

CREIGHTON MODEL *FertilityCare* System and NaProTECHNOLOGY®

Reflections, Inspirations, and Renewed Commitment

K. Diane Daly, RN, CFCE, Sue Hilgers, BA, CFCE, Thomas W. Hilgers, MD, AFCMSC.

The **CREIGHTON MODEL *FertilityCare* System (CrMS)** is a unique system in its standardization, language, and personal client service. There is no other system in the field of the natural regulation of birth or in women's health care that provides a journey with the woman and couple in such an intimate person to person fashion. The **CrMS** system is the only system that can prepare the client for **NaProTECHNOLOGY** evaluation and treatment. Therefore, the founding principles of the **CREIGHTON MODEL *FertilityCare* System** and **NaProTECHNOLOGY** must be remembered. They are:

- A sound ethical foundation based on Catholic Church teaching and pro-life principles
- The educational infrastructure that meets the demands for a new allied health profession
- Verified research in both the **CrMS** and **NaProTECHNOLOGY**.

Let's take a quick journey to where it all began with **CrMS, NaProTECHNOLOGY**, and the Saint Paul VI Institute. Reviewing this history succinctly, we will view the reasons each of these things needed to be accomplished.

1968 **Humanae Vitae was promulgated**

In 1968, Saint Paul VI promulgated *Humanae Vitae*, the encyclical on love and life, calling on men of science to help couples follow this vital teaching of the Catholic Church. This is why Dr. Hilgers developed the initial research team at St. Louis University. The atmosphere was post Vatican two where Catholics were encouraged to take more responsibility for forming their consciences and a time when birth control pills were becoming popular as a means for family planning. There was speculation that the Church would change its teaching on family planning. However, Pope Saint Paul VI obeyed God rather than man. The document *Humanae Vitae* clearly put a stop to those speculations, as it repeated the long-standing teaching of the Catholic Church. This teaching impacted Dr. Hilgers and his team for their professional careers and inspired them to work tirelessly to develop the **CrMS** and **NaProTECHNOLOGY**.

The research at St. Louis University (SLU) NFP Center, associated with the School of Medicine, was the conception of the **CREIGHTON MODEL**. The purpose of establishing this center was to publish research on the Billings Ovulation Method in American Journals so that the credibility of this natural method would be enhanced. The charge to the initial 6-person team led by Dr. Hilgers was to provide the best quality service for the client. Although it was not the intention of the co-developers to create a new method of NFP, research and listening to the women

we served resulted in a standardized approach, and subsequently a new method of the natural regulation of birth.

1976

Development of St. Louis University NFP Center in St. Louis, MO and standardization including the Picture Dictionary and the Vaginal Discharge Recording System (VDRS)

In 1976, the authentic language of a woman's health and fertility was developed at SLU NFP Education Center, resulting in the VDRS and Picture Dictionary. As this was the only standardized language of the women's observations, the Picture Dictionary provided a visual confirmation of the woman's observations which reassured women that their recordings were accurate. The development of the VDRS and Picture Dictionary were crucial because there was a need for a standardized language to assist women in expressing their observations and for providers to understand the actual meaning of the woman's descriptions. In the early days before standardization, there were no universal words to determine exactly what the woman was observing, which resulted in hours of discussion without clear determination of the woman's actual observation. The VDRS and Picture Dictionary were foundational to the excellent quality of CrM FCS and the development of **NaProTECHNOLOGY**.

Other than the **CREIGHTON MODEL FertilityCare System**, no other such universal language has been developed. It is the most important discovery in the field of natural methods in the last 75 years!

Without this standardized language, the work could not have progressed and thousands of women and couples would have been deprived the benefits to their health care and would never experience the conception of innumerable babies. This VDRS is serving clients and providers around the world in 6 continents, all speaking the same authentic language of a woman's fertility. In addition to the standardized language of the VDRS, standardization of the teaching materials and the follow up were created as an integral part of the **CrMS**. This standardized approach was, and still is, unique and critical to the quality of the method and to provide equal access of care for every client. Proven quality care and accurate research findings can only occur when there is a standardization of the care given and the language spoken. Therefore, there must be no deviation in providing the precise **CrMS** to clients. With any deviation, it is no longer the **CrMS**.

1977

Case Management approach development was begun.

In 1977 the research continued within the Creighton University School of Medicine, Department of OB-GYN, NFP Education and Research Center. The case management approach was further developed, to provide a holistic approach beyond problem solving for the couple in all areas of their reproductive lives.

1978

Establishment of the First Core Curriculum

Establishment of the first Core Curriculum affiliated with a school of medicine was developed and was critical for quality education and equal access to educational information. Dr. Hilgers' request for assistance in writing the core curriculum from Laura McGlaughlin at the school of medicine in 1978 was crucial for credibility in this allied health care profession.

This is also the year of the first practitioner education program, when 40 students from different methodologies began their education in **CrMS**. These teachers were looking for solutions to the basic and advanced cases they were trying to manage without standardization, and looked to this education program to share the research that had been done and to provide the answers that were lacking in their experience.

1980

The Method was officially named the CREIGHTON MODEL

Beginning as the Ovulation Method and with the research continuing at Creighton University School of Medicine, the method needed a unique identifying name. Dr. Hilgers did not want the method named after him, so our trained teachers began to call it the **CREIGHTON MODEL** to differentiate it from Billings Ovulation Method. The team of 4 Co Developers recognized that the **CrMS** was more than a method of family planning. It was an entire educational model, and thus the **CREIGHTON MODEL** was named in 1980.

Also, in this year the demand for educators was answered with the first educator program to prepare others to teach practitioner interns and to broaden the availability of the **CrMS** education programs following the core curriculum.

1981

AANFP was Incorporated in the State of Missouri and Later became AAFCP

In 1980, the only EP3 ever was conducted at the request of the trained teachers who wanted the quality and authenticity of the **Creighton Model** protected. These were graduates of the first Practitioner classes who attended EPIII. The question of need for a professional organization was discussed for an entire day. On the 2nd day there was unanimous agreement on Dr. Hilgers' proposal to form the Academy. The American Academy of Natural Family Planning Practitioners founding principles of the **CREIGHTON MODEL FertilityCare System** and **NaProTECHNOLOGY** were:

- A sound ethical foundation based on Catholic Church teaching and pro-life principles
- The educational infrastructure that meets the demands for a new allied health profession
- Verified research in both the **CrMS** and **NaProTECHNOLOGY**

There was a consensus to invite other organizations who would meet standards, such as: the use-effectiveness study, standardization, research, an educational curriculum, etc. There were no organizations that met these standards. Rather than a strictly fellowship group, the AAFCP was established with group consensus as a high-quality standards-based organization to provide certification, accreditation, service program recognition, continuing education based on **CrMS** and later **NaProTECHNOLOGY** and fellowship. After this first meeting, an incorporating board of educators, chaired by Dr. Hilgers, was established to form the organization which was subsequently incorporated in 1981 in St. Louis, Missouri. K. Diane Daly became the first President Of the AANFP.

Later with the assistance of Jack Trout, a brand expert, and consensus by AANFP members, the name of the service was changed to FCS and the organization was changed to the American Academy of **FertilityCare** Professionals (AAFCP). This name change was for marketing purposes, but the values and standards on which it was based have never changed.

1985

Pope Paul VI Institute for the Study of Human Reproduction

The Pope Paul VI Institute for the Study of Human Reproduction was established as the International Home of **CrMS** and **NaProTECHNOLOGY**. It was on the day of Pope Paul VI's death, August 6th, 1978, that the decision was made by Dr. Hilgers and Sue Hilgers to establish the PPVI Institute. (After Pope Saint Paul VI was canonized in 2018, the name was officially changed to Saint Paul VI Institute.) Since the PPVI Institute was rejected by Creighton University, because it represented a "singular point of view," the PPVI Institute was established independently, though there remained a collaboration with Creighton University.

1990

Established Ethical Principles for the CrMS

Catholic theologians assisted in establishing ethical principles that were sound in their Catholic foundation. In the **CrMS** personal encounter with women and couples, issues surfaced and were shared with the provider. Many of these issues needed the expertise of moral theologians in order to provide authentic care consistent with the ethics of the **CrMS**. Subsequently 6 chapters were devoted to these ethical principles in Book 2 The Advanced Teaching Skills of the **CREIGHTON MODEL**. The **CrMS** is holistic and care is given so all areas of the human person are addressed to assist in healing.

1991

The Establishment of NaProTECHNOLOGY

The **CrMS** expanded into **NaProTECHNOLOGY**. FCPs from all over the country sent client charts to Dr. Hilgers as the first Medical Consultant, to review and provide solutions for abnormal menstrual and fertility cycles. The standardization and review of thousands of **NaProTECHNOLOGY** cycles led to the development of **NaProTECHNOLOGY**, after repeated patterns were observed

reflecting specific gynecological conditions. Dr. Hilgers noted this, and to quote Dr. Hilgers, “I was looking at something no one in the world had ever seen.” The **CrMS** client chart provided a window into the woman’s underlying conditions. This amazing discovery, which was dependent on the **CrMS** standardized charting leading to **NaProTECHNOLOGY**, has resulted in diagnosis and cures for innumerable conditions, the birth of thousands, if not millions of babies, the empowerment of women as partners in their health care, and the diagnosis and healing that women have sought for too long.

1991

The Medical Applications of NFP, A Physician’s Guide to NaProTECHNOLOGY was published

This was in response to the physicians’ need to be informed about the **CrMS** and as an introduction to **NaProTECHNOLOGY**. The demand was growing in the physician community where dedicated physicians were seeking an alternative to the artificial reproductive technologies, such as BCP and IVF. These pro-life men and women were led to understand that providing an alternative to ART was essential when refusing to provide birth control and other ART. **NaProTECHNOLOGY** provided them a superior medical and ethical approach in harmony with their beliefs, networking family planning with reproductive and gynecological health monitoring and maintenance for the first time in history.

1998

The First Semester Course for Seminarians

The first semester course for seminarians within the Catholic seminaries was developed. The theology surrounding reproductive issues was already presented in the seminaries, but the practical application of that theology was not usually provided in more than a 1-hour lecture or workshop. There was a need to develop a curriculum that would ensure men studying for the priesthood would be aware of an authentic, effective approach for family planning and medical care that flowed from the Church teaching: **CrMS** and **NaProTECHNOLOGY** are the practical application of the theology of the Catholic Church. Proof of the extreme need for this international course is documented by pre and post class surveys that show a statistically significant change in attitudes and knowledge after completion of the course. To date, there is no other known class like this in the seminaries.

1999

FertilityCare Centers of America (FCCA) and FertilityCare Centers International Established (FCCI)

FCCA and FCCI were established to unite and promote **CrMS** educational services through local **FertilityCare** centers and to ensure quality control standardization of all **CREIGHTON MODEL** services provided. They became the marketing umbrellas for the affiliates and they oversee the distribution of **CrMS** materials, another step-in quality assurance.

2001

Dr. Hilgers' Presentation to Pope Saint John Paul II

NaProTECHNOLOGY and the *Theology of the Body* paper, written by Dr. Hilgers was presented to Pope Saint John Paul II on June 18, 2001 to inform the Holy Father of **NaProTECHNOLOGY** of that was associated with the Holy Father's insightful teaching. The Holy Father's personal secretary said Pope Saint John Paul II read every word and was pleased. This was an affirmation from a future saint!!!

2004

First NaProTECHNOLOGY textbook

The first definitive textbook on the new women's health science of **NaProTECHNOLOGY**, The Medical and Surgical Practice of NaProTECHNOLOGY, was published in 2004. (1244 pages) It developed the medical, perinatal and surgical aspects of **NaProTECHNOLOGY**. Because research needs to remain current, the second edition of the textbook is in progress. This textbook became widely known and was the impetus for an increased international interest and desire to offer **NaProTECHNOLOGY** services in several countries.

2007

Post Graduate OB GYN Fellowship Established

The first fellowship to offer advanced **NaProTECHNOLOGY** medical and surgical skills to OB-GYNs, was developed through Creighton University in 2007. It advanced to become the St. John Paul the Great Fellowship in Medical and Surgical **NaProTECHNOLOGY**. In 2017 the St. John Paul the Great Society of Procreative Surgeons was developed by Dr. Hilgers as a professional organization for those who completed the fellowship, uniting fellow graduates in continuing research and professional dialogue.

2014

The Paradigm Shift in Family Planning was written

Many of the accomplishments noted in this paper are outlined in the Paradigm Shift in Family Planning booklet. In this booklet, written in 2014 by the four CrMS Co-Developers, you will follow the journey of the development of the **CrMS** and a challenge to all providers of the natural regulation of birth to define their charism and live up to it!

2019

Launch of the CrMS App

The **CrMS FertilityCare** App, a web-based technology, was developed after years of research specifically and exclusively for use by **CREIGHTON MODEL** teachers and clients. This App ensures the accurate and authentic recording of the VDRS and partners with all aspects of the **CrMS** teaching approach. This unique, one-of-a-kind App, serves the client and Medical

Consultant with standardized recordings which Medical Consultants review and apply to their **NaProTECHNOLOGY** Practice for diagnosis and treatment.

2021

Implementation of the first Non-English Practitioner Education Program

Under the leadership of Dr. Thomas Hilgers and the Saint Paul VI Institute, a 5-year strategic plan was realized with the first all-Spanish Education Program held independently in Mexico City.

Timeline Summary

It is truly remarkable that after all these years this mission of life and love continues to grow to meet the ever — increasing demands worldwide. This success is possible because the original mission of the Co-founders has been maintained.

There are important opportunities within this Elite Profession, the Saint Paul VI Institute, the International home of **CREIGHTON MODEL** and **NaProTECHNOLOGY** to make a life changing difference in the lives of women, couples and families for generations to come. However, challenges face us now, and, will in the future, including the growth of the culture of death, conventional medicine: abortion, sterilization, IVF and contraception and the confusion and rejection of foundational Catholic Church teachings including *Humanae Vitae* and *Theology of the Body*.

This journey through history presents to you the unique and critical importance of maintaining the highest standards in offering FCS and **NaProTECHNOLOGY**, and adherence to these standards within our profession and professional organization.

In summary, these significant reflections to the **CREIGHTON MODEL** and **NaProTECHNOLOGY** are unique and this charism belongs to us alone and has not been duplicated. We, the providers of **CrMS** and **NaProTECHNOLOGY**, are proud of our service and will protect its integrity.

Mission Drift

One of the most important yet more often unknown challenges facing organizations is what is called Mission Drift. *Mission Drift*, as the term indicates, is what happens when an organization starts to move away from the goal outlined in its founding mission.

According to Jim Schleckser “Mission drift is an irresistible force suffering the crisis of identity. If you don’t, your organization may become very different than the successful organization that was initially envisioned and established.”

Other authors have noted — Mission Drift is a dangerous force and it is hard to track and it happens gradually over time. For instance, if this work does not remain with its original mission, then, it would become a different effort. An example of Mission Drift in our profession is the

weakening of the **CrMS** and **NaProTECHNOLOGY** standards to include natural methods that don't meet the founding standards of quality service.

Again, Mr. Schleckser wrote: "You need to build in measures to help you avoid suffering from this crisis of identity."

How to Avoid Mission Drift

Peter Greer in his book **Mission Drift** wrote "It is an exception that an organization stays true to its mission." It is critical this work is an exception. He also wrote, "Mission True organizations not only hold themselves to the highest of standards because of their Christian identity, but, they also recognize the contributions they are uniquely able to make to the world because of the advantages of being faith-based." The faith-based foundation for our work is a unique and a critical contribution to the world.

Dr. Hilgers, the leader of this movement, invites all to join in his lifetime of dedicated efforts to this work. Last year he wrote "I did not give up my values when so many others did." This steadfast commitment to these important values truly resulted in his many discoveries! We, together, cannot give up or weaken our values, our founding principles.

According to Mr. Greer, Mission True Organizations must do the following to Avoid Mission Drift:

Number 1. "Mission True organizations boldly proclaim their core tenets to protect themselves from drift."

Number 2. "An organization cannot remain true to its mission without a diligent and protective Board."

Number 3. Most Boards don't realize it is their fiduciary duty to remain loyal to the mission of the organizations ... This is the law."

Our important Elite Profession's Role is vital in preventing Mission Drift.

An impressive example of Dr. Hilgers not giving up his values is the superiority of the effectiveness of **NaProTECHNOLOGY** over Artificial Reproductive Technologies. In order to continue this growing positive trajectory of the success of this founding mission, our Elite Profession and the Saint Paul VI Institute must work together to lead this effort to build a culture of life worldwide.

Prevention of Mission Drift

Importantly, the Co-developers have developed the following 5 efforts to protect this unique and unparalleled work to keep the mission grounded in its founding principles and to avoid Mission Drift and Crisis of Identity.

Number 1. Standardization of the **CREIGHTON MODEL** that includes VDRS, Client and Teacher Education, and **NaProTECHNOLOGY** protocols that provide equal access to everyone served. Dr. Hilgers' goal for the 4 of us at the beginning of our work, was *"To provide the best quality service for the client!"*

Number 2. The vision for a standardized fertilitycare messaging and unification of all **FertilityCare Centers** that embrace the founding principles of this work resulted in the development of **FertilityCare Centers of America** and **FertilityCare Centers International**.

Number 3. The Updated April 12, 2019, Co-Developers Statement Regarding the **CREIGHTON MODEL FertilityCare System, NaProTECHNOLOGY** and Emerging NFP and "Medical Models" brought clarity to the founding principles of this work.

Number 4. A subtle example of mission drift is the term Fertility Awareness. The **CREIGHTON MODEL** term of Fertility Appreciation education is in stark contrast to the term Fertility Awareness which is contraceptive. The term Fertility Awareness term is documented in two scientific papers that established the definition of this term. One citation is from an article in the 2005 medical journal "Contraception." The chief author is Dr. David A. Grimes, who is very pro-abortion. This article also deals with fertility awareness-based methods. To quote from the article, "Fertility Awareness Based methods can be used with abstinence from sexual intercourse. Alternatively, these methods can be used with barrier contraceptives or withdrawal from presumed fertile times."

Number 5. **NaProTECHNOLOGY** and **CREIGHTON MODEL** cannot be combined with any other approach or diluted. *If this occurs, we will be denying to those we serve the best possible outcomes.* **The CREIGHTON MODEL FertilityCare System** is the only foundation for **NaProTECHNOLOGY**.

Founding Principles

The founding principles for this Mission of Life and Love revolution in women's health care are well established. This effort is more than a method — it is a complete program with foundational ethics, proven research and an educational infrastructure to provide **FertilityCare** services and **NaProTECHNOLOGY** protocols that continue to bring hope and healing to so many and has now expanded to every continent except Antarctica!

In this work, no matter the continent, the country, the culture, the language — the problems facing women and couples today in the areas of reproductive and gynecological health and sexuality are essentially the same. The ethical, educational, research, medical infrastructure and the focused attention to standardization and proven outcomes with Dr. Hilgers at the helm provide much needed answers for those worldwide who are desperate for healing and those who hope there must be a better way!

Partners in this Elite Profession

As members of this Elite Profession and with the Saint Paul VI Institute, we all are responsible in carrying forth this mission and avoiding Mission Drift at all costs. It is important to reflect on each of you — and your efforts to become partners in this mission of love and life. Your investment has been great and praiseworthy!

Thousands of essays from class to class reflect similar themes in answering the “Why” applicants decide to submit an education program application. Two very common examples are as follows:

- **CREIGHTON MODEL** and **NaProTECHNOLOGY** answered my personal needs and I want to help others as I have been helped.
- “My belief that God has called me to this work, often crediting the teachings of the Catholic Church.

These application essays have been so impressive that in 2018, Dr. Hilgers sent to the newly formed Vatican Commission on *Humanae Vitae*, copies of over 4,000 application essays — without names — in both paper and DVD formats. These essays were hand carried by the Vatican’s Apostolic delegate to the United States in a courier pouch to the *Humanae Vitae* Commission at the Vatican.

Dr. Hilgers knew the importance of the deliberations of this *Humanae Vitae* Commission. He decided this effort could have a significant impact on the Commission. It is possible these impressive essays may have prevented a revision to *Humanae Vitae*. We are unaware of any *Humanae Vitae* Commission update.

Superior Medicine vs Conventional Medicine

It has been 2000 years since the miracle of the woman suffering with bleeding, who according to the Gospel of St. Mark had spent all her money on doctors, and was healed by Jesus — only when she touched his cloak.

Now over 2000 years later, with this work, we are in position to truly help and heal women, couples, families and patients. As believers in the Lordship of Jesus, this work is a unique example of building the Kingdom on earth. As a side note, Dr. Hilgers states that we do not have all the answers for bleeding. In the Gospel, this desperate woman “had suffered greatly at the hands of many doctors” but as we know was cured by Jesus when “the power had gone out from him.”

In thinking about this further, why have all of us been invited at this time in history to say “Yes” to involvement in this work? Why were we not born in the third century, the 9th century or the 1800’s?

Also, reflect for a moment on the convergence of the pontificates of Pope Saint Paul VI, Pope St. John Paul II, the introduction of IVF and **NaProTECHNOLOGY!** On July 25th, 1978, the 10th anniversary of the release of *Humanae Vitae*, the first IVF baby, Louise Brown, was born in England,

the country where IVF was initially researched and promoted. IVF would become a threatening paradigm shift in the value of the human person's development.

RESULTS

Other than **NaProTECHNOLOGY**'s superior effective moral healthcare for women, we are not aware of another effort that can counter and challenge conventional medicine with IVF, contraception, abortion and sterilization in the same way. Conventional medicine in these areas has an increasing stranglehold as we have seen the very negative impact on women and couples. **NaProTECHNOLOGY**, based on the **CREIGHTON MODEL**, provides sound proven research that is effective and brings true hope and healing! We are indeed blessed with these tools, faith, motivation, and courage to make a major difference!!

We believe all of us have at times have dealt with difficulty, fatigue, dark days and difficult challenges, especially in dealing with the Culture of Death. However, we dig deep as we grow personally with our faith and professionally with our work. If we stay true to the mission in the good days and challenging ones, God will always be there and fill us with the truth. This is indeed God's work after all. We have been blessed to be invited and thank you for your YES! You will never know your total impact on the Culture of Life until the next life — eternal life.

Indeed, the Co-Developers have said repeatedly we have experienced many more blessings than burdens with this work. We believe you understand this and have experienced it, as well

This effort is a "great gift to you, your patients and clients." "Read, study and pray!" Thomas W. Hilgers, MD.

Saint Paul VI suffered greatly due to the overwhelming dissent to *Humanae Vitae*. Yet, on May 9, 1975, his expansive Apostolic Exhortation on "Christian Joy" was released to the "Faithful of the entire world!" How special this teaching from Saint Paul VI.

Blessings to each of you and may you be filled with Joy!