and on the work of the Federation at the European level. A representative of Family Solidarity was also in attendance.

The President, Vincenzo Bassi, stated: *“These intense days of work here in Murcia are the fruit of long preparation, realised also thanks to the generous cooperation with the Catholic University St Anthony of Murcia (UCAM). This cooperation is also an example of how the world of the NGOs can work together with the world of the university to bring fruits for the Common good. I believe that with these three days, we could show how the family is the prism through which we can better understand and experience personal, spiritual, ecclesial and social and cultural life of everybody. And therefore, find new ways to fight against the new pandemic of our times, the pandemic of loneliness.”*

For the first time in the history of FAFCE, its Board Meeting took place in Spain and was hosted by a University, the Catholic University Saint Anthony of Murcia (UCAM).

On the 2nd of May, FAFCE Members, along with guests and university teachers and students, attended the International Congress on *Family Networks: “Antidote to loneliness”*. The event, hosted by UCAM and organised by FAFCE in cooperation with the Council of European Bishops’ Conferences (CCEE) and the Commission of the Bishops’ Conferences of the European Union (COMECE), aimed to respond to the invitation made by Pope Francis in his 2022 address to the members of FAFCE to foster a fruitful and effective spirit of communion and collaboration between European families, an authentic *“antidote to loneliness”*.

The gathering started with a Holy Mess celebrated by Archbishop Manuel Ureña Pastor. In the opening of the conference, the Archbishop Bernardito Cleopas Auza, Apostolic Nuncio to the Kingdom of Spain and the Principality of Andorra, mentioned the fundamental role of the family in taking care of the common home and stated that *“the Family is a school of humanity”*.

Mark Regnerus, President of the Austin Institute (United States of America), gave a passionate and insightful speech on *“What Sociology Will and Will Not Tell You about Families and the Crisis of Loneliness”*. He brought attention to how questions asked by sociologists and researchers shape the way of thinking and highlighted that *“Without*

healthy families, egalitarian goals are pointless, as money can be redistributed, and spiritual capital cannot”.

Two round tables followed, the first dedicated to the creation and the development of networks of families, with the participation of Friederike Ladenburger, COMECE Legal Advisor, Antoine Renard, Honorary President of FAFCE and past President of the French Confederation of Catholic Family Associations (CNAFC), and Raúl Sánchez Flores, Secretary General of the European Large Family Associations Confederation (ELFAC).

The second round table focused on how to bring the voice of the family in the public arena, with Carmen Fernandez De la Cigoña, Secretary General of the Catholic Association of Propagandists (ACDP), Mattia Ferrero, Vice-President of the Union of Italian Catholic Jurists (UGCI), Javier Rodriguez, General Director of the *Foro de la Familia*, FAFCE Spanish associated member, and Monika Zazula, Delegate of the Polish Federation of Family & Life Movements.

On the 3rd of May FAFCE Board Members had an exchange of views with Mark Regnerus who spoke about the consequences of gender theory and to Mattia Ferrero, who brought attention to the current issues raised by the use of gender wording in at the international and European level.

This time also, the Federation welcomed a new member, from Hungary: it is the 72 Disciples Movement, presided by Kálmán Dabóczy (at the microphone in the photo below). Afterwards, a Mass was celebrated, presided over by Msgr. Charles Attard, Director of the Cana Movement, from Malta.



The Board of FAFCE, during its works, adopted a Board Resolution on “The crisis of loneliness in times of digital transition: family networks as agents of change”.

Later that day, the Holy Mass for FAFCE Board Members was celebrated in the UCAM University chapel by Fr Jose Alberto Canovas Sanchez, Dean, Pontifical John Paul II Institute for Studies on Marriage and Family, Madrid. FAFCE Members presented their activity reports for the last 6 months, exchanged on similar actions and shared good practices.

In the afternoon Amanda Zurface, Catholic Church Outreach Specialist for Covenant Eyes, a United States based software company specialised in fighting online addictions and the consequences of pornography, gave an online presentation on the consequences of online pornography consumption.

It was the first time that two new observer delegates, sent respectively from the Bishops' Conferences of the Nordic Countries and of Albania, took part in the FAFCE Board Meeting. This participation represents a first step in the direction of the creation of local family associations where they do not exist yet.

Next FAFCE Board Meeting will be held in Brussels, Belgium, between the 24th and 26th of October 2023.

Thank you all who have paid their subscriptions and made donations to further our aims. We have put a return envelope with a subscription slip with all copies of the Newsletter as it is simpler than selecting those from whom we have not heard.