Credidimus caritati
we have put our faith in love

WOOMB International Ltd continuing the work of
Drs John and Evelyn Billings of bringing the
Billings Ovulation Method® to the world.

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St Thomas Aquinas said that he drew his knowledge of theology from two sources which never lie, Nature and Scripture. Morality and the truth that can be found in science do not contradict each other. The Psalms frequently speak of Truth and Love, teaching us that God said:

I will never take back my Love,
My truth will never fail.

Pope John Paul II’s *Evangelium Vitae* ranks with *Humanae Vitae* among the greatest encyclicals of this century, teaching us the truth of man’s existence and the love which sustains and serves the truth. The teachers of natural fertility regulation have adhered to the truth exposed by scientific research. By acknowledging the Scriptural teaching of the image of God in the human person and the concept of two in one flesh, we help to consolidate fidelity in marriage and nourish that special love, conjugal love, which brought the marriage into existence as part of God’s plan. This is the way of life which brings peace and happiness, not only to husbands, wives and children, not only to those who serve them, but to the whole community of the Church and the world.

Evelyn L Billings and John J Billings
(circa 1995)

*With thanks to Kay and Sue Ek of BOMA USA for sending a copy of this statement which was undated but obviously written by Drs John and Lyn Billings more than 20 years ago, towards the end of the 20th century, some time after the publication of Evangelium Vitae in March 1995. We share it with you in this 50th Anniversary year of the Encyclical Humanae Vitae.*
Teaching the Billings Ovulation Method® to people with impaired vision

by

Silvia Etchegoyen and Samanta Osterloth Smith

Adaptation of the presentation given by Silvia Etchegoyen in San Jose (Costa Rica), April 28th 2018, during WOOMB International Conference held under the theme “Innovations in Comprehensive Health through the Billings Ovulation Method®“ Samantha was unable to attend due to ill health.

Introduction

I have been a Billings Ovulation Method® teacher for more than 30 years in La Plata city in Argentina. By God’s Grace, I have been blessed sharing life with my husband for 50 years, and a big family of 5 married children, 18 grandchildren and one great-grandson. The Billings Ovulation Method® was a light that produced a radical change in our married life, so after living with this blessed method, I agree with St. Paul when he said: Woe to me if I did not announce the good news …. of the Billings Ovulation Method®!

Thanks to all those who in different ways have collaborated for this meeting. And thank you John and Evelyn for this legacy that unites us in the passionate task of transmitting not only a means to live the marital love fully but also to live our nature as a woman in a more conscious and loving way.

The whole history of the Billings Ovulation Method® has always been the product of Divine Providence. We never imagined that what we were doing could have this transcendence!!!

Dr. Lyn Billings in her book explains that “despite some individual variations, the sensation produced by the mucus as well as its appearance can allow all women to recognize the beginning of their fertility”. And she emphasizes: “Even blindness has not proven to be a barrier for learning the Billings Ovulation Method®. This was the challenge some Billings Ovulation Method® teachers from La Plata faced, providentially, to update the findings of Drs. Billings in the sense that the Method can be used by blind people.

I organized this presentation inspired by the following words from Dr. John Billings: “For any given fact, a vision within a chronological order gives a particular perspective because it reveals the action of Providence that is, in essence, there to be recognized and appreciated with the deepest gratitude of which the human heart is capable.”

The fact, in this case, is the experience in the teaching of the Billings Ovulation Method® to blind people that I will describe in chronological order. The objectives of this exposition are:

1. Show how the Billings Ovulation Method® training and instruction to blind people was developed and applied;

2. To emphasize that the use of the symptom of the vulvar sensation is a sufficient indicator for the determination of the stages of the menstrual cycle and for the application of the Billings Ovulation Method®, practically the only one available for the blind woman.

3. Share with participants the materials developed and used in the process

3
The beginning

In 2007 within the framework of the Family Institute of the Archdiocese of La Plata, at the Catholic University of that city, a Family Consultancy course was organized with a Natural Family Planning component included. We had a common anthropological trunk for both options and to enable those who wanted to do the two trainings we offered the option of being Family Consultants or Billings Ovulation Method® teachers on two different days of the week. Our team was formed by 3 Billings Ovulation Method® teachers. A young student of obstetrics acted as assistant while completing her training as a Billings Ovulation Method® teacher.

And the difficulties began! We had no place inside the university building, so they offered us a room in a basement of the parish in front of the university, a space which we had to prepare and leave in order after each class. All materials down and up. A real gym!

How many registrants did we have to start? Four! Yes, the same number of teachers as of students. We discussed if it was worth doing the course being only 4 students or apologize to those enrolled, offering other possibilities. The decision was unanimous: we'll do it. The patron saint of that parish is the Virgen de Guadalupe. In that basement we were exactly under her cloak. Our trust was required.

We prepared the immense place, trying to make it more welcoming. We received those who were arriving, and we saw two women. One undoubtedly blind, taking the arm of the other, slowly descending the stairs. We looked at each other and thought “they’re lost”! They introduced themselves and asked if this was the course of Family Pastoral. We said yes, specifying that it was the Family Planning component, thinking that they were not going to stay. To our surprise both expressed their desire to be teachers. Samanta, the young blind woman, communicated her intention to train herself so that she can transmit it to blind women as well as to any other women.

What a challenge! All my life as a Billings Ovulation Method® teacher, saying that the Method was simple, that the sensation in the vulva was the only symptom required to identify the fertile and infertile days, which is why any woman could learn it, including blind women. But all we had prepared to show in the course was visual!

We started the task of looking for materials and developed the classes in a way that could apply to both the people who saw and those who did not. The first thing we asked ourselves was: Will there be any previous experience? Where to start? No doubt, with the Billings family. It was suggested we contact María García, a very experienced Chicago Billing Method™ instructor whom, at that time, we did not know. She, with the immense generosity that animates her, conveyed to us her experience of using beads to teach a couple where the woman was blind.

Samanta at that time, 2007, was a young woman of 24 years, a lawyer, and with a deep vocation to work for the family. She lost her vision at the age of 12, so this fact helped us a lot in this task, because it meant that she knew the world also from the visual, she knew the colors, and in this way we were able to work with the materials in an integral way.

The perception of the world by a blind person is totally different from that of sighted people but learning together, we began to design elements for blind women that could facilitate them learning the Method, always keeping in mind that these had to be integrated to be understood also by sighted people. The language was also a challenge, we had to stop supporting ourselves in the visual, using the oral description in such a way that the message could be captured by the one who does not see.

The classes combined the visual material with an analytical explanation that allowed them to interpret what we showed.

We used embossed sheets of the male and female reproductive system. These pictures were made by people in prison who attended a workshop organized by a priest. We thank them.

Regarding the assembly of the Billings Ovulation Method® chart, the obstacle for the blind person is the impossibility of assembling graphics in Braille writing. How did we do this?
Following María García’s advice, we chose specific materials: beads of different shapes and sizes instead of the symbols were used. We always kept the Billings colors code and thus combined the criteria.

The blind woman chooses the beads according to the sensation she feels, threading them in a thread, and thus, she sets up her own cycle day by day. This way of doing the graphs allows her to identify the different types of cycle: normal, long or short. She can describe a BIP of discharge or any variant of the continuum.

In regard to the materials for the instruction, an important task was how to adapt the Slide Rule, to be used by a blind woman to teach the Billings Ovulation Method®. It was put together by Samanta based on the original model with the help of her mother choosing materials with different textures, using BOM colors in the following way:
• A red cloth of normal texture for bleeding,
• Corrugated cardboard with green horizontal rough texture for dry pattern,
• Yellow smooth texture paperboard for the BIP of discharge and
• Satin fabric with soft white texture for the fertility pattern.

There was some difficulty to slip the Rule because the materials were too thick. But it was useful for didactic purposes and it allowed communication between sighted and blind people. Later thinner materials were used, and sliding was solved, as is seen in the previous photo. The different colors have different textures and the fertile stage is made of white rubber. Both sides of the Rule were designed.

The Peak Day and the count of 1,2,3, was written in Braille.

The four Rules of the Method that are written down on the back are given to the woman written in the Braille System in a booklet.

As you can also see, it includes the visual.

Beside this, the woman can write down her sensations in the Braille system in her personal record and then tell the teacher. If she is married to a sighted man, he can complete the form by putting into practice one of the basic requirements of the Billings Ovulation Method®: loving cooperation.

The objective sought was achieved satisfactorily in the term of the 8 meetings of the course. Samanta was able to explain the Billings Ovulation Method® with its Rules to both sighted and blind people, also using the Slide Rule.

What a Year!!

In 2007 Marian Corkill and Marie Marshell (M&M) from WOOMB International gave an Extension Course in Buenos Aires province. We could share the experience we were developing!

On that occasion, Samanta met Mr. Antonio “Totó” Ruffa, an experienced Billings Ovulation Method® teacher – also blind- and founder of CAF, an NGO which was the national affiliate to WOOMB during many years until his recent death. He promised to help Samanta to make a simpler Slide Rule and he did so.
Samantha explains BOM

Each stage and color was identified by means of punctures and Braille letters: one puncture and the word red in Braille for Bleeding; two punctures and the word green for the dry BIP; three punctures and the word yellow for the BIP of discharge; four punctures and the word white for potential fertility; five holes for the Peak Day and 1, 2 and 3 in Braille.

This is how we achieved a new Slide Rule, also inclusive, that is put together on the one used by all instructors.

Also in 2007, enthusiastic about the achievements of the course and the encouragement to continue the task, received from the Australian instructors, we took on the challenge of presenting the Billings Ovulation Method® to other blind people, for which we resorted to institutions that are dedicated specifically to providing tools for the blind to develop their abilities. We visited several institutions and met the director of the Braille library in La Plata, a blind older man, who was enthusiastic about the idea and we organized an integrated talk with blind and sighted people about the Billings Ovulation Method®. We asked other Billings Ovulation Method® teachers to help us with the follow-up of each of the blind people who attended the talk. The meeting was attended by both men and women.
In the photos, you can see a BOM teacher helping a blind young woman who follows the explanation of the cycle by “walking” the beads with her hands. And also a young man doing the same.

At the end of the talk we evaluated orally what was understood and it was satisfactory.

We evaluated both Slide Rules, concluding:

• the one which differentiated the stages of the cycle written in Braille was meaningless for people blind from birth, because they have no notion of what color means;

• in contrast, it was easier for the blind to understand using different types of reliefs and textures.

Samanta made this metaphor: “the color is to the one who sees, as the texture is to the one who does not see”. While the blind person interprets the stages of the cycle through touching different textures, the person who sees does so through color or symbols.

**The Continuum**

In 2011, Billings Ovulation Method® teachers from Argentina participated in the first WOOMB Latinoamerica Congress in Santiago, Chile, where Senior Teachers Marie Marshell and Marian Corkill gave a training. Samanta shared her experience with the Billings Ovulation Method® as a blind person and also received her certificate as an experienced teacher.

Today we enjoy the active participation of Samanta working on the dissemination of the Billings Ovulation Method® in the courses we organize.
A recent and very significant example was an interactive course of fertility awareness in the context of high social vulnerability (mainly illiterate young mothers) developed with CONIN Foundation in 2016.

This Argentine institution has as its mission the eradication of child malnutrition through comprehensive care of the child and the family environment. CONIN centers promote NFP as a means for human promotion: but also clarify that: “Among the natural methods the Billings Ovulation Method® has the most appropriate characteristics for its simplicity and effectiveness for this type of program.” That is why, since 1993, Billings Ovulation Method® teachers have worked in this institution providing a personalized service to the mothers who attend the programs and, since 2012, the Billings Argentina Network works in different centers of the country giving workshops and instruction.

Within the framework of this course, one of the classes was given by Samanta. She explained the Billings Ovulation Method® with the materials for blind people, which confirmed the possibility that the Method could be understood in a simple way using materials, where the “master” symptom is the sensation at the vulva that every woman can perceive. In the photo you can see how the students participated by experimenting with the materials for blind people.

Finally, in 2017, motivated by the invitation to talk in Costa Rica, we decided to carry out other new experiences. We went back to blind institutions to propose workshops and talks. As in the previous opportunity it was the Braille Library that opened its doors to us. They had moved, and they had another director, a not blind young man, paradoxically licensed in visual communication, with a modern vocabulary that we had to adapt to. The argument on which we relied was how important it was for a woman to understand her fertility
to be empowered and that nature had put a very simple sign – vulva sensation – that blind women could appreciate.

The idea was accepted, and we were allowed to organize a talk inside a space for weekly workshops organized by the library. We did it with the collaboration of other Billings Ovulation Method® teachers, as shown in the photos, with a similar dynamic to the previous one.

Both male and female with their hands on the beads followed the explanation of the cycle.

To finish this presentation, I would like to share Cristina’s spontaneous testimony, which she gave at the end of this workshop and which, I believe, challenges all who spread the good news of the Billings Ovulation Method®, confirming the need to realize the longing of Dr. Billings: “knowledge of the body that every woman should have”.

Cristina is a woman blind from birth, married to a man who is also blind, and said: “I would have liked to learn of the Billings Ovulation Method® long ago. I lost my first baby 4 days after birth, then I was unable - I do not know if my mind played against me - to get pregnant again. If I had known this Method, then I could have understood myself and known when to look for the pregnancy. I’m sure many cycles were missed because I did not know this…."

And continued: “So I thank you infinitely, I think it is of great interest, I think that everyone should know it. Really, it’s great for family planning.”
Fertility Awareness and Humanae Vitae

“good things running wild”

Dr Mary Walsh, MBBS, FRACGP

Dr Mary Walsh, MBBS, FRACGP, is a General Practitioner with a particular interest in women’s health, fertility awareness and restorative, reproductive medicine. She is a former President of the Ovulation Method Research & Reference Centre of Australia Inc. This article was originally published in Catholic Outlook, the magazine of the Diocese of Parramatta, and is reproduced here with permission.

In Orthodoxy, one of his great books, GK Chesterton discusses the energising paradoxes in the Church that shone light onto the faith that would eventually enthral him. He reflects, for example, that a thing that could be so “fiercely for having children, and fiercely for not having children” and that has “at once emphasised celibacy and emphasised the family” must be an extraordinary thing. He finds these to be examples of different expressions of human endeavour held wondrously together in the Church – “both passions are free because both are kept in their place.” He realised, looking at the charges of the “secularists” against the perceived rigid prescriptive rules of the Church, that “while it established a rule and an order, the chief aim of that order was for good things to run wild.”

Pope Paul VI released the controversial encyclical *Humanae Vitae* fifty years ago. On the major anniversaries of its promulgation, its messages are re-examined in instructive reflections. The themes are familiar – descriptions of a prophetic document that has been “a stumbling block” to many in its rejection of the use of any method of interference in the reproductive system or the marriage act to allow regulation of family size. And yet for those who value the careful teaching of the Church on the meanings inherent within sexuality and the sexual relationship, this document remains the “corner stone” of the understanding of the marriage relationship, and the conclusion reached about the appropriate way to approach family planning logically follows.

Interestingly, now half a century after Paul VI appealed to scientists to make a “study of the natural rhythms” in women’s cycles to assist couples to reliably plan their families, society may be ready to embrace change.

Since the early 1960s when the contraceptive pill arrived, medical and societal trends have been relentlessly toward “artificial birth control” resulting in, as Chesterton reflected, “no births and no control”! Alongside this development, in Australia, Drs John and Lyn Billings investigated, theorized and then proved reliable rules for the detection and safe usage of the natural times of infertility and fertility in a woman’s ovulatory cycle, for the spacing of births. With no money behind the dissemination of such knowledge, the ensuing enlightenment offered by fertility awareness based methods (FABMs) of family planning has spread more slowly, but steadily and has an extraordinary global outreach and uptake.

Now disillusionment with the side effects of artificial hormones in contraceptive pills and devices, and the potential risks to life and health means that more women are searching for healthy alternatives and appreciating the benefits of understanding their reproductive health.

The significant incidence of infertility and the growing disenchantment with the often intrusive and expensive IVF industry has also fuelled a wish for more holistic and less invasive approaches to managing fertility.

Women properly taught fertility awareness rejoice in empowering “good things” such as knowledge, understanding, confidence, self-esteem, the ability to monitor general and reproductive health, the ability
to detect times of fertility and infertility allowing avoidance of pregnancy or attempts at achievement of pregnancy. There is freedom in knowing the truth even though there may be acknowledged challenges in living out this freedom.

Using fertility awareness in marriage for family planning offers unique opportunities for growth in love, communication, shared responsibility, selflessness and joy. Like the two sides of the paradox – the time of abstinence over the short time of fertility is rendered literally awesome by awareness of the power of the sexual act - the ability to co-create a new life. Alongside that, the times of infertility are rich with the opportunities to nurture a loving relationship through the special intimacy of sexual union.

So we can actually be excited about the “good things” and challenges offered by *Humanae Vitae*, this fascinating “stone rejected by the builders”, with its call to live out the vocation to a “married love” that originates in God, who “is Love”. It contains an important reminder that “it is the whole man and the whole mission to which he is called that must be considered: both its natural, earthly aspects and its supernatural, eternal aspects”. Responsible parenthood and planning the size of one’s family “requires that husband and wife, keeping a right order of priorities, recognise their own duties toward God, themselves, their families and human society”. Repeatedly, the invitation it contains is to a greater, deeper happiness through the realities of a self-sacrificing love.

With fertility awareness in place, the beauty and meanings in marriage are intensified – and “good things” can indeed “run wild”!

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**Nun-physician has spent much of her life educating young people about NFP**

*Continuing our series introducing our readers to our pioneers from around the world. This article was written by Lou Baldwin from the Archdiocese of Philadelphia for Catholic News Service and is reproduced here with permission.*

Sister Hanna Klaus is an OB-GYN, a member of the Medical Mission Sisters and best known as founder of the TeenSTAR adolescent sex education program, which is used around the world.

She has long been a promoter of the Billings method of natural family planning and in 1980 developed TeenSTAR -- Sexuality Teaching in the context of Adult Responsibility.

It wasn’t always that way. Back in 1968, when Blessed Paul VI issued his encyclical “Humanae Vitae,” reaffirming the church’s ban on artificial contraception, her first reaction was: “It is very nice Holy Father, you are telling us what we can’t do, but you aren’t telling us what we can do.”

What was allowed was natural family planning – regulating family size by making use of the fertile period of the couple. For most of her life since she has been educating people, especially the young, on how to determine just when that is.

In “Humanae Vitae,” the pope also reaffirmed the church’s moral teaching on the sanctity of life, married love, the procreative and unitive nature of conjugal relations and responsible parenthood, and he asked scientists to improve natural family planning methods.
Sister Klaus’ own story begins in 1928, when she was born into a Jewish family in Austria and after the rise of Nazism, her family fled their homeland. They arrived in the United States when she was 12 and were resettled in Louisville, Kentucky.

From the time she was a very young child in Vienna, she had an interest in medicine and after college, she entered medical school at the University of Louisville. After graduation and during her residency at Massachusetts General Hospital, she had a life-altering epiphany. Previously nonreligious, she came to realize there was something missing in her life. Through friends she discovered the Catholic Church.

“I received the gift of faith,” she said in an interview for Catholic News Service. “I came into the church in 1952. Conversion is like being adopted.”

Not one for halfway measures, she almost immediately began to discern a religious vocation. Her ultimate choice was the Medical Mission Sisters, where she could be both a religious and a physician.

She joined the congregation in 1957, taking as her religious name “Miriam Paul.” After her formation, she served medical missions in Pakistan and what is now Bangladesh. She then worked for several years in St. Louis, just about the time of the release of “Humanae Vitae.” She also did a stint as director of the OB-GYN department at St. Francis Hospital in Kansas.

As a physician and an OB-GYN professor, she was well aware of the NFP methods approved by the Catholic Church which could be used to either promote or avoid conception. The calendar method was based on calculating the presumed days of a women’s cycle until ovulation and the second method -- basal body temperature -- was based on temperature changes which could indicate the fertile period.

As a professional, Sister Klaus was skeptical of the accuracy of either method. “The calendar method was like rolling the dice,” she said.

It was while in St. Louis that she read a book recommended by Cardinal Joseph Carberry that was written by an Australian physician, Dr. John Billings. It explained another NFP method he believed accurately predicted the onset of fertility and possible conception.

It was based on charting discernable changes in cervical mucus which indicated ovulation was coming.

The following year, Sister Klaus traveled to Sydney where John Billings and his wife, Evelyn, also a physician, were conducting a controlled study with couples to test accuracy of his method. The results were such that on return to St. Louis she initiated a similar study which replicated Billings’ results.

In 1978, the Drs Billings asked Sister Klaus if she would be interested in promoting this method of NFP with teens, because no one was doing that, and she agreed. The same year she moved to Washington to be an associate professor of obstetrics and gynecology at George Washington University; she also practiced as an OB-GYN.

She founded TeenSTAR in 1980 while she was executive director of the Natural Family Planning Center in Bethesda, Maryland.

“It's not birth control, it is a method of fertility awareness,” she explained. At first the program was staffed by herself and another Medical Mission Sister, Sister Mary Ursula. The first pilot group focused on girls, ages 15-17 divided into age-appropriate groups. As minors, all had parental permission to participate.

Through voluntary blind surveys, it was found a small percentage were already sexually active but over the length of the program, that number decreased and there was only one pregnancy. Because of the apparent success, more teachers were trained, and at parents’ request a similar but separate program was started for boys taught by a priest.

Since then, it has spread to approximately 35 countries in North and South America, Central America, Europe, Asia and Africa. When it is in a Catholic setting, it is taught in the context of St. John Paul II's “Theology of the Body,” which focuses on the meaning of the human body, sexuality and marriage in light of biblical revelation.
But even in a secular setting, “it is really natural law,” Sister Klaus said about the basis of TeenSTAR training.

“It is really teaching fertility awareness. Once they understand their fertility they begin to move away from peer pressure and begin to make their own decisions,” she told CNS. “It doesn’t matter if they are in the Bronx or in Ethiopia, the kids became aware of their own identity. If young people are invested in themselves and fully understand the value of the program, they love it.

“I think ‘Humanae Vitae’ is the way to go. I don’t think fertility is a disease and I don’t think it is reasonable to use powerful drugs or surgery to remove a normal body function,” Sister Klaus said.

One of the challenges Sister Klaus finds is the reluctance of some church officials or pastors to permit any kind of sex education because it might promote promiscuity. Properly presented it does not, she maintains, and programs such as TeenSTAR actually have the opposite effect.

At this point, Sister Klaus, a member of her religious congregation’s community in Meadowbrook, Pennsylvania, has relinquished the office of president of TeenSTAR International but is still a board member and president of the U.S. branch.

Looking back over her long career in leadership with TeenSTAR, she said, “I would have like to have done at least 10 times more than I have. The hardest place to bring such a program is the United States because so many are afraid of talking about sex. They are afraid when people get the information they will misuse the program.

“It is against human dignity to try to control people by not giving them information. I’m grateful the Lord has let us come this far.”

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**Question to Senior Teachers**

“Why in some places in the literature is the BIP of discharge called mucus and elsewhere it is called a discharge? Can you please clarify?”

To answer this question, we have gone back to the words of Dr Lyn Billings written in December, 1999.

**Basic Infertile Pattern (BIP) of Discharge**

Everything that comes from the vagina is a discharge – blood, mucus, lochia, BIP discharge which is from the vaginal cells (the vagina has no glands and does not produce mucus), seminal fluid, arousal transudate, infective discharge.

Since the slight discharge with a dry sensation which forms the BIP in an average length cycle is probably all from the lower end of the G plug, it is usually called mucus. It is indeed a G mucus discharge. The BIP which is prolonged as in delayed ovulation is due to a liquefying of vaginal cells in response to a slightly raised oestrogen level and a vaginal cellular growth. The cells are cast off from the wall, break up and form this discharge. Therefore we talk about a BIP of discharge. It is not mucus but until Erik Odeblad came along we did not know what its origin was. In early publications it was called mucus which we found out later on was not so. We knew that it was not pathological and if it was unchanging, the woman was infertile and we knew that it reflected a low unchanging oestrogen level, or an unresponsive cervix. This was all very fascinating! Clarifying the terminology became very important once we had the scientific explanation.

The Rules of the Billings Ovulation Method® have been formulated for maximum security to fit all circumstances. The hormonal evaluations and field trials have verified them.

In a cycle of 35 days or less only one BIP can be identified. The 35 day cycle has been selected to formulate the rule because it is just outside the average length cycle of 28 days.
In a 28 day cycle with ovulation on day 14 approximately and with a normal luteal phase of 14 days approximately, with an average length mucus symptom of 6 days there would be on average 5 days of bleeding and 3 days of BIP. Three days is too short a time to assess an unchanging pattern of discharge after dryness before the point of change which leads into the possible fertile phase. If there are no dry days and the discharge is continuous following menstruation it is necessary to study three cycles and the point of change to be sure that this discharge is unchanging and that therefore the Early Day Rules can be applied.

**Combined BIP**

Any cycle of 35 days or over gives enough time to assess a BIP of discharge and the point of change. If there is any uncertainty another cycle or two will give the required time and experience for surety. In a BIP of two weeks or more, without bleeding an unchanging pattern of discharge signifies a BIP of discharge and reflects low oestrogens. This discharge may be interrupted by dry days (combined BIP). There is time for minor fluctuations in oestrogen levels to cause this phenomenon.

It is very helpful for a teacher to understand the behaviour of the ovarian hormones and the cervical mucus responses. The wall charts of the Billings Ovulation Method® contain all the information necessary to be able to interpret the behaviour of the patterns of discharge which the woman will chart.

In chart 11 Page 23 of ‘Teaching the Billings Ovulation Method Part 2’ we have an example of the rapidly changing pattern of BIP. This repetitive pattern of minor variations is a discharge which never progresses to the changing characteristics of the fertile phase, nor does it include bleeding which would be indicative of an endometrial response to raised oestrogens. The total perspective is that of a record which is exhibiting no significant change at all and is therefore demonstrating infertility.

“Without bleeding” usually signifies that oestrogen levels are low. However, some women respond more readily than others to oestrogen and the endometrium being more sensitive will bleed at a lower level. Some women will not bleed even though the oestrogen levels have been very high and a breakthrough or withdrawal bleed could have been anticipated.

We know categorically that ovulation will always be followed by menstruation if pregnancy has not occurred.

The BIP is judged by the unchanging pattern. After two weeks the BIP can be charted including all the minor changes and the Early Day Rules applied.

After a few more days, as there is no bleeding, it can be concluded positively that there has been no ovulation associated with the 1st change to a discharge with possible fertile characteristics “wet creamy”.

If bleeding does occur, since there is no Peak, one cannot presume that ovulation has occurred, therefore the Early Day Rules will continue to be applied to the BIP as determined counting three after the bleed.

**Discharge during Luteal Phase**

The discharge during days 1, 2, 3 after the Peak is mucus. It is dried as it passes through the vagina due to the function of the Pockets of Shaw in response to the progesterone rise. Odeblad’s diagram of the mucus proportions shows that as the progesterone rises, the S mucus is still present but declining. Channels are still present in the cervix for the sperm to get through during these three days. By the end of the third day the cervix is plugged with G mucus so that there may be a discharge of G mucus and probably there will be some vaginal cellular contribution. (The oestrogen level is raised as well as progesterone). Wetness just before menstruation is normal for some women, due to the fall in the level of progesterone preceding the drop in the oestrogen level. As a result, the Pockets of Shaw are no longer withdrawing moisture.
The Directors of WOOMB International are delighted to announce a new recipient of the John and Evelyn Billings Award at this 10th Anniversary Billings Ovulation Method® Conference in Ho Chi Minh City.

In choosing someone for this award the Directors acknowledge a person who has shown by their actions to have the passion to be an active participant in the spread of the authentic Billings Ovulation Method® to every woman on earth. In pursing this passion there will always be setbacks and a worthy recipient is someone who does not let setbacks stop them from continuing to spread the “good news” of the Billings Ovulation Method®.

This is only the second time this Award has been offered and this time we wanted to acknowledge the realization of a dream. A dream that has been so wonderfully fulfilled - 10 years of the Billings Ovulation Method® in Vietnam.

The Directors of WOOMB International congratulate the recipient of the John and Evelyn Billings Award –

Dr Lien On

Lien On first came to Australia from Vietnam many years ago. When in Australia, she met with Drs John and Lyn Billings, and immediately became interested in their work. She became accredited as a Billings Ovulation Method® teacher and worked with the team at St Vincent’s Hospital in Melbourne.

In 2007 Lien On approached the Directors of WOOMB International asking if we would support her to realise her dream to bring the Billings Ovulation Method to her home country of Vietnam. Supported by her wonderful husband Lien Trung and Fr James Vo Thanh Xuan, they visited Vietnam to make contacts and we all know the incredible results. Two Senior Teachers from Australia, Gillian Barker and Joan Clements then travelled with On and Trung to various parts of Vietnam twice a year for the next three years with further trips over the succeeding years.

On has kept in close contact with WOOMB Vietnam acting as our liaison person between WOOMB Vietnam and the WOOMB International Directors, gently guiding and supporting the realization of her dream so that 10 years later, we can see the wonderful results.

We know she will be seen as a very worthy recipient of the John and Evelyn Billings Award.

Ho Chi Minh City, October, 2018

Dr On Lien and her husband Trung
Gillian Barker and Kerry Bourke, Directors of WOOMB International, were honoured and privileged to attend a Conference celebrating 10 years of the Billings Ovulation Method® in Viet Nam, held 12-13 October in Ho Chi Minh City, with 200 attendees.

Bishop Louis Nguyen Anh Tuan opened the Conference followed by a slide show on the development of the Billings Ovulation Method® in Viet Nam, presented by Sr Theresa Phu - the president of WOOMB Viet Nam. Then we were delighted to hear regional reports of all activities - there is truly some great work being done throughout Viet Nam.

Father Thomas from Thanh Hoa shared his experience of attending the International Conference in Costa Rica earlier this year. This was very well received and sparked interest in the possibility of Viet Nam hosting such a conference in the future.

Fr Joseph spoke on the scourge of abortion. As Viet Nam has the third highest abortion rate in the world this was a very fitting presentation. He included lots of pictures and statistics, the most memorable being a baby, gift wrapped with a tag attached saying “Gift from God”. We were all left with the knowledge there is still much work to be done in Viet Nam.

The attendees then broke into discussion groups with 3 topics to consider:

1. How to work with young families effectively?
2. How to collaborate with fellow Billings Ovulation Method® teachers?
3. Do you need to standardise the instruction of the Billings Ovulation Method®?

Representatives of each group presented their deliberations. It was wonderful to see such lively, animated and sincere discussions, all with the future of the Billings Ovulation Method® at the forefront. Overall the conclusions were that by working together, and by using authentic materials already available, the teachers could achieve more.

Saturday 13 October began with a short session sharing news from different areas. Kerry Bourke spoke on the Cause for the canonisation of Drs Lyn and John Billings. The teachers from one area showed how they have adapted the use of beads to help illiterate couples record the cycle, mimicking the lei (flower chart) on the front cover of Teaching the Billings Ovulation Method® Part 2.

Dr Lien On was presented with her award (see previous article). She is such a worthy recipient of the John and Evelyn Billings Award, having worked tirelessly to introduce and then establish the Billings Ovulation Method® in her beloved country of birth, Viet Nam. With her husband Trung by her side they have spent many hours translating the literature, making contacts and writing to the authorities, meeting with people and raising money to ensure the success of this project. We managed to keep this a surprise, telling Trung at the last moment so that he could be ready with his camera. He confessed later, he was a bit shaky, so he made sure the official photographer was ready to take the photos. On and Trung were very honoured and humbled by this award and there were many tears shed by all.
Next on the program was Dr On presenting how and why she brought the Billings Ovulation Method® to her home country. The title of her presentation translates as “Thank you Grace”. She commenced by saying that after receiving her award she was now very excited to do her presentation. Then the WOOMB International Directors’ spoke: Kerry Bourke presented, “This Method is Love” followed by Gillian Barker presenting, “This Method is Truth”, with Dr Lien On translating.

Fertility Pinpoint™ was the subject of the next presentation. This was given by Joseph Trong Linh, who was part of the group attending the Vietnamese Fertility Pinpoint™ Training day at Head Office, Burwood, in October 2017.

The last session was inspirational, the concluding statements by Sr Theresa Phu, Fr Stephano, Fr Joseph, Fr Vincent Nguyen Van Tinh, and Sr Maria Kim Hieu. All showed how the future of the Billings Ovulation Method® in Viet Nam is strong and growing. WOOMB Viet Nam is committed to spreading the good news throughout Viet Nam and has the backing of the Bishops and priests in many Dioceses.

During the Conference an 88-page book on the history of the Billings Ovulation Method® in Viet Nam was presented to all attendees. Full of pictures and stories it is a gorgeous book, there is even a picture of Joan Clements and Gillian Barker wearing áo dài, (pron. our-yay) traditional Vietnamese clothing.

The newly translated and printed booklet “Understanding Couple Fertility” was also distributed, this was an overwhelming success. Within two weeks none of the original 3000 copies were left and it needs to be re-printed as quickly as possible.

Throughout the Conference, we were treated to performances, including traditional dances, singing and plays by some of the Billings Ovulation Method® teachers.

We were so fortunate to be a part of this wonderful Conference to celebrate the 10th Anniversary of the Billings Ovulation Method® in Viet Nam.

Preceding the Conference, we conducted a Teacher Training Course and were amazed to find we had 150 students, it seemed the numbers were growing by the day! Commencing the evening of Wednesday, 10 October we reviewed the science then on Thursday, we presented The Continuum of Ovarian Activity. We reviewed a breastfeeding chart which shows many of the variants of The Continuum as the woman returns to fertility.

The afternoon was spent going through the “Challenging Chart”. This looks at what questions to ask the couple so that the teacher can clearly understand what is happening in the chart. We discussed how anxiety and bad habits can affect the charting and by “Asking the Right Question” often what appears to be a Challenging Chart becomes clear and simple.

On Sunday 14 October we had another teacher training day, with 50 teachers attending. We started the day by going through a mock Case Study that has been newly prepared for the Correspondence Course. This enabled us to go through how to teach the couple, from taking a history, giving an initial instruction and follow up interviews all with the aim of the couple becoming autonomous. We continued looking at charts in the afternoon and finished with a chart that has a Luteinised Unruptured Follicle followed by ovulation. At the end we were elated by the achievement but then the reality of having to say goodbye to our wonderful students hit us and so with a lump in our throats and tears in eyes we bade them all farewell.

Monday 15 October, we took a 3-hour trip to the parish of Joseph Trong Linh, Buôn Ma Thuột Diocese, where there is great support from the Parish priest and the Deanery priest. We were accompanied by Mathew Xuyến Lê, Sr Phu, Sr Hong and Fr Thomas from WOOBM VN, as well as three other teachers from the Billings Saigon team.

We arrived at Buôn Ma Thuột for a meeting with fifty Billings Ovulation Method® teachers from the area. Dr Lien On presented “This Method is Love”, Sr Theresa Phu spoke briefly, then questions were answered. We attended a Thanksgiving Mass before returning to Ho Chi Minh City.
The next day, with On, Trung, Sr Phu and Fr Thomas we flew to Thanh Hoa in the north of Vietnam. Here we were to meet with two new Bishops from different dioceses to ask for support for the continuing work of the Billings Ovulation Method®, as well as raise the issue of the next conference possibly being held in Thanh Hoa. We met Bishop Joseph Cuong, of the Thanh Hoa diocese - the meeting was a success: the next Conference for WOOMB VN, so long as the government gives approval, will be held in Thanh Hoa.

That evening Fr Thomas led a question and answer session for the Billings Ovulation Method teachers®. It was exciting to see how many doctors were involved. Once again the camaraderie and support was apparent.

The next morning, we set off to visit Bishop Joseph Nang in the Phat Diem Diocese. Bishop Joseph Nang was very supportive and asked very relevant questions showing a keen interest in the Billings Ovulation Method®. He also spoke of the need for the Method to be spread beyond the Catholic community.

We continued our journey to see where Fr Thomas is located, in the Bach Cau Parish (White Dove) and once again share a meal with the group. We cannot thank Fr Thomas enough for his continued support of the Billings Ovulation Method® and WOOMB VN. His inner strength and enthusiasm are amazing, he already has a multi-entry visa for Australia and plans to bring doctors to visit in 2019.

The meetings with the Bishops were successful, there is no doubt that the Billings Ovulation Method® has the support of the church in North Viet Nam. Then it was goodbye to On and Trung, Sr Phu, Mathew and all the wonderful people with whom the Billings Ovulation Method® is in very safe hands. Goodbye Vietnam!

Gillian Barker and Kerry Bourke
October 2018

Billings Centre Hungary - Lives for LIFE Conference

Krisztina and László Lukács

On October 6th Billings Centre of Hungary and the Vianney Brothers Community, whose superior is also the spiritual leader of the Billings Centre Hungary, Father István Szenes, organized the Lives for LIFE Conference, timed to acknowledge the 50th anniversary of Humanae Vitae and the 65th anniversary of discovery of the Billings Ovulation Method®. We had two "birthday cakes" in front of the lecture-hall with the words Deo Gratias.

The conference started with the welcoming speech of Msgr. Endre Gyulay, retired bishop of the Szeged-Csanád Diocese, who helped Dr Mária Kőrmendy to first introduce BOM in Hungary.
A group of 30 teenagers performed a 30-minute modern play to promote marriage and also to call attention to all the temptations young people have to deal with. These teenagers are members of the Filia Community, a group the members of which help and encourage one another, like little lambs in a world of wolves.

Father István Szenes gave a keynote speech on Humanae Vitae and its connection to the Billings Ovulation Method® and then there were several parish priests and friars who gave their testimonies about how they realized that it is very important in their pastoral work to teach couples, adults and young people about the Method.

Several married couples with families also shared their testimony about how their family life has changed after dedicating themselves as a family to the Sacred and Merciful Heart of Jesus, this act is known as the Consecration of Families to the Sacred Heart.

After lunch our two guest speakers, Mrs Anett Olaj and Mrs Renáta Tima gave their speeches and personal testimonies. Anett spoke about her own experience with abortion and how it affected her life. Today she and her family are invited everywhere in the country to teach young people about responsibility, about what it is really like to live after abortion and to encourage them to join in praying for babies whose parents are considering abortion. Renáta and her husband could not have their own children, and she shared her testimony about adopting, encouraging couples suffering from infertility to consider this option which has truly turned out to be a blessing for them.

In closing the day we all attended holy mass celebrated by Msgr. Endre Gyulay with all the priests present at the conference con-celebrating.

It was a very rich day with all its contents, with about 140 participants attending. Certainly we had coffee-breaks and the Filia Group also motivated us with a flashmob. It was very encouraging to meet people with the same mindset and heartset and we are very thankful to all our helpers, to the WOOMB family and above all to the Lord for the Drs Billings and for making our work and this day possible.

Pax et Bonum

Krisztina and László Lukács

Africa - a Personal Memoir

Dr Robert L Walley

Dr Rob Walley and his wife Susan were long-time friends of Drs John and Evelyn Billings. Dr Walley is an Obstetrician and Gynaecologist and has a Masters degree in Population, Maternal and International Health from the Harvard School of Public Health. In 1985 he was appointed as a Consultor to the Pontifical Council for Health and Pastoral Care by Pope John Paul II and served on the Council until 2002. His first hand experience in western Africa gave him particular concern for the unacceptable levels of maternal and perinatal mortality and of obstetric and gynecological fistulae and prompted him to initiate the formation of MaterCare International. This non-governmental organization is interdisciplinary and made up of obstetricians, gynecologists, midwives, bioethicists, administrators and many supporters around the world. MaterCare International is dedicated to improving maternal health care worldwide through new initiatives of service, training, research and advocacy based on the ethic that all mothers and babies matter.
Rob believed an understanding of couple fertility was essential knowledge for the women and couples in his care. Billings Ovulation Method® training programs were incorporated into MCI Conferences in Rome and a Teacher Training Program in Nairobi in Kenya. The following reflection first appeared in MaterCare Monthly Newsletter for September 2018, and is reprinted here with the permission of Dr Walley.

I was born in Malta in June 1938 where my parents lived while my father’s ship was based there - he was a marine engineer in the Royal Navy. The war began in 1939 and when Malta came under heavy bombardment in July 1940 all families, including my mother and I, were taken by ship in a convoy, heavily escorted by navy battleships including the one on which my father was serving, to safety in Alexandria, Egypt. Thus, I first came to Africa as a one year old refugee. We remained there until evacuated to the UK later that year.

I was back in Egypt, at Port Said, ten years later when my father was en-route to India as he had been seconded to the Indian Navy where we lived for just over 2 years before returning to the UK. I was educated by the De La Salle brothers. I considered becoming a missionary, having been taken by the White Fathers and their missionary work in Africa, however, the Almighty had a different future for me - a vocation as a doctor and a specialist in the care of mothers.

I then met Susan and the Almighty intervened again, abortion in the UK got in our way and so we became ethical refugees, and left for Canada in 1973 and a University appointment in Newfoundland. In 1975 the world’s attention was turned to the enormous tragedy of maternal mortality and morbidity when the first Safe Motherhood project was held in Nairobi. In 1976 professional interests turned to further obtaining a Masters degree in International and Maternal Health. I was soon involved with Newfoundland bishops and the Canadian Conference of Bishops as a consultant and in 1981 was invited to attend a meeting of “Cor Unum” in the Vatican.

Then my life and Africa came together in an extraordinary way. In 1981 I was invited to the Diocese of Ikot Ekpene in South Eastern Nigeria by the first West African Cardinal H. E. Dominic Cardinal Ekandem of Nigeria and spent the year with the Medical Missionaries of Mary in a missionary hospital gaining first hand experience of maternal deaths and obstetric fistulae - birth injuries to the bladder, rectum or both due to lack of access to caesarian section for difficult births. Over the next 10 years there were a number of projects in Ikot Ekpene diocese and the next door Uyo diocese in the new Akwa Ibom State and I began developing the concept of comprehensive rural maternity care, linking existing rural maternity clinics, with two way radios right to St Luke’s hospital, equipped an emergency obstetrical transport and began training all traditional birth attendants to identify and refer high risk mothers early to the hospital. In the early 1990’s security became a problem in South East Nigeria.

So in the early 1990s, at the invitation of the Bishop James Owusu I was invited to the Diocese of Sunyani, Ghana where over the next 5 years the model for providing rural obstetrics was modified in the catchment area of St Theresa’s hospital within a different environment and cultural traditions. Bishop Owusu came to a founding meeting in Rome in 1985 which led to the eventual foundation of MaterCare International. To me, he became a mentor and encouraged the formation of MCI but sadly soon after his retirement he was killed in a road accident. At the same time funds were donated by an elderly Catholic gentleman in Canada for the building of a small specialised facility, for mothers with obstetric fistulae, for their treatment, rehabilitation and for the training of doctors and nurses in their care. The bishops of Ghana decided it should be located in another Archdiocese but sadly these funds were never used for that purpose.

In 2003, MCI was contacted by the Rt Rev Luigi Locati, having located us on the internet presumably because MCI is an experienced Catholic organisation. The bishop asked for help in saving the lives and improving the health of mothers in the Apostolic Vicariate of Isiolo - women whose health care had been sadly neglected for many years. Project Isiolo was suggested to the bishop as a demonstration showing that maternal lives may be saved and health improved by spreading the “balm of Mercy” through comprehensive maternal health care made available to all mothers even in rural areas. Project Isiolo continues development to this day but it is not there to provide general health care services which is the responsibility of the governments at each level.

During the fifteen years I served as a consultor for the Pontifical Council for Health and Pastoral Care (1985-2002) I spoke regularly at plenary meetings about the tragedy of maternal mortality in sub-Saharan African
countries; at the UN as part of the Side Events organised by the Permanent Representative of the Holy See; to the African sub-committee of the Foreign Affairs Committee of the US House of Representatives; and to politicians at the EU, in Canada and the UK.

I am deeply concerned about the attack on Africa by the Reproductive Health policies of white imperialist western countries and rich philanthropists, especially in Canada, the UK, the USA and the EU. With huge amounts of funding they destroy the unborn, motherhood, marriage, families and impose contraception and abortion. As a Catholic professional organisation MCI remains committed to its original mission to provide a specialised Catholic voice for the Church; to develop a portfolio of accomplishments and to support the goals for Integral Human Development of the East Africans Bishops (AMACEA) agreed at their 50th anniversary meeting in Addis Ababa and released July 24th 2018;

1. The equal dignity of all people, regardless of ethnic background and the need for integral human development, which “cannot be limited to mere economic growth alone” but must “focus on the human person, should be holistic and cover all aspects of life of the human person and geared towards the common good.”

2. “We uphold and endeavour to promote the Church’s basic peace building plan which has four principles: recognition and defense of equal dignity of all members of the human family, promotion of integral human development, support for international institutions.”

3. “These peace building blocks are the basis for enhancement of human dignity that must be enjoyed by every human being through respect of human rights.”

My contact with Africa began 80 years ago and it has been a privilege to serve mothers in so many African countries for nearly 40 years. I am now happy to pass this part of MCI’s work onto a younger generation.

Dr R. L. Walley

News Around the World

Pakistan - In recent months the hardworking team at WOOMB Pakistan has participated in a 5-day program on Values-Oriented Life with the youth of 5 dioceses of Pakistan. Day 3 was allocated for marriage-preparation when the basics of the Billings Ovulation Method® were given to the youth together with God’s plan for marriage and social teachings of Catholic Church on marriage, family and life. A total of 45 young people attended and the BOM program was held separately for boys and girls. Unfortunately, there is no opportunity for Catholic youth to gain such knowledge because of our culture. They were so curious and asked many questions especially about their reproductive system and natural regulation of fertility and infertility. It was decided that every year, in our National youth program, one day is to be allocated for BOM.

The WOOMB Pakistan team has also conducted two programs for childless couples, one for 105 couples living in poor rural villages. As the participants were largely illiterate the session was conducted in very simple language. The second program was for 72 couples from the slums of Lahore. Some of them shared that this had been a life-changing day for them. Tha day ended with Holy Mass and during his Homily the Archbishop said that a previous such program had resulted in many conceptions which was very encouraging for the participants.

During another program in a village parish, where most of the participants were illiterate, they used the simplest method to impart the message. Instead of using a multi-media projector, they used coloured diagrams and charts and used the local dialect (Punjabi) most of the time.
It was observed that the concepts of the BOM were well received as examples were given relating to their surroundings and everyday life, e.g seeds (sperm) wet and dry land (fertility and infertility) and the optimum time of fertility of their herds.

**Philippines** - WOOMB Philippines has been similarly busy taking the good news of the Billings Ovulation Method® to the people of the Philippines. There are now 15 newly trained teachers in the Diocese of Baguio, 65 from the Diocese of Laoag and 20 newly graduated teachers for the Parish of St Martin De Porres in the Diocese of Paranaque. They also conducted a Teacher Training Course for officers of the Asian Institute for Marriage at St, Alphonsus Ma. Ligouri Parish, Magalanes. Not only do these people now have excellent knowledge for their own lives and marriages but they have the skills to share this teaching with others in their parishes thus ensuring the continuing spread of the Billings Ovulation Method®. We congratulate the team on all their hard work.
A Tribute to my wife, Dorothy
“She caught my eye”

Many of our readers would remember Dr Joe Santamaria who was a close personal friend of the Drs Billings for many years and proposed the toast to them at the Golden Jubilee Conference Dinner in Melbourne in 2003 to celebrate 50 years of the Billings Ovulation Method®. Dr Joe’s beloved wife, Dorothy, died on 22 August 2018.

One morning many years ago
I stood in a queue in Collins Street
To purchase tickets for an opera.
I saw a girl who caught my eye.
Somehow I then did realize
That I must claim her for my own.

I did that quite successfully
Our love did flourish
And did blossom
Into enduring joy.

First we moved to Thornbury
Then we moved again to Heidelberg
With a farm and house in Red Hill
Which we embellished with her skill.

We shared these things
Of nature’s floral beauty
Where we drove and walked
On the Mornington Peninsula.

What e’re you touched and planted
Burst into the beauty of the townships
And the beaches and the foreshores
Found at McCrae and Rosebud Sounds.

But now today we have to part.
But ever shall my love for thee
Grow in the depth of my aching heart
And soothe the pain for now.

But the memories of our life together
Remain within a grieving heart.
I thank my God who created us
And the joys we lived together.

May you wait at heaven’s gate
To greet me when my time has come
So that both of us together
May pass the portals
Of what God has prepared for us.

From you loving husband Joe. 30/8/2018