BIRTH CONTROL REVIEW

Public Health

Number

Aesculapius
God of Health
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THE AMERICAN BIRTH CONTROL LEAGUE, INC.

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MARCH, 1925

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No. 3

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A Desperate Choice

Edited from Memoirs Who Believe That Birth Control Will Prevent Abortion

PRELIMINARY ANNOUNCEMENT OF THE SIXTH INTERNATIONAL BIRTH CONTROL CONFERENCE

PUBLISHED BY THE AMERICAN BIRTH CONTROL LEAGUE, INC.

Published as Second Class Matter, March 11, 1918, at the post office at New York N.Y. under the Act of March 3, 1879

Subscription price, $2.00 a year

Entered as Second Class Matter, March 11, 1918, at the post office at New York N.Y. under the Act of March 3, 1879

The American Birth Control League, Inc.
EDITORIALS

AN editorial on the prevention of conception published in the Journal of the American Medical Association, is especially gratifying to us as an indication that the protracted apathy of the medical profession concerning Birth Control is being replaced by intense active interest. In the London letter published in the same number we read "A plea has been made in Guy's Hospital Gazette for the instruction of medical students in the principles and techne of contraception. In an editorial on the subject, the Lancet states that it urged this course nearly four years ago on the same grounds. The subject is not referred to in the medical curriculum, and the majority of young physicians are not competent to weigh the social and domestic consequences of enjoining complete abstinence in married people who for economic or medical reasons should not produce a large number of children, against the alternative of giving instruction in appropriate methods of contraception."

THAT Birth Control is being discussed in British and American medical journals is in no small part due to the generous support given by such men as Lord Dawson in England and Dr. William Allen Pusey, President of the American Medical Association, in this country. These were not the first among medical men to express their opinion that the teaching of methods of contraception is a measure of public health. There is a whole line of medical pioneers for Birth Control, among them two great scientists now dead, Dr. Abraham Jacobi and Dr. L. Emmet Holt. The seed sown by these men is bearing fruit and the support of Dr. Pusey and Lord Dawson represents a growing interest throughout the medical profession. Where there was once a physician in support ten years ago there are a score today. It is men belonging to this group of broadminded physicians whom we thank this month for our Public Health Number of Birth Control Review.

NO longer is it possible to discuss seriously the cause and cure of War without reference to the world problem of over-population and its only permanent solution—Birth Control. The recent conference in Washington, D. C. on the cause and cure of war, in which nine important national organizations of American women participated, sharply and conclusively demonstrated this fact. This conference, composed in large part of delegates from organizations of a semi-religious character like the Young Women's Christian Association and Women's Christian Temperance Union and the Council of Women for Home Missions, and on the whole conservative in spirit rather than radical, nevertheless listened attentively when the problem of Birth Control was dwelt upon by three speakers—Major General John O'Ryan, Professor Warren Thompson, and Mrs. F. Robertson Jones, who at an open forum represented the Birth Control movement.

Considering the time, the place, the character of the assemblage, this triumph for our cause indicates a tremendous change in the consciousness of the five million American women represented at the conference. Opposition to the discussion of over-population and Birth Control was not voiced. Ten years ago the very mention of the idea would have shocked American clubwomen. Today, women are awakening to the great overwhelming truth that if they are actually serious in their desire to probe to the roots of War, if they wish to cure this world-disease in fact as well as in theory they must face unfinchingly unpleasant truths.

They have demonstrated that they are not yet prepared to dissect and analyze this problem. But there is every sign to indicate that once this question enters into the national consciousness of American women, they cannot logically avoid it or relegat it to the background. Birth Control is an idea so dynamic, so vital, so illuminating that it cannot reasonably be set aside.
Mrs Robertson-Jones brilliantly, briefly and eloquently in her short talk in the forum on "causes of war," presented with almost scientific precision the structural relation of war, over-population and Birth Control. She said:

"SEVERAL of our speakers on the causes of war have agreed that economic conditions are its fundamental causes. And if we examine the economic conditions that breed war we find that over-population is responsible for many of these. If a nation needs more raw material, or new markets, or more food this is because it has outgrown its available supplies. If its needs conflict with those of other nations, war will result. When it is a question of starve or fight, people will always fight. No ruling of any League of Nations will prevail against real economic need.

"In reply to a question from Mrs Catt, Professor Warren Thompson said yesterday that it was inconceivable that a nation suffering from over-population would ever refrain from fighting to acquire more lands, if peaceable immigration into other lands or more food was impossible. And peaceable emigration is rapidly becoming impossible. Countries do not wish to become dumping-grounds for the surplus population of other countries. More and more the United States is restricting immigration. Australia does not wish the superfluous Japanese. Those people whom England has in excess are the urban workers—the very people the dominions do not want—to compete with their own industrial workers.

"As Professor Henry Pratt Fairchild says, "The old idea of movement as a means of escape from the evils of over-population must be definitely eliminated from national ideas—the nations of the world must undertake to solve their own population problems by the application of measures of control rather than by aggression on the rights of other peoples."

"A moral duty rests with each nation so to limit its own numbers as to avoid conflict with its neighbors.

"I sincerely hope that this Conference will recognize over-population as likely to be an important cause of war in the future, and will recommend, as Major-General John F. O'Regan did, the problem of population control."

The speaker of these brave words has won a distinct triumph for the cause of Birth Control in commanding the generous and respectful attention, which she received, and thus in sowing the seeds of the great problem in the minds of an intelligent and representative body of American women. To expect immediate acceptance and immediate action would be to invite rapid oblivion and forgetfulness. This seed will grow in the minds of the more thoughtful women, who will come to see their basic position in human society. They will awake to the deep truth that in their bodies rests the power to prevent warfare.

Let American women learn to open their minds to their great problems and their inexhaustible powers. Look deep and courageously for true causes, even though to look straight and unflinchingly may mean the readjustment and even the abandonment of old beliefs and prejudices inherited from traditional morality and religious convictions. They may only temporarily refuse to face the great world problem which presses in upon the consciousness of all the women of all nations. They cannot permanently refuse to consider it, for inevitably, slowly but certainly, step by step, the problem of Birth Control is invading the human mind of this twentieth century. Sooner or later the women of America must make their momentous decision—whether they shall carry on the torch of humanity, or lead the world into the bottomless pit of bad breeding.

MARGARET SANGER

As the Sixth International Conference draws near friends are giving their services untringly both for office work and in other ways. The most recent are the four musicians who have consented to contribute their talent at the opening concert, which is advertised on another page. On the financial side, however, we need still more help. We need especially funds to help foreign delegates make the journey. An Asiatic pioneer for Birth Control writes:

"My eagerness to attend the conference is immense. For I feel sure that I shall manage our Birth Control League here on better and more intelligent lines if I get an opportunity to get in touch with you all and see for myself how you conduct your propaganda. But however eager I may be the question of money cannot be solved by my eagerness. Can you help me to solve this prime difficulty? It is so awkward of me to put this request before you—and in such rude, unpolished words too. But I have to suffer being called rude if I have to try my best to attend the conference."
The Doctor and Birth Control

By James F. Cooper M.D.*

Just as there are differences of opinion among the clergy, lawyers, business men, statesmen, artists, and men of letters, so medical men hold varying views on certain phases of the medical art. In the past the subject of Birth Control has been taboo socially and its practice virtually prohibited by the law. Doctors and hospitals have feared for their reputations if their names were associated with the subject. It has not been taught in medical schools and has been avoided in hospitals. The average doctor therefore has known little more than the average layman. During the last ten years however, there has been a growing interest in the matter. Many prominent physicians throughout the country have gone on record in favor of Birth Control, most of the profession are taking a favorable attitude, and articles of a favorable nature are appearing in leading medical journals from time to time. I wish to give a few reasons why I believe that Birth Control should be better understood and practiced more intelligently.

Maternal Mortality and Morbidity

Very few people have an idea of how many women die from childbirth. Since the armistice was signed about one hundred thousand women have died in the United States from this cause alone; martyrs to the future generation. One hundred thousand widowers have been left more or less helpless with three hundred thousand orphans. Only about one of these deaths in a thousand is due to unavoidable accident at the time of birth. Most of the others are avoidable. One half the deaths are due to general diseases, tuberculosis, Brights disease, weak hearts, diabetes, and many others. When these conditions are recognized by a doctor, if the woman were warned of the peril of undertaking maternity and the proper information given these lives could be saved, the homes kept together and the children given a fair chance in life.

The other half of the deaths are due to infection at the time of birth. This is often unavoidable. The question of infection is largely one of resistance. A strong vigorous person will throw off most of them while the weak and debilitated become easy victims. For this reason unless a woman is in the best of health and has good vitality she is taking a great risk by undertaking maternity. If her health will not permit it she is not only taking a risk for herself, but she is doing an injustice to her husband, her children and society.

This appalling loss of life does not tell the whole story. Tens of thousands of women are entering our hospitals every year for the repair of injuries and for relief from the effects of disease contracted during labor. It has been estimated that half the women who have had children bear the marks of injury and will sooner or later suffer. It is obvious therefore that much of the loss of life during confinement and a large part of the illnesses of married women are due to their becoming mothers when they were not physically fit.

Fetal Mortality and Morbidity

During the period since the signing of the armistice a million and a quarter of infants have died in the United States while they were being born. Only a very small percentage of these deaths are due to unavoidable accident. They are principally due to defective development, syphilis and general diseases in the parents.

If you will add to this list the millions of children born alive but with insufficient vitality to reach the age of two years you will realize the appalling amount of human wastage which is continuously going on, most of which is avoidable.

Add to this also the thousands of children who do not die but are defective in body or mind and live to be a burden to themselves and society. Most of these are from defective parents who never should have brought them into the world. Sad to say this class is increasing every year.

It seems impossible that with the enlightenment of today we can contemplate such a state of affairs and not be tremendously concerned about bringing to bear the best medical skill and making available such methods of protection as shall have proved themselves to be safe and reliable.

Abortion

It has been estimated that there are over one million abortions in the United States every year. This is a larger number than occurs in any other country in the world.

Abortion may be in the order of frequency, 1. self induced, 2. therapeutic, 3. syphilitic, 4. general, 5. accidental.

The first class is self induced. Some of these are in the case of single women and the result of immorality, but most of them are married women who do not want to become mothers for various reasons of their own. In other words they are an

*Excerpts from an address at Carnegie Hall, December 6, 1924.
expression of rebellion against enforced maternity
A question which the doctor has to decide is whether he will give information on Birth Control to a woman just because she requests it or whether he will refuse and permit her to resort to criminal abortion Personally I feel that abortion is a most abominable affair and everything possible should be done to suppress it A knowledge of Birth Control on the part of the married woman will relieve her the necessity of abortion, which is at once immoral and dangerous to life and health

The other classes of abortion, therapeutic, syphilitic, and general, will present definite evidence which will contra-indicate pregnancy and in these cases, unless the exciting cause can be ascertained and removed, some method of Birth Control should be given The great objective in the practice of medicine is prevention of sickness and promotion of health rather than curing disease I doubt if there is any field more promising for the promotion of health and happiness than preventive obstetrics

**Fear of Pregnancy**

Much nervousness and mental depression in married women is due to the anxiety and dread of becoming a mother when the woman knows that her condition and home circumstances will not permit it This often amounts to a definite disease which might be called fear of pregnancy psychoneurosis You have heard that when poverty comes in at the door love flies out of the windows This may be expressed in another way When the stork arrives too often the mother loses her charm and vitality The husband becomes discouraged, and it is exceedingly difficult for romance to continue The spirits of husband and wife are broken, and life becomes a burden and often the home is wrecked

There is one question which should be answered by a doctor and that is as to the safety and reliability of present methods

Many things have been proposed by quacks, and commercial interests who have something to sell These have been used by an uninformed but anxious public Disappointment has often followed and sometimes illness The purchasing of nostrums or “contraptions” of any sort on the recommendation of a druggist or a sympathetic friend is bound to lead to disappointment They are not only ineffectve but are also detrimental to good health But doctors who are well informed on this subject are able to give safe and quite reliable protection to those who are entitled to it.

**Safety and Reliability**

During the past ten years the subject has had scientific attention given to it A study of all known methods has been made and a great mass of information has been collected from investigators all over the world The matter has been in the hands of reputable physicians whose first consideration has been safety and reliability By safe methods I mean methods which are free from any danger to health and which produce no unfavorable after effects As a result of this investigation many methods have been proven to be useless and some harmful These have been discarded and condemned by experts Others are found to be safe and very reliable These can be recommended

For best results put yourself in the hands of a doctor who is sympathetic and informed on Birth Control methods The average doctor with the average case will give very satisfactory results with no injury to health, indeed ,the physician will be able to treat general conditions at the same time, and thus keep his patient in the best possible condition.

**The Law and the Doctors**

The laws of most states forbid the dissemination of Birth Control information Doctors in some states are not even allowed to give this information to save life America is the most backward of all civilized countries in this matter This country also has the largest number of deaths from childbirth and the largest number of abortions One cannot help but feel that these conditions have some relation to each other The laws which prohibit the giving of contraceptive information should be abolished in the interest of good health, good morals, and a finer humanity

It is sometimes said that Birth Control is unnatural and therefore wrong We brush our teeth to keep them from decaying We take baths to give a sense of well-being and keep us in health We are vaccinated to protect us from disease We perform surgical operations to save life and relieve suffering These might be called unnatural but they preserve health, save life and give happiness and we therefore feel that they are justified When Birth Control is practiced to preserve health, save life and promote human welfare, it is justified We must make our theories of life fit the facts of experience

The practice of Birth Control will not lead to race suicide or racial degeneration The countries where it has been practiced longest have a steady healthy increase of population yearly and the general health of such countries is the best in the world
Birth Control as a Prevention of Abortion

By Benjamin T. Tilton, M.D.

There is a misconception in the minds of many people who have not given the subject much thought, that Birth Control and Abortion are in the same category. Such people are therefore shocked at the Birth Control movement and in many instances refuse even to discuss the subject on that ground. This misconception is deliberately fostered by those in authority in certain religious sects and is the basis of the moral arguments against Birth Control given out to those under their influence.

Not only has Birth Control nothing in common with Abortion but it is a weapon of the greatest value in fighting this evil. With its help we may hope to limit and, I trust, eradicate this criminal practice. It is not generally known outside the medical profession and social workers, how widespread this practice is. It amounts in fact to a National disgrace. I say national because the United States leads all other countries in the number of abortions performed yearly. The laws enacted to suppress it have had but little deterrent effect. The practice is most common among married women, particularly of the poorer prolific classes who already have children and cannot afford to add to their number. These mothers, on finding themselves pregnant again after repeated pregnancies, resort in desperation to this immoral and dangerous means of relief. Some women seek this means not only once but a dozen or twenty times. Some women do not live to seek it for the second time.

It is no exaggeration to say that thousands of women die annually from the effects of these illegal operations and other thousands become chrome invalids or permanently sterile. These tragedies are a disgrace to our civilization and cry for prevention. They can be prevented and I believe alone prevented, by the dissemination (through proper channels) of Birth Control knowledge concerning scientific, safe and sure methods of contraception. Woman has the undeniable right to limit her children to the number that she can adequately provide for and the number that is consistent with her health and strength and that of her children. If women are not intelligent enough to recognize this right, they need and should get instruction from physicians, social workers, and others interested in human welfare.

The next step in education should be that of emphasizing the wrong and dangers of abortion which so many women are apparently ignorant of. They should then be led to see that proper prevention of the undesired pregnancy is vastly more rational and safe than its illegal termination. It is true that the majority of women, even in the lower classes, try to practice some form of Birth Control, but their methods are crude and unscientific. It is only in the upper classes who get the benefit of advice from their own physician, that contraceptive methods are successful, and in these classes abortion is much less common. Information about contraception is usually disseminated in the lower classes by one woman telling another. The usual result is failure sooner or later, and the only weapon left her is abortion. The one rational way to prevent these periodic abortions is to teach the woman proper contraceptive methods. This she must get not from her neighbor who is usually as ignorant as she is, but from some reliable source.

It is the aim of the Birth Control movement to provide this source for those to whom it is not now accessible. At the present time it is not possible for a poor woman to get information on this subject in a Hospital Clinic. She can get her information and advice in almost every matter affecting her health but on this subject which is perhaps the most vital to her own health and that of her offspring, her ignorance is allowed to continue. This is because the present State laws forbid the giving of contraceptive information except in cases of actual disease. This means that a woman must wait until her many pregnancies have finally brought on heart disease, Brights or Consumption before the Hospital physicians are permitted to give the instruction which given earlier might have prevented the disease she is suffering from. When such a woman is already pregnant the law allows the performance of a so-called "Therapeutic Abortion." But is this not often a confession of failure on the part of a physician to instruct his patient with heart disease, Brights or Consumption how to prevent the pregnancy which may cost her her life?

Prevention is the key-note at the present day in medicine as well as in many fields. Some of the best minds in our profession are being devoted to the study of causes and prevention of disease. It is another step in the evolution of the medical art which will result in the saving of thousands of lives which could not be saved after the disease has once taken hold of its victim. Preventive

(Continued on page 94)
Health and Birth Control

From a Psychiatric Standpoint

By Aaron J Rosanoff, M D

A generation or two ago, there seemed to be little chance of determining the causes of mental disorders. Study of individual cases inevitably brings to light such a multiplicity of causes and such complexity in their manner of operation that it has appeared impossible to determine their relative importance.

In more recent years it has become customary to distinguish among them two groups:

1. The essential causes that is to say, those in the absence of which mental disorders do not occur, and

2. Incidental or contributing causes which operate effectively only in the presence of one or more of the essential causes.

Accordingly, that phase of public health which has to do with the prevention of mental disorders is concerned with a two-fold problem:

1. The gradual elimination of the essential causes.

2. Pending the accomplishment of that end, which will occupy a number of generations at least, the organization of such a system of mental hygiene as may to some extent nullify the effect of essential causes and preserve mental health for those individuals who, owing to the operation of one or more of the essential causes, are predisposed to mental disorders and are particularly susceptible to the influence of the incidental or contributing causes.

The more important essential causes are (1) neuropathic heredity, (2) syphilis, (3) alcohol and drug addictions, and (4) head injuries.

The incidental or contributing causes are hardly to be enumerated. They are not the same either in their nature or in their manner of operation in any two cases, and many of them consist of but the normal stresses of life. One might mention childbirth, domestic troubles, bereavements through death of near relatives, economic difficulties, etc.

Birth Control has an obvious relation to the above-mentioned fundamental problems with which the movement for the prevention of mental disorders is concerned.

The essential causes of mental disorders are not of equal importance. Moreover, there is a certain interdependence among them. This would hardly be the occasion for a detailed discussion of that interdependence. Suffice it to say here that syphilis occurs mainly, as we all know, as a venereal infection, but not all extra-marital sexual relations are equally fraught with the danger of syphilitic infection. The danger is greatest in connection with prostitution, that is to say, completely commercialized sexual relations. Prostitution in its turn is closely linked with feeblemindedness and other mental disorders, and these in their turn have for their essential cause bad heredity.

As regards alcohol and drug addictions, it is important to note that not all who drink alcoholic beverages or take habit-forming drugs, even more or less habitually or excessively, are equally exposed to the danger of developing true addiction and the consequent mental disorders. The soil is here, too, a matter of great importance, and those who have an inborn instability are in greatest danger of developing an addiction. It will be judged, therefore, that bad heredity may be considered the cause of causes of mental disorders.

It is a question whether Birth Control is capable of fully solving the problem of the elimination of bad heredity. It seems more likely that segregation of neuropathic persons in institutions and perhaps sterilization would have to be employed. Birth Control today seems to be employed for other than eugenic reasons by those who from a eugenic standpoint would least need to employ it, and it seems to be the most neglected by those who from a eugenic standpoint would most need to practice it. It may be that a more ready access to Birth Control instruction would make Birth Control a greater factor for eugenics and a lesser one against eugenics than it is at this time.

Whatever Birth Control might contribute toward the elimination of bad heredity would constitute also a contribution toward the elimination of syphilis, alcoholism and drug addictions.

Among the measures of mental hygiene which are so much needed for those who are constitutionally predisposed to mental disorders, Birth Control should be an important factor, masmuch as it would reduce for such persons the physical, psychic, and economic burdens of parenthood.
The Necessity of Population Control

By Henry Pratt Fairchild

Of all the facts related to men's material well-being, these two are the most important: First, all life is dependent on the land, that is, upon the various substances of which the earth's crust is composed. Second, these substances are absolutely fixed both in quantity and in their elemental character, they have never been increased or diminished since the foundation of the globe nor can they ever be.

It follows that the total amount of life on the earth at any given time is limited by the total amount of these elemental substances. There can never be more life than there are cosmic materials to support it. The forms of life can never be increased beyond a fixed point.

All living creatures are equipped with a physiological capacity for multiplication and an inherent urge to multiply which in combination continually press them to increase at a rate much more rapid than natural conditions will permit. Consequently only the minutest fraction of the young brought into the world can possibly survive. The infant mortality rate in nature falls short of one hundred per cent by only an infinitesimal fraction of a per cent. The total number of each species under natural conditions remains constant, there is no increase from generation to generation or from century to century.

On the lowest levels of organic existence we find that nature provides for the perpetuation of the species by an incredibly enormous birth rate, leaving the survival of the individual offspring to chance. A rate of reproduction of several million offspring each year from each female is by no means uncommon among species no lower in the scale of evolution than the oyster or the eel. On these low levels no care or protection over the offspring is extended by either parent.

As we ascend the scale of evolution we find a general tendency to substitute a certain degree of parental care—that is, a period of true infancy—for an excessive birth rate. Just as many young grow up to maturity from the small family started on its way by parental protection as from the innumerable family left to shift for itself, and there is a great economy in energy and death. There is no better test of evolutionary advance ment than the birth rate, the period of infancy and the amount of care expended by the father as well as the mother.

Man being primarily an animal is subject to the same general laws of increase as the rest of the organic creation. But up to the present time man has been able to escape the law of fixed population by spreading himself over the entire surface of the globe and by using his unique powers to establish a virtual monopoly over the life-maintaining substances of the earth. That is, he has managed to control natural forces in such a way that the total amount of life which can be supported shall be predominantly human life. All other forms of life, as civilization progresses, are either made contributory to human life or are eliminated. This is perhaps the truest sense in which man deserves to be considered the "Lord of Creation".

By these means man has succeeded thus far in maintaining a continuous increase in numbers. In fact, strange as it may seem, he added more to his total numbers during the nineteenth century alone than in the whole previous span of his existence. As a result he grew comfortably optimistic. He unreflectingly assumed that what he had done in the past he could continue to do throughout an indefinite future. But the conditions of the past decade have caused many thoughtful persons to stop and consider. The most superficial examination of the situation makes it perfectly clear that the possibilities of human increase are by no means infinite. On the contrary, there are positive and inescapable limits to the total amount of human life which can possibly be supported on this globe.

Just what the maximum figure would be is no one can say positively, but it takes only a very simple mathematical computation to show that at the rate at which we are going now in the past decade have caused many thoughtful persons to stop and consider. The most superficial examination of the situation makes it perfectly clear that the possibilities of human increase are by no means infinite. On the contrary, there are positive and inescapable limits to the total amount of human life which can possibly be supported on this globe.

The earth can support only a certain number of humans, just as of oysters or codfish or rabbits or sparrows. When that limit is reached, some form of control will come into operation. It may be the control of a diminished birth rate or of an increased death rate. In fact, population has never been uncontrolled. Population control is a necessity. It lies with man himself to decide whether control shall be by rational processes adapted to promote human welfare and happiness or by the ruthless and cruel processes which nature inevitably imposes when other means fail. When man does not control, nature does.

It also lies with man to decide whether rational methods shall be adopted in time to forestall eventual catastrophes, or whether they shall be postponed until the extremity of distress compels their recognition.

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Venereal Diseases and Posterity

_Syphilis may reach beyond the patient and lay its hands on his children_

By WALTER M. BRUNET, M.D.

The last great group of communicable diseases which have not as yet been controlled are those unhappily called venereal diseases. A comprehensive plan of action which was put into operation with much success during the recent world conflict has become the standard for the United States if not for the whole world. This program which was then put into operation is not new in any single part but new in its combination of all the consistent, time-tried, and worthwhile methods which have been accepted as squaring with the highest standards of upright living. And it is sound in its sociology as well as in its preventive and curative medicine. In the broader sense, there are really only two so-called venereal diseases—syphilis and gonorrhea, the other infections are merely incidents in the differential diagnosis of syphilis.

Gonorrhea is a wholly different problem from every point of view. There are certain fundamental facts which apply to syphilis and gonorrhea as well as to diptheria, tuberculosis, and pneumonia. All of them are infectious, each produced by its own specific germ. They are transmitted by the physical contact of the well person with some object or with some part of the body of the sick person, on which are present the germs causing the disease. If there are germs of syphilis in the mouth, contact with the mouth or with objects containing fresh secretion from the mouth, will infect a healthy person. The germs producing the disease are carried in droplets of saliva and there is no vague flowing about of the poisonous agent in a mysterious manner, the infection is caused by actual transfer of germs.

Syphilis begins as a sore and the potentialities of the initial lesion reach beyond the patient’s body into the lives of his intimates and through the children that may or may not be his, and in this manner it lays hands upon the future of the race. It is a destroyer of the race. It kills outright 75% of the children of syphilitic parents before they are born or during the first year of life, and it cripples or weakens a large portion of those who survive. Syphilis is often transmitted to the child before birth, and when so transmitted it is not merely a constitutional lack, but actually a syphilitic infection.

Gonorrhea, as such, on the other hand, is not transmitted to the child before birth. Gonorrhoea begins as a discharge of pus from the canal through which the urine passes or, in women, as an inflammation, of some other part of the sex organs. In the large number of cases the destructive effect of gonorrhoea is local. The damage that itinflicts is mainly through its power to render sterile by the destruction of the organs that are vital in the creation and production of children. Gonorrhoea is the sterilizer of the race. A large number of one-child and childless marriages can be traced to the gonococcus, many of these infections being transmitted to women by their husbands. The inability to bear children spells defeat to nature’s purpose in the scheme of things and the woman who has been deprived of this right is the victim of a great tragedy. There are several possible avenues out of this dilemma. One is the placing in effect of a law providing for the examination of applicants for marriage, another, the successful carrying out of a thorough medical examination preventing those who are infected from entering matrimony. The prevention of the dissemination of gonococcal infections in marriage is one of the biggest eugenic problems of our time. It is intimately bound up with the question of the prevalence of this infection in society and the difficulties involved in the diagnosis, treatment, and determination of cure in the patient.

It has been pointed out that only four possibilities of infection of the fetus with the germs of syphilis exist:

1. The spermatozoon may carry the treponeme into the ovum.
2. The treponeme may be contained in the semen and, though not in intimate contact with the sperm cell, may penetrate the ovum simultaneously with it.
3. The ovum may contain treponemes prior to fertilization.
4. The fetus may be infected through the maternal circulation.

The first possibility is practically inconceivable because the relative size of treponeme and spermatozoon (unless one presupposes a much smaller form of organism as yet undiscovered), the almost certain early death of an ovum infected in this way, and the fact that, if the treponeme could thus invade such a minute part of the maternal organisms as the ovum, it is impossible that the mother herself could escape infection. The second requires a constant synchronization of penetrating power between the sperm cell and the treponeme, which is equally fanciful. As for the third, even if we leave out of consideration the probable fate of such an infected ovum, treponemes have been found in ova too infrequently to convert this possibility into a probability. Trinchese further points out that in abortions before the fifth month of pregnancy, the fetus is rarely infected.

(Continued on page 95)
The Relation of Endocrinology to Birth Control

By William N Berkeley, A.B., M.D.

In their relation to the desirability of Birth Control the facts of endocrinology cannot be strictly set apart from the rest of the functions and diseases of the human body. The glands of internal secretion have an important chemical bearing on the growth of the bones, the appropriation by the tissues of carbohydrate or starchy food, the differentiation of secondary sexual characters, the menstrual flow, the safe disposition of waste products, the speed of tissue chemistry in general, the automatic maintenance of pressure in the blood vessels, and other functions,—probably many more than we are now acquainted with. All these functions are, however, only cog-wheels in the complicated clock-work of the human mechanism,—only fractional elements in the sum of facts that justify the Birth Control movement.

Moreover, until it be proved that glandular deficiencies reside as "unit characters" in the chromosomes of the germ-cells,—which is a matter now open only to speculation,—one cannot affirm positively that a diabetic father will beget diabetic offspring; or that a young woman who develops hyperthyroidism at some time during her sexual life must thereafter bear children with a tendency to thyroid disease. Gland disorders, as far as we can see at present, are often acquired, and therefore very apt to be transmitted.

We may, however, be quite sure that any endocrine trouble which seriously disorders the normal chemistry of the body-cells will affect more or less the chemical activity, if not of the germ-cells, certainly of the fluids and membranes with which the latter are in contact before and during conception, and if the female be at fault, during the period of pregnancy as well. If this be agreed to, there is then no question that persons with serious endocrine troubles always run the risk of having children that are abnormal,—the abnormality not being of necessity a specific gland defect, but perhaps one of nutrition, or of symmetrical development, or of vitality.

To be sure, the gland problem often decides itself. Diabetics are often impotent (or sterile), and so are said often to be the pituitary giants and dwarfs. Disorders of the internal secretions of the sex organs, also, may have the same (sterilizing) effect. But this is not always the case. Nor can it be often foretold to which class the particular person in question belongs. Consequently Birth Control is always indicated, more extended argument on the subject should be superfluous.

Probably the commonest problem for the gland specialist is the young woman with thyroid disease. Whether she be hypothyroid, or the opposite, she must, if she bears children, bring them into the world with a physical handicap. At the same time there are many of the milder cases of Grave's disease (which is perhaps better known under its cumbersome name, "exophthalmic goitre") which are much benefited by a normal sex life, and upon which the joys of home and helpmeet react favorably in quite a wonderful way. When therefore one's professional advice is sought as to marriage of thyroid patients, it is best to allow marriage, I think, but to recommend Birth Control. No children should be born till the thyroid condition has been successfully treated, and recovery is in sight.

These comments apply, of course, only to the minor grades of thyroid disorder. The congenital cretinoids who have reached adult years, the people with myxoedema, the unfortunate women with year-long toxic thyroid trouble, should never procreate. Fortunately, it is not always possible for them to do this, but exceptionally they can, and the child thus brought into the world is, to say the least, apt to be abnormal.

There are many other disorders of the internal secretions which might, with an assumption of scientific erudition, be brought up to illustrate and enforce the desirability of Birth Control, but what has been already said will cover the ground. It is rather odd that in this generation we must argue and plead for the admission of facts which were fully recognized in Plato's time. Plato planned in the Ideal Republic that all the undesired, undesirable, and abnormal children should be exposed to the wolves, or otherwise exterminated. The modern Birth Control movement aims only at the rational prevention of such unfortunate infants ever being born.

If we had a tap which would not turn off we would not hesitate to send for the plumber. But when homes are flooded with too many children for the family income or the health of the mother, there are endless medieaval discussions as to whether it would be right to turn off the tap.

—Dr. Eden Paul in London Daily Herald.
THE study of the evolution of the human family from the earliest period of which we have record indicates that woman has been imbued with a much stronger protective-instinct than man toward their offspring. Also that as man and woman have been drawn more and more closely together by the love-motive, man's impulse to seize, dominate and enslave woman has yielded and been transformed into the more tender emotions of sympathy, gentleness and unselfishness, and that in observing woman's devotion to her child these tender feelings have been re-enforced. The result has been an ever increasing consideration for the child and its welfare. The statement that the status of a people is determined by the status of its women has long been axiomatic. We have reached a period in human progress in which the same is beginning to be said of the children, and its general acceptance in the near future seems reasonably assured.

If, however, it is true that woman has always been compelled to contend against man's will-to-mastery in defense of herself and her child, it might be well to bear this biological fact in mind before refusing to support her efforts toward child welfare. By reason of the sympathy engendered by his calling, much is to be expected of the physician in this respect.

In connection with “The Children’s Year” in 1919, President Wilson emphasized the “importance of protecting the child who constitute one-third of our population.” A circular distributed stated that “the countries of Europe have found that with the loss of so many thousands of young men the protection of the life of babies and young children becomes more than a patriotic duty.” Was this by implication a declaration that the child had some rights? In December of that year Herbert Hoover, in an address said “I believe that the attitude of a nation toward child welfare will soon become the test of civilization.”

The right of the child was not a new doctrine, however, for it was affirmed by William Graham Sumner thirty-six years ago. “We are offered countless projects of social reform,” wrote Sumner, “the aim of which is to bring in the millennium. Let us see what the first condition of such projects must be, and whether we are prepared to fulfill it. The student of social problems, who investigates them without preconceived or pet motions, finds again and again that he is brought face to face with this fact, it is a question of population. It is a question of marriage, of the reproduction of the species, of parental responsibility, competency, and duty, in short, the family. In all the social speculations of the day, however, scarcely any attention is ever paid to this range of subjects. It is assumed that every one has a right to marry without responsibility to others, that society has no right to intervene, that children come into the world without any antecedents upon which reason and conscience could operate, that family life is sacred, even to the extent that parental folly, ignorance and carelessness must enjoy a prerogative of wasting or perverting the youth of children.

“I maintain that the part of our social code and social creed which wants re-examination and reconstruction is that which relates to marriage and the family.” Nothing in the educational system is planned to inculcate high ideals of the momentous decision involved in the uniting of two lives, much less to make young people understand that parenthood is the most awful responsibility human beings can accept. We have broken to a considerable extent with the doctrine of the last century about the respective rights and duties of parents and children, but we have not yet, as far as I know, adopted any other consistent principle, and we shall not get the rights and duties on a sound basis until we accept the doctrine that the parents, having assumed the liberty and authority of marriage and parenthood, have all the responsibility, and all the duties, and that it is the child who has all the rights.”

After one hundred years or more of struggle, suffrage has been obtained by women. The organization of the child welfare movement in 1919 is accredited by Herbert Hoover almost entirely to them, “those American men who had to do with this work can claim little credit.” The responsibility, and the opprobrium, for the Birth Control movement has fallen chiefly upon women, although as a subject of world-wide social and economic importance to the welfare of man Birth Control is already firmly established as a serious thesis in the minds of the foremost students of political and social science and the humanities. The medical profession has for the most part avoided public recognition of it. The ministers of the church to a large extent have repudiated it or anathematized it.

We are reminded in this connection that our devout New England forefathers, believing that
woman could be possessed of the devil, exorcised his majesty by the ringing of church bells or by burning his unholy victim at the stake "to the glory of God." "The attitude of the Roman Catholic Church towards women's rights at the present day," wrote Hecker, "is practically the same as it has been for eighteen centuries." Recently there have been hopeful indications of change in this attitude. To be sure, the modern man laments every fresh indication of woman's insatiable appetite for "rights," but when driven to the wall proceeds to make further concessions.

There is another right which it would seem the female of the species is apt to demand logically—or illogically, according to which way man is accustomed to "react" at home—to fulfill her responsibility in protecting the right of the child, it is her right to determine whether or not and when she will permit man to unite with her in undertaking to create children. This right is inalienable. There is also a duty, the duty to seek the guidance of the physician, for she must look to him for assurance that she is qualified for motherhood. It is her right to have the physician's testimony to her husband's health. Birth Control is essentially woman's problem. Woman cannot assume her full share of responsibility in safe-guarding the welfare of the race until man is prepared to meet this issue. It is a test of his intelligence. It is the supreme token of his faith in the nobility of womankind.

But "woman is not only somatically and psychologically rather different from man; man never is able wholly and completely to put himself in her place." In periods of "almost uncanny emotional variability" woman has always been a source of bewilderment to her husband, and occasionally to her physician. Some one has said that there can be no love without knowledge, nor knowledge without investigation. Often a deep and complicated psychological problem underlies the misconceptions and misunderstandings between husband and wife which the physician untrained in psychology cannot solve. The solution of these problems is one which the physician should undertake.

"Life is an everlasting striving upward." When man arrives upon the scene he comes to his problems with the heritage of millions of years of organic evolution, millions of years of struggling with problems of adjustment, and with the solutions which have been reached during all these long years laid down in his structure. Birth Control is an expression of man's effort to adjust himself to the ever-changing conditions of his environment. As such it has a definite biological value. To the physician it involves not only a study of methods of control, it demands the broadest possible survey of the patient's bodily and mental equipment to determine what it is that is striving to express itself in the individual, and thus aid him to a better understanding of what to do with this energy. This is a problem in psychology, it must take into account the difference in the physical and mental machinery of man and woman, the effect of racial heritage and tradition upon the individual in his task of adapting himself to the conditions surrounding him as they apply to himself, his family, and his relation to society. It is a study not only of the individual's conscious efforts towards adjustment, with all the social, economic and traditional moral implications, it must fathom the depths of that vast store-house of the unconscious which the psychologist has only begun to explore, to interpret, and to reveal to the individual himself.

Birth Control is biologically sound. Preventive medicine must claim it as part of its work for the welfare of mankind. We are only at the beginning of a long and difficult task of educating and helping those who most need it, the ignorant and the poor.

**THE DISTRACTED MOTHER**

Twice had the wretched mother to the tomb,
Borne the sad produce of her teeming womb,
A third in bitterness of soul she gave
To feed the fierce insatiable grave
But when a fourth time destined to sustain
That heavy load of ill requited pain,
Then, madly desperate of a better fate,
The greedy flames she dared anticipate
And to their rage he--living fruit consigned,
Saying--"No longer shall this bosom find
Nurture for those whom Pluto claims his due
—If I must mourn, I will not labor too"

*By Menecrates,*

*A Greek poet who flourished about 700 B.C.*
A DESPERATE CHOICE

Letters from Mothers Who Know Not Where to Turn

Those who do not—and sometimes those who will not—understand, confound Birth Control with Abortion. No such confusion exists in the minds of the thousands of mothers who write us begging for relief. They are the very poor in whose married lives under the laws of these United States there has been but one choice, to bear innumerable children or to go hunger and thither, searching for some one who will relieve them of the child already started on its way into this world. In their letters to the League they ask for a better solution. They crave relief from “that despicable thing in our system,” a menace to health and life itself, which is practiced so widely as to make this country notorious throughout the world. As long as Birth Control is not permitted by our laws, criminal abortion, our modern form of infanticide, will continue to be the better alternative to unmotherly childbearing which is offered our millions of poor mothers.

“No Mostly Suffering”

New York

After reading your book on Birth Control that was loaned me by a friend I thought I would write you and state my case very plainly to you, as I am a widow now six years and I am thirty-five years old, working in a factory every day in the year except holidays. I have a very dear friend, one that I love with a true woman love, but I cannot ever think of marrying and living in constant fear every month of my life, as I am the mother of one child born when I was twenty. The doctors told my husband there was no help for me, but I pulled through after being all cut to pieces and strapped for five hours. The doctor told him I could never go through it again. But all the same they would not tell me what I could do, so I was pregnant three times after that, and was helped out of my trouble, but every time was harder and the last time came very near taking my life. Then the doctor said he would not help me again as it would kill me, that I must be careful. Mrs. Sanger, if you can give me any information that will make a change so that I can enjoy the rest of my time with this one I would love to be his. My first marriage was to a man nearly as old as my father and was not a happy union as it was mostly suffering.

“No Relief”

Missouri

I will be glad when the time comes when the working men and women of this nation have a chance to vote on whether Birth Control will rule the day or not. I am the mother of three children, and had I not went to the doctor for relief would have had several more. My husband is a miner who doesn’t get to work one-third of the time, and you realize the conditions confronting the miners at present. We feel we have about all the children that we can educate and support.

“It Means Death”

Kansas

I am writing for help, just like those that wrote and let you print their letters. I am only 21 years old and my husband is 28. We have one little girl just past 18 months. When she was born I nearly died. I laid from Tuesday night until Saturday evening at about 6:30. I had two doctors, two of my neighbors and my sister with me. At 6:30 the doctors chloroformed me and took her. She only weighed four pounds. In taking her they tore me, and I didn’t heal back right. Walking through hundreds of miles of fire could not have been as bad as what I suffered for her. I am afraid now to give birth to another and that fear is causing me to break my health with drugs. I am pale and weak and sickly. If only I knew what to do. Lincoln freed the negro slaves, but who (if not you) is going to free women from the bonds of slavery that hold them? What are contraceptives? To show you how ignorant most of us poor women are I can tell you I never heard of anything like that until I read your book. Oh! if you will only help me I just can’t bear to think of giving birth to another and I know I can’t stand poisonous drugs much longer. Help me, please, and I will do anything to help your work along. It is the best thing in the world. You are the only one I have to pin my hopes on now. It means death if I dope many more times and I can’t leave my husband. I love him. God knows how I love him. I’d rather die than leave him. The doctors around here say there isn’t anything that won’t kill you after you’ve used it for a while and I believed them until I read your book. It was a God send to me. I didn’t mean to write so much, but you are the only one I have ever opened my heart to. I pray for your good work to continue until it reaches every woman in the country.
A Foreign-Born Community

Ohio

I also am coming to you for advice. Am the mother of three children, twenty-seven years old, married twelve years. Have had at least twelve miscarriages, some due to having had bad hemorrhage at time of birth, and not being able to carry the children. With three I have been to a doctor who made a business of it, as it is more remunerative for him undoubtedly than giving advice on contraceptives. A friend of mine just died last week, leaving four small children, a victim of a midwife. Nor is she the only one that died through that death, in our acquaintance. A midwife not living far from my home has between thirty and fifty callers a day. Have a friend who is married five years, has two children and has gone to this woman at least four times to my knowledge, and yet the doctor who attended her gave her no more satisfaction than the doctor I had. All my doctor said was, "Don't stay with your husband, then you won't have children." Now I have a sister in M —— who is just one week, two children are nearly cripples from infantile paralysis, and taking care of seven children, and two almost cripples, you can imagine her plight. Amongst our country-women—German-Hungarians — there are so many that are compelled to go to work to help along in these times, and most of them find themselves in the abortionist's clutches. If you would please give me advice I would spread it in German and Hungarian to hundreds of poor women.

"If I Had Known Birth Control"

Kentucky

This is another plea for help which is needed very, very much. I will give you a sketch of the last three and one-half years of my life. I lacked one month of being seventeen when I was married. No one has a better husband than I. Five months after I was married I had a miss of about six weeks caused from a diseased ovary and going up and down steps. Four months later I became pregnant again, and had an eleven pound baby which has always been healthy. But five months before conception and the nine months of carrying the baby I had the very best of medical attention. I nearly lost my life in giving birth to my baby. When the baby was sixteen months old I became pregnant again. It was an awful thing to do, but — I couldn't face the future with another child. I have never seen a well day since. If I had known what Birth Control was I could have saved myself suffering. For days I couldn't raise my head off the pillow. For seventeen days my foot never touched the floor. The doctors said they wouldn't give two cents for my life. The suffering was horrible, but I would rather suffer it again than bring another child in the world whom I am not able physically to take care of. And I know it would be rather hard on us financially. Please help me, give me a sure preventive.

I am a little past twenty. I live in fear all the time of becoming pregnant again. My one great desire now is to be well like I used to be.

The Law Versus the Poor

Illinois

I am a poor woman who has had many children and am exhausted by child-bearing. It is killing me by inches. I don't know how long I will last in God's will. I have bought a book of "Woman and the New Race," which you are the author of. I have read it over and over so that I know it by heart. I dream that I find myself preaching to the poor that need your help as well as I do. I would go to jail and to hell itself if I knew I was helping the poor that do not understand Birth Control. Why should it be kept from us? Why can't we have the right like the wealthy people? Are we not human? Mrs. Sanger, I have a kind of love for you that I can't make you understand through my writing. I know you mean us good. You should see this little town: more little ones than big ones. They call our street Incubator Avenue. Poor women struggle to keep their homes and besides to hold peace with ignorant husbands. Why does law want to take you away from us? We need you and your help. Even in Chicago they are fighting for Birth Control in the Courts. I am sending you what I read in last week's paper about the Court and the doctors. Why all this mortification of the poor because we don't know any better? I always feel I have to help my mother, a mother that was devoted to each and every one of us but could not afford to bring us to where she liked to see us because she is worn out with work. She could just about feed and dress us with the earnings of a father's pay. Must we nowadays live the same way? Why not just have two or three children and bring them up right rather than have a dozen and treat them like lambs and goats out in the pasture? If there is any voting on Birth Control, Mrs. Sanger, there will be thousands and thousands in favor as we need it. I have suffered eleven years. I do not think about myself alone, but about others that need the same help. The doctors keep the poor women going up to their offices to do away with those things by abortion. I can see for myself that those very doctors in this town have no more than two children each. Now there must be something that prevents them from getting children. They know and hold their secrets, even their wives will not tell, as I come in contact with quite a few of them. I have no more to say, I could write a book to this. If you can give me any help, why don't you? Please now, it will not do me any good to bring any more in the world.
Sixth International Neo-Malth

ALICE VICKERY DRYSDALE, Honorary President

FOLLOWING the highly successful International Conferences held in Paris (1901), Liege (1905), The Hague (1910), Dresden (1911) and in London (1922), THE SIXTH INTERNATIONAL NEO-MALTHUSIAN AND BIRTH CONTROL CONFERENCE will convene for the first time in America in New York City.

THERE WILL BE A CONCERT AT AEOLIAN HALL ON THE EVENING OF MARCH 24th FOLLOWED BY THE SESSIONS OF THE CONFERENCE.

March 25--31 [inclusive] at the HOTEL McALPIN

Pursuant to a vote taken at the London Conference the coming conference will be held under the Auspices of the American Birth Control League, Inc.

MARGARET SANGER
President

THE FOREIGN VICE-PRESIDENTS OF THE CONFERENCE ARE

SIR JAMES BARK, M D, LLD
ARNOLD BENNETT, Esq
J O P BLAND, Esq
HAROLD COX, M A
Editor Edinburgh Review
HAVELOCK ELLIS
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University of Padua, Italy
DR G GIROUX, Paris, France
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M A, C B, Representative British Treasury at Paris Peace Conference
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CMG, FRAS, Hon FFS, Statistician Commonwealth of Australia
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Presidency College, India
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EDWARD WESERMANCK, Ph D,
Hon LLD, University of London

While the rights of the individual in relation to Birth Control, and the problems of Population, biological, eugenic, economic and political, will be discussed at many sessions, the keynote of the conference will be Public Health.

Public Health will be the topic of the Public Mass Meeting on the evening of March 30th, and Birth Control in relation to the health of the individual, the community and the race will be the subject of many morning and afternoon sessions. There will be a closed session for physicians on Contraceptive Methods.

The tentative program of the sessions follows The Program Committee is made up of E M EAST, Ph D, Biologist, Harvard University, L J COLE, Ph D, Geneticist, University of Wisconsin, C C LITTLE, Sc D, Eugenics, President of University of Maine, RAYMOND PEARL, Ph D, Statistician, Johns Hopkins University, ADOLPH MEYER, M D, Physician and Psychiatrist-in-Chief, Johns Hopkins University, W F OGBURN, Ph D, Economist and Sociologist, Columbia University.
ANNOUNCEMENT

On and Birth Control Conference

CHARLES V. DRYSDALE, DSc., ABE.,ULIEE, (London), President

ORDER OF SESSIONS

March 24—8 30 P M — — — — — — Concert

" 25—9 A M to 2 P M — — REGISTRATION OF DELEGATES
" 25—4 to 6 P M — — — — — — — — — — — — — — RECEPTION
" 25—8 to 10 P M — OPENING ADDRESSES — GREETINGS AND REPORTS OF ORGANIZATIONS

" 26—9 to 12 A M — — FECUNDITY AND CIVILIZATION
" 26—2 to 5 P M — — DIFFERENTIAL BIRTH RATE
" 26—7 to 10 P M — — — — — — — — — — — — — — PIONEERS’ DINNER

" 27—9 to 12 A M — — — — — — HEALTH
" 27—2 to 5 P M — — ECONOMICS—POVERTY—LABOR
" 27—8 to 10 P M — — — — — — — — — — — — — — WAR AND POPULATION

" 28—9 to 12 A M — STERILIZATION, EUGENICS, BIOLOGICAL
" 28—2 to 5 P M — — FERTILITY AND STERILITY
Evening—No Meeting

" 29—2 30 to 5 P M — — — — — CONTRACEPTION
(Physicians only)

" 30—9 to 12 A M — — PSYCHIC RELEASE—Women’s Session
" 30—2 to 5 P M — — ETHICAL FACTORS—RELIGIOUS
" 30—8 to 10 P M — — PUBLIC HEALTH AND BIRTH CONTROL
(Public Meeting)

" 31—9 to 12 A M — — — — — INTERNATIONAL PLANS
" 31—2 to 5 P M — — VISIT TO CLINICAL RESEARCH
DEPARTMENT OF AMERICAN BIRTH CONTROL LEAGUE

A Hospitality Committee of three, Mrs. DEXTER BLACDEN, Chairman, Mrs. JULIET RUBLEE and Mrs. ERNEST ADEE will look after the comfort and entertainment of the delegates.

Applications for rooms at the Hotel McAlpin or the Hotel Latham, should be made to EDITH HUSTED, 104 Fifth Avenue, New York City. From ANNE KENNEDY may be obtained the complete program when it is ready, and tickets for the Pioneers’ Dinner ($4.00) and the Concert ($1 50)

The following are among those who are contributing papers to the Conference

Havelock Ellis, J. O. Bland, Harold Cox, Professor E. M. East, Professor Raymond Pearl, Rev John Haynes Holmes, Prof Walter F. Willcox, Professor Roswell H. Johnson, Prof Henry P. Fairchild, Dr Alice Hamilton, Dr C. C. Little, Prof James Field, Dr William Allen Pusey, Prof S. J. Holmes, Judge Harry M. Fisher, Professor Calvin Bridges, etc.
Birth Control in its Relation to Tuberculosis

By S. Adolphus Knoff, M.D.

In order to give a fairly intelligent idea of the relation of Birth Control to tuberculosis, let us first consider some of the characteristics of this disease. The wonderful reduction in the morbidity and mortality in tuberculosis which is over 50 per cent as compared with a generation ago, causes some people to believe that the problem of tuberculosis has been solved or is approaching its solution. This is a serious mistake. There are still one million consumptives in the United States among whom doubtlessly there are many mothers, or prospective mothers.

Tuberculosis is now universally recognized as a communicable, preventable and curable disease, communicable by close contact such as is inevitable between mother and child, the communicating factors being the tubercle bacillus found in the sputum and the saliva of the tuberculous patient. Children are particularly susceptible to contracting the disease either by being kissed on the mouth by the tuberculous patient or by the inhalation of tuberculous dust or tuberculous sprays from the cough of the consumptive patient. Tuberculous dust is created when the sputum expectorated by the tuberculous patient is allowed to dry and to become pulverized. This tuberculous dust and also the tiny droplets of saliva which are expelled during the cough may cause the individual inhaling such dust or spray to contract the disease. It is evident that with great care these modes of infection of the respiratory tract as well as those of the digestive tract derived from tuberculous milk or meat, can and should be prevented, the former by the individual, the latter by the sanitary authorities.

Until some years ago, it was generally believed that tuberculosis was also hereditary. While strictly speaking tuberculosis may in very rare instances be directly inherited, as in cases when bacilli are found in the after-birth, these cases are so rare that we may treat them as a negligible quantity and in a general way may say that tuberculosis may be considered not hereditary. Because of this assumption, the opponents to Birth Control say that prevention of conception is not justified even in a tuberculous woman. My own conviction, which I believe is shared by many of my colleagues, is quite the contrary. Granted that direct bacillary transmission from mother to child is exceedingly rare while the latter is still in utero, that is to say, before it is born, that does not mean that the child does not receive the toxins created by the bacilli in the mother's lungs. The blood stream from the mother containing toxins known under the name of tuberculin, reaches the circulation of the child and causes it to become predisposed to developing tuberculosis, and thus the child of a tuberculous mother, particularly when the latter is in the more advanced stage of the disease, is almost sure to be doomed to die in infancy or childhood.

We may now ask what is the effect of a pregnancy on the mother suffering from tuberculosis. In the more advanced stages, in the majority of cases, while during the pregnancy the mother may feel comparatively well, the disease usually progresses to a fatal termination after the confinement. The child may live some time, but if there are other children, they and the last born are deprived of a mother's care. Sometimes when the disease is in the earliest stages and the mother is able to take good care of herself, she may live and the child being only slightly infected may also survive, but being predisposed with a weakened constitution from the close contact with the tuberculous mother during infancy and childhood, it is more likely to contract tuberculosis from a post-natal infection, and of course is more susceptible to the infectious diseases of early childhood, than would be the offspring of a healthy mother.

I recall a very striking case which I reported in 1915. An Italian woman was referred to me for examination and final diagnosis. She gave her age as fifty-six, and had married quite young. She had borne her husband seventeen children, of which, however, only four were living. Some had died in infancy, some at school age, and some during adolescence. Upon examination, I found the woman's mental condition even worse than her physical. The repeated pregnancies, the frequent diseases in the family, thirteen deaths among her children, had made a mental and physical wreck of her. Yet the woman belonged to the well-to-do class of our population of Italian birth. What would her condition have been if she also had to share in the struggle for the existence of the family and had had to work in sweatshops or factories as so many of the poor Italians have to do? She was afflicted with a chronic tuberculosis, but for how long she had been suffering with it, I could not tell. Conception control in her case might have saved her much suffering, anxiety and worry, and instead of being a physical and mental wreck she might have been a healthy, happy woman with fewer births but more healthy living children.
There is no doubt in my mind that the change in our New York law which under such circumstances now allows the physician to give contraceptive advice to women suffering with tuberculosis and other diseases which pregnancy may aggravate, will have a bearing on the reduction in the mortality of tuberculosis. Even before the change of that law, we had the right to perform a therapeutic abortion in cases where the completion of pregnancy involved danger to the mother's life. However, such an operation is always fraught with some danger, and is it not better to prevent the conception in such cases than to be obliged to submit the mother to a dangerous and painful operation in which case the child must be sacrificed anyhow?

Every child born by a mother with the tuberculous disease even in the earlier stages, inherits a physiological poverty which is difficult to overcome, even with an excellent environment and in the homes of the well-to-do. How much more difficult is this in the homes of the poor, and particularly when the family is a large one! The children of very large and poor families, particularly the latter born, with rare exceptions are physically and sometimes even mentally inferior to the earlier born children, and in my experience the latter born more frequently contract tuberculosis than the earlier born.

In taking the history of a patient it is my invariable custom to ask whether the patient comes from a large family, and if so whether he was among the first or latter born children. As a rule, especially among the poor, it proves to be one of the latter born (the 6th, 7th, 8th, 9th, etc.) who contracts tuberculosis and I believe this to be because when he came into the world there were already many mouths to feed and food was scant. The father's income rarely increases with the increase of the family, and the mother, worn out with repeated pregnancies, can not bestow upon the latter born children the same care which was bestowed upon the first ones.

Let me cite one more of the cases which have made me so strong an advocate of Birth Control among the tuberculous. Not so very long ago I was asked by a young colleague to aid in the diagnosis of tuberculosis in a day laborer. The man earned $18.00 a week, was thirty-six years of age on the day the examination and diagnosis was made, had been married fourteen years, and his eleventh child had been born on his last birthday. Four or five of his children had already died, two of them of tuberculous meningitis. A glance at the rest of the family showed that nearly all of them were predisposed to tuberculosis, if not already infected, and that a few years of continued underfeeding and bad housing would finish their earthly career. With two or three children to provide for the family might have lived in relative comfort, with better food and better home environments, the father might never have become tuberculous and none of the children might have contracted the disease. The commonwealth would have been the gainer by two or three mentally and physically vigorous future citizens.

In relation to such cases, I like to quote the opinion of one of our greatest authorities on tuberculosis who only recently passed away. I refer to Professor Herman M. Biggs, that renowned clinical teacher who was connected for so many years with the New York City Health Department as general medical officer, and who was up to his death the Commissioner of Health of the State of New York. A few years ago, just before Judge Dayton of the Federal Court dismissed the case against Mrs Margaret Sanger for sending information about Birth Control through the mail, Dr. Biggs had given the following statement to the press: "...I am strongly of the opinion that the present laws in regard to the giving of information in relation to the governing of infant control are unwise and should be revised. There can be no question in the mind of anyone familiar with the facts that the unrestricted propagation of the mentally and physically unfit as legally encouraged at the present time is coming to be a serious menace in civilization and constitutes a great drain on our economic resources. This is my personal view."

From what we have learned of the danger of too many pregnancies even for the mother only slightly predisposed to tuberculosis, of the absolute danger to the tuberculous mother and the child when the disease is seriously active, of the difficulty of raising a large family of children in the homes of the poor, of the frequent development of tuberculosis in the latter born children in such homes, and of the communicability of the disease from one tuberculous person to another, particularly to the children, does it not seem true that all federal and state laws prohibiting giving information for the prevention of conception, be annulled?

In this article I am not going to speak of the supposedly unethical aspect of giving Birth Control information. All students of sociology know that those who need this information least, the well-to-do, the strong and healthy, who have few or no children at all, know all about the prevention of conception, and that the young people who would use the information for immoral purposes.
WHILE truth is powerful to dispel error when that error arises from misinformation and lack of proper knowledge, truth is absolutely powerless to remove prejudice inspired by malice."—CARDINAL HAYES, New York, in The World, November 12, 1924

While the first half of the above exactly describes the changing attitude of the misinformed and ignorant as their ignorance on Birth Control is dispelled, the second merely expresses a lack of faith in the cause one stands for. Truth removes every error eventually, even "prejudice inspired by malice." Had I not known that before, I would have learned it during the eight years I have sold the Birth Control Review "on the sidewalks of New York."

Many of the kindly sympathetic friends I have made for Birth Control are Catholics. They stop and chat and discuss Birth Control and other questions, they tell me their troubles and problems and ask my advice, which I give to the best of my ability. One woman told me of a "friend" with a drunken husband who lived in the home provided by his wife to whom he used most offensive and insulting language, he never gave her any money. What would I do in her "friend's" place? "I'd leave him at once and support myself," I told her. Then she admitted that that was her own case and the priest whom she had consulted had given her the same advice as I. She had one boy who was beginning to work, and was thankful she had no more.

The hopeful thing about the Catholic women is that the more the priests tell them how "wicked" Birth Control is the more they want to find out for themselves just how wicked it is, and when it is explained to them they realize the brutal injustice of bringing babies into this work with no better heritage than disease, poverty and all their accessories. They also feel sure that just as we get Votes for Women in spite of the church's opposition, so shall we get Birth Control.

Sometimes I get the other side, sometimes I get abuse, sometimes I hear the results of "error due to lack of proper knowledge"—proper knowledge withheld by prejudice. A nurse passionately fond of children told me this story:

She came upon a neglected little girl crying in the street one morning. She picked her up, pacified her with some candy and took her to the house the child pointed out as her home. There she found the mother with three other children, one a baby lying on the bed, all dirty and neglected. Instead of cleaning the children and her four-room apartment the mother was playing the gramophone. The nurse, for the love of the children, washed and cleaned them and told the mother how to look after them. Occasionally in her spare time she called to see how they were getting on, there was no improvement, just dirt, neglect and gramophone, and one day the news that they were going to get a radio. The nurse suggested that surely they needed other things more urgently than a radio and the mother said, "Oh, the charities'll look after us." The nurse felt too disgusted to bother with such irresponsibles any more, but when in the vicinity some time later, she found the apartment empty and heard from neighbors that the husband had lost his job. They were Irish Catholics.

This is the worst side. The Catholics I meet on the sidewalk are of all sorts. Some are like this family, they don't think and don't care. They have the children and leave the result to charity. Others are more conscientious. From some of these I get abuse, from some approval. Often they begin with abuse but end in approval.

During the early days of selling near Macy's, a Catholic woman of Irish birth used most abusive language every time she passed me. This went on for months, then for some time she ignored me. Later I saw her with another woman, a cheery little Irish soul who hailed me with, "Hello, how are you, how's business?", and whom I remembered having had a long chat with some time before. Evidently she had repeated to her friend all I had said, with fruitful results. Later I met my former antagonist in Macy's, where she was employed and she actually smiled.

Later still she stopped and spoke to me outside and told me if she had known about Birth Control when she was first married she would not have had six children, to be left a widow to slave for and bring up. Nothing but hard work all her life. Another Irish Catholic, "Maggie" used to create a scene every time she saw me, once she attacked me with an umbrella and another time she had eggs to throw at me. She seems to be changing for the better, for the last time I saw her she listened to what I had to say and went her way without creating a disturbance.

There used to be a patrolman on Broadway very opposed to Birth Control and very abusive when in plain clothes. He was evidently transferred, for

(Continued on page 91)
March, 1925

Motherhood in the News

Child Labor Laws Alone Cannot Lift the Burden from Childhood

The National Child Labor Committee is making its third attempt to get a child labor amendment into the Federal Constitution. This is an attempt with which all humane people must be sympathetic, as with the further aim of the committee to raise the present minimum age at which children shall be allowed to work and prolong the period of play and education.

But child labor laws alone will never gain for childhood its rights. They cannot, for example, help the little boy whose story is told in the New York World of January 14. The headlines, which show the high lights, read "Boy Halts Work as Janitor to Hunt for Lost Little Brother Tells Police Father Has Tuberculosis and Mother is Ill, So It's Up to George York, Who Sells Papers on the Side."

The front door of the West 47th Street Police Station opened last night, about 11:30, and a cold gust of wind announced to Lieut. Tim O'Brien that a caller had arrived. He looked up from his work, but saw no one. Then a thin voice from below his high desk called: "Can't you hurry a little bit, Mister, I've got to get back to work."

Lieut. O'Brien looked over the top of the desk and discovered a small but business-like youngster.

"Work?" he exclaimed. "Say, how old are you?"

"Ten."

"What do you do?"

"Mostly, I'm the janitor at No. 400 West 53d Street. Sometimes I find time to sell papers on the side."

"What's your name?"

"George York."

"All right, Mr. York, what can I do for you?"

"Well," said George, "I want you to help find my brother, David. He's been lost since 2 o'clock this afternoon."

"Lost, eh? How did that happen?"

"Y'see David—he's seven, next oldest to me—we went over to the Sacred Heart School at 51st Street and Tenth Avenue this morning for his lessons, like he always does. He was snuffin' a little, like he always does, and pretty soon Sister Marcella sent him home with a note to mamma, which says he's sick and ought to have some medicine. And mamma sent him back to Sister Marcella with a note sayin' papa hasn't got any money and she can't buy any medicine. And Sister Marcella sent him back with another note to mamma, but I don't know what that note said, because David didn't get there with it."

"Where do you think he might have gone?" asked Lieut. O'Brien.

"Dunno. I thought maybe he went to gran'ma's over on Eleventh Avenue. But gran'ma says she hasn't seen him."

"Why didn't your father come down here to attend to this?"

"He couldn't. He's sick—been in bed nearly five years with tuberculosis."

"How about your mother? Where's she?"

"She's sick too. Got varicose veins. That's why I do 'bout all the work—chickin' the furnace, scrubbin' the hall 'n' everything."

"Isn't there anybody else in the family to help you?"

"Sure. There's David, but he's lost now. And Mxt, but he's only four, and Margaret is just two, an' they ain't much help."

"No, not much, I guess," said O'Brien. "Well, you can go back to your job, George, and you leave David to me. If he's findable, I'll find him."

At midnight David had not shown up at the Missing Persons Bureau or the Children's Society. He did not appear in any accident records and no policeman on the beat had been able to find any trace of him.

As long as tubercular fathers and sick mothers are not able to protect themselves from having an unending stream of children, it will be "up to George York" to do the janitor's work which his parents are hued to do. He breaks no child labor law, he is not paid for helping his parents. He probably breaks no school law, the Sacred Heart School sees to that. Yet he and his little sisters and brothers are bearing so heavy a burden of labor, starvation and ill-health that we are left with a half-acknowledged hope that little David will never come back, that some sudden accident more merciful than life has released him. But even if he is released, he is the only one of the four, and to these others will be added other sickly children without number, one a year for as many years as their sick and hopeless parents drag out their wedged lives.

This family is under the supervision of the Sacred Heart School. Probably, since they are sick and in need, they are watched over by the Saint Vincent de Paul Society, whose function it is to ease the burden of poverty among Roman Catholic families. Yet the Roman Catholic Church which comes in contact with many families like this, whose children are brought into the world one after the other, to suffer from hardships and to the grave, is prevented by religious scruples from relieving such suffering by encouraging Birth Control.

This merciful measure would, according to its belief, stem the flood of little souls who pass pain fully through life, apparently with no other object than to add to the glory of God by swelling the multitude of His creatures.
THE Walworth Women's Welfare Centre of the Society for the Provision of Birth Control Clinics of London, has just published its first annual report. The report does not, as the name would seem to imply, cover the first year, but the first three years the clinic has been in operation. The centre was founded in November 1921 under the auspices of the New Generation League. For the first two years it grew slowly, but during 1923 the number of women attending took a sudden leap from a handful to 285. By October 1924, the end of the period covered by the report, 530 women were registered and the number of attendances for the three year period was 8087.

Except in cases of extreme poverty, a small fee is charged for advice, in addition to the cost of appliances. This does not, however, begin to cover the expense. The premises are donated by Mr. John Sumner, and the deficit on running expenses is made up by voluntary contribution. The expense for the year ending August 1924 amounted to £1809 18sh 5d, or in American money, about $9000.

During its first years, Dr. Norman Haare gave his services to the centre on a volunteer basis. Since he was forced by the demands of his practice to retire, the clinical work has been carried on by three women doctors and a nurse who are in attendance several afternoons and evenings a week.

Towards the end of 1922 Dr. and Mrs. Drysdale found it necessary to withdraw from active control, and the Society for the Provision of Birth Control Clinics was organized. The Honorable Mrs. Graham Murray is Chairman of the Executive Committee, Mrs. Evelyn Fuller is Honorable Secretary and Superintendent, and Mr. Harold Cox is Treasurer. Besides the Walworth Centre, the Society cooperates with Mrs. Dighton Pollock in the work of a new centre at North Kensington.

"The one purpose of the Centre," says the report, "is to obviate human misery by preventing the conception of unwanted children. In poor families each additional child generally means a lowering of the standard of living for the whole family. Many married couples among the poor have only one room to live in, and under such conditions even one child is a doubtful blessing. In practice it often happens that father and mother and five or six children are packed into one room—sometimes with only one bed.

The need of the work for the relief of suffering is shown by the following cases:

Mrs. B., age 44, has been 17 times pregnant. She has had 5 miscarriages, there are 11 children to provide for. Her husband is a labourer, earning £2 a week.

Mrs. C., age 35, has been married 14 years. In that period she has had 11 pregnancies, and 10 children survive.

Mrs. D., age 41, has been pregnant 12 times. Only 4 children survive. Her husband's wages amount to £2 per week.

Mrs. E., age 44, has been pregnant 17 times. She has 10 children living, and her husband's wages are £2 10s a week. Out of this sum she pays a rent of £2 6s a week.

Mrs. G., age 44, has been pregnant 17 times. She has had 5 miscarriages, and has 11 children alive. Her husband's income is £2 per week.

Mrs. J., age 24, has been pregnant 4 times. Only 3 children survive. Her husband is at present in a sanatorium and she is herself tubercular.

Mrs. K., age 35, has 2 children. She suffers from albumenuria, and has gone blind on each occasion when pregnant.

The contribution the centre has made toward human happiness is proved by testimonials from grateful patients:

Mrs. K. — "I am pleased to inform you that everything has been quite satisfactory up to the present, and I have been using the appliance since May 1922. I am more than satisfied myself, and am very thankful that I ever visited the Centre."

Mrs. G. — "I have been using the appliance 2 years and 3 months and find it no trouble. It has been successful up to now, and I feel very grateful and will tell all I can about it."

Mrs. F. — "I have been using appliance about 2½ years. It has been successful. I have told several people of the Centre and it seems to be generally known in this neighbourhood."

Of the aims and hopes that may be based upon Birth Control the report has this to say:

"We regard the Walworth Centre and the newly-opened North Kensington Centre as only the beginnings of a movement that ought to be extended not only throughout the United Kingdom but throughout the world. Everywhere uncontrolled procreation creates poverty and disease and sorrow. Simultaneously by increasing the pressure of population upon the local means of subsistence it provokes nations to wars of aggression. "Birth Control helps to bring peace to the world, strength to the nation and happiness to the family."

Book Reviews

Annual Report of the Walworth Women's Welfare Centre, 1924
Labor Department Column

INTEREST in the work of the Labor Department is spreading rapidly. Every day brings expressions of encouragement from friends and representatives of labor. From Leroy B. Bowman, Instructor in the Social Science Department of Columbia University and a member of Local Number 5 of the United Federation of Teachers, comes the following letter:

"I was interested to get your circular letter regarding the proposal of the American Birth Control League to start a national campaign to reach the workers through trade unions. I am very cordially in sympathy with your plan and hope that it materializes even beyond your expectations.

"I feel that Birth Control is the one greatest problem in America today. I feel that it underlies practically all our social difficulties, that wages, housing, poverty, delinquency, and a great deal of misery find their roots in ignorance and prejudiced attitudes toward this very essential and common-sense matter. I am very eager to do anything in my power to see that the reason of the thing is given a chance to work its own influence. I think you people are doing a great deal in this direction and need all the moral support and active assistance that can be given to you.

"I am willing to go on record very strongly for Birth Control. If my deep and lasting sympathy for labor can make my sentiments on Birth Control any more effective, it would make me very happy. I am opposed to any more charity than is absolutely essential. It seems to me that labor can do more to solve its own problems and to have control over its own destiny by supplementing its economic program by this measure of social device. I think we should be very careful not to appear as any wise partisan or aggressive in this matter. Your League has taken a stand that to make truths known is wholesome. The logic of the situation not only will carry eventually but it will also reduce or eliminate any suspicion of opposition to any religious or sentimental standards or ideals.

Another letter comes from the president of one of the largest Federations of Labor. It reads: "I have read all of the little leaflets put out by your department and I tell you truly that in my humble opinion all four are very good. Of course there must be a best one and that is "Birth Control Unnatural." Dish up your messages in small doses and they will not only be read but understood.

A well-known teacher of workers' classes writes: "I think the campaign for Birth Control among the Trade Unions a master stroke. Whoever thought of that hit the nail squarely on the head."

Our Correspondents

THE MATERNITY WARD

Editor of the Birth Control Review California

Last week I visited a maternity hospital in Oakland, bringing flowers for a friend who recently came to our midst. This was her second baby, the first being eleven months old. Turning to her neighbor, I asked and was told that she also had her second child, her first being eight years of age. She added, "I did not want this baby, and I do not know how I can find the money to pay the doctor bill." This remark caused the first mother to speak up, and she said, "The doctor told me I must have no more babies, as I almost died in the delivery room." I explained that unfortunately the doctor was prevented by law from giving them such simple information as would save them from further babies, if they were economically or physically unable to bear them.

Sunday morning, the husband of the first woman came to my Study asking for private information, which I explained was not lawful for me to impart. To-day I had a phone call from the second mother, saying that she was now at home, and pleading with me to tell her how to care for herself so as to have no additional family.

I have just come from the hospital where a beautiful eighteen-year-old wife was saved from death by heroic treatment. Married five months ago to a fine young man, she found she was pregnant, when he had just accepted a wonderful position which compelled him to travel, and his wife went along. She felt that a baby just now would brighten his wonderful opportunity, and being ignorant, she accepted advice from a woman on the train, and almost passed out.

Why cannot medical men be permitted to speak the sensible word beforehand and be within the law?

(RABBI) RUDOLPH COFFER

BOOKS RECEIVED

From E. P. Dutton, N Y. TANTALUS, by F. C. S. SCHILLER. $1.00


From Payot, Paris LA PRODUCTION ET LA POPULATION, by Dr. Robert Lascaux. 9 francs


From Williams and Norgate, London THE CHRISTIAN CASE FOR BIRTH CONTROL, by the Reverend C. P. S. ROSE 6d.
New York

At the headquarters of the American Birth Control League the whole staff is concentrating on preparations for the Sixth International Birth Control Conference. Mrs. Sanger has, however, had some important lectures during the past month, notably those at Chicago and Des Moines, and Miss Kennedy has spoken before the Health Committee of the Woman's City Club.

On February 10th the Birth Control Bill was introduced into the New York Legislature.

Dr. Garth spoke on Birth Control before a group of clergymen at a luncheon on February 9th, and Dr. Potter of the West End Presbyterian Church preached a Birth Control sermon when he took Wiggam's "Frucht of the Family Tree" as his subject on Sunday, January 24th. From an unexpected quarter comes religious support in Dr. N. J. Springler of Brooklyn, passages from whose sermon on Birth Control are quoted on another page.

On January 10th Mrs. Juliet Rublee entertained Fiu Thit Jensen, leader of Birth Control work in Denmark, at luncheon.

Dr. Hannah M. Stone has been appointed Assistant Medical Director of the Clinical Research Department of the American Birth Control League. Dr. Stone takes the place of Dr. Dorothy Bocker.

Each month we tell of some of the distinguished visitors who have visited headquarters, this month we will give space instead to another sort. To the Clinical Research Department there was referred a cardiac case. Husband and wife came together, because between them they could manage to state their case. Both were morons and the wife was of so low a type that she could say little besides "yes" and "no." The husband was slightly more voluble but scarcely more intelligent. He could only say over and over again, "Too many children, too many children!" They are young and already have five children and the department would have been forced to let them go on having more if it had not been that the mother was so "fortunate" as to have a serious heart affection.

Among the month's meetings addressed by Elsie.abeth Grew, organizer of the Labor Department, were the International Board of the Annual Lithographers of America representing the workers of twelve states. On the evening of January 18th she lectured on "Birth Control, the Workers' Need," at the Labor Temple, New York. The Reverend Edmund Chafllee presided and a large and representative audience contributed to the collection and unanimously passed a resolution endorsing the objects of the American Birth Control League.

Early in February Mrs. Grew spent several days working in New Jersey and Pennsylvania, where, thanks to the cooperation of Miss Gladys Boone, she made many important contacts with representatives and friends of labor, making the League known to unions and to individuals and adding many unionists to its membership.

On February 6th she addressed a meeting of delegates of the Philadelphia Women's Trade Union League and a few days later was given the floor for a few minutes talk before the Central Labor Union of Philadelphia. At the latter meeting a hundred delegates were present, representing many thousand trade unionists. The educational value of her speech was entirely out of proportion to its length, for it was followed by a long and instructive discussion of Birth Control among the delegates.

Among other Philadelphians who expressed to Mrs. Grew a keen interest in Birth Control were Miss Harrison and Dr. Sophie Rabinoff, heads of the Community Health Center and the Union Health Center of Philadelphia.

A peculiarly important address was that given before 600 men, members of Local No. 848 of the Painters Union on the "Special Need for Birth Control" in this trade, where lead poisoning of the father often causes abortion or a high infant mortality among the offspring.

In February the Syracuse Chapter of the American Birth Control League held its annual meeting.

California

Among the important results of Dr. Cooper's trip west were the contacts he made with physicians and public health bodies. His first address in San Francisco was before the Public Health Section of the California Civic Club, of which Dr. Adelaide Brown is chairman. On the evening of the same day, January 15th, he spoke before a group of 25 Oakland physicians. Other medical groups with whom Dr. Cooper held conferences on contraceptive methods were 50 doctors in the Los Angeles County Medical Society, section on Obstetrics and Gynaecology, and the same number in the Neurological and Psychiatric section. Sixty-five women physicians in the Women's Medical Club of Los Angeles County entertained him at dinner and another select group of physicians took lunch with him, as guests of Dr. Brainerd, president of the South California Birth Control League. Besides these medical contacts, Dr. Cooper spoke before a group of 18 members of the faculty of the University of California, brought together by Professor Holmes.
Of his California experience as a whole, he says "The meetings were select and important and I feel that much was accomplished. The local workers were encouraged, friends were made and the movement has gone forward. The interest shown was splendid." Of the luncheon given by the Oakland League of Women Voters Mrs H G Hill, president of the Alameda County Birth Control League, writes "The ballroom of the Hotel Oakland during the luncheon was crowded to its capacity and the program lasted till 4 P M. Those present showed great interest in the subject and many questions were asked and satisfactorily answered by Dr Cooper"

Connecticut

The Connecticut Birth Control Bill (H B 41) was introduced into the Legislature on January 30th. It is expected that there will be a hearing before the Joint Judiciary Committee of House and Senate towards the latter part of February.

A public meeting in support of the measure was held at South Manchester, January 29th. Mr H F Fletcher took the chair, and spoke on the economic aspects of Birth Control. Mrs Anne G Forratt was the principal speaker.

Illinois

On January 30th Mrs Sanger was in Chicago where she spoke to an audience of students of Chicago University, at a meeting held under the auspices of the Liberal Club of the University.

On February 2nd the Appellate Court in effect prohibited establishment of a Birth Control clinic in Chicago. The court reversed the order of Circuit Judge H M Fisher, directing the health commissioner to issue a license to the proposed clinic.

Iowa

Tuesday, January 27th, was Birth Control Day at Des Moines. After a luncheon as guest of the Health Committee of the Des Moines Federation of Women's Clubs, Mrs Sanger lectured at the Club Auditorium to an audience of 700 women, the largest attendance on record, on "Regulation of the Unfit." The Iowa Birth Control League, of which Mrs Edward A Lingenfelter is president, entertained her at dinner, where she spoke to a group which included the mayor's wife and several women physicians. In the evening she spoke for the third time that day, at a meeting under the auspices of the Iowa League and presided over by the head of the city charities, to an audience of a thousand men and women, among whom were many state legislators. Into this crowded and useful day was crowded also, a reception by the wife of the governor.

New Jersey

The most important recent event is the introduction of the Birth Control Bill into the State Assembly by Assemblyman E F Pine of Camden County on January 26th. The bill is sponsored by the Camden Birth Control League and is endorsed by the Essex County Woman's Republican Organization. It was referred to the Committee on Miscellaneous Business. A strong editorial endorsement by the Camden Daily Courier is published on another page. A hearing was held February 23rd.

On February 3rd Mr Everett R Meves, organizer of the Camden League, spoke before the Executive Committee of Local 880 of the Amalgamated Street and Electric Railway Workers of Camden, and on February 5th was held the regularly monthly meeting of the Camden League, at which Elizabth Grew was the chief speaker. Noon shop meetings have been addressed by Mr Meves at the Concrete Specialty Company, the Castle Kid Company and the Standard Tank and Seat Company. On February 24th he spoke before the Camden Philomathean Club.

On Sunday, February 8th, Mrs Sanger lectured before an intelligent and sympathetic audience at the Unity Church of Summit. Though the local paper had refused to advertise the meeting the hall was filled. At the end of the lecture the chairman spoke with the highest appreciation of the constructive program offered by Birth Control.

On February 10th Dr Cooper addressed the Camden County Medical Society on "Contraception."

A permanent organization has been completed at Riverside, with Mrs Laura A Winkelspecht as president, Mrs Freda Leconey, vice-president, and Mrs Clara Carruthers, secretary-treasurer. Mrs Winkelspecht has distributed Birth Control literature among the colored people of Riverside and hopes to arrange a lecture at the colored church. "One colored woman," says Mrs Winkelspecht, "told me that she had ten living children besides those that were dead. She said she had a relative who had twenty-one children. The woman who has the ten children has two of her grandchildren to take care of because their mother has spells of insanity."
National

During the week of January 18-24 Mrs F Robertson Jones, Member of the Board of Directors of the American Birth Control League, attended the Conference on Cause and Cure of War, held at Washington, D C, under the chairmanship of Mrs Carrie Chapman Catt. Besides her speech at the Open Forum of the conference, which is to be found on our editorial page, General John O'Reilly and Professor Warren Thompson dwelt upon overpopulation as a cause of war and Birth Control as the cure.

Pennsylvania

On January 18th Everett R Meves, organizer of the Camden Birth Control League, took part in a discussion on "Eugenics and Birth Control" under the auspices of the Friendship Liberal League of Philadelphia. His opponent in the debate was Dr John Purdy, of whom Mr Meves writes "The doctor does not think much of Birth Control, but after the discussion was over the audience were pretty unanimous in thinking that he did not know very much about Birth Control."

From February 4th to February 10th Elisabeth Grew was in Philadelphia on business of the Labor Department of the American Birth Control League.

Utah

Dr Cooper's address the last week in January at the First Unitarian Church of Salt Lake City, reported in our last issue, was followed by a meeting with fifteen representative physicians of that city. Later in the same day, a meeting was called at the Hotel Utah where steps were taken toward organizing a local chapter of the American Birth Control League.

At Ogden Dr Cooper lectured at the first Congregational Church, of which the Reverend C C Wilson is pastor. After the lecture Dr Cooper assisted in the organization of a local league, of which Mrs Hunter was made temporary secretary.

Canada

The Canadian Branch of the Birth Control League is looking forward to a year of real progress. Owing to the fact that Mrs Sanger had to temporarily abandon the idea of a visit to Western Canada, the Vancouver (B C) League has not arranged for a Canadian Conference in 1924, but hopes that this may be accomplished in 1925. In the meantime, interest is being maintained in public propaganda by means of lectures and articles in local journals. Mrs Rose Henderson, well-known throughout Canada as a lecturer and social worker, recently delivered important addresses on "The Social Interpretation of the Modern Drama," in which she strongly emphasized the need for Birth Control and upheld the right of the child to be well-born. Mr A M. Stephen is at present contributing a series of articles covering every phase of Birth Control to the British Columbia Federationist.

England

So interesting is the news and the newspaper comment on the spread of Birth Control from end to end of England that there is a temptation to give England more space than we can afford. From all classes comes support and every Roman Catholic attack seems to raise a new champion. Earl Russell has recently written in approval in John Bull and Judge Cluer in the Shoreditch Court (London), is quoted as saying in relation to a case brought before him that a family of three was reasonable, but a family of six was "past all reason." This is the same judge who some time ago lectured a recalcitrant rent-payer with fourteen children for having a family so large he could not afford to house them. That a judge takes family limitation into consideration in deciding a case is a sure sign that Birth Control is rapidly becoming part of the national mores.

The birth rate has come in for much discussion of late. Most important are the hearings before the Birth Rate Commission of the national Council on Public Morals before which Lord Dawson testified not long ago. The hearings ended in December and the last people to give evidence were Bertrand Russell, Harold Cox and Sir William Beveridge. Sir William Beveridge stated that the present dysgenetic tendency could only be checked by Birth Control, probably in combination with a family allowance such, perhaps, as that suggested by Eleanor Rathbone in her book "The Disinherited Family." Bertrand Russell, speaking for The Worker's Birth Control Group, demanded that child-bearing be made in the wage-earning class, "as it already was among the well-to-do, a deliberate choice rather than an accident, and even as it sometimes was, a calamity." His group demands that contraceptive information be part of the antenatal care given poor mothers at welfare centres.

Some indication of the progress of Birth Control in medical circles is given by the fact that Norman Haire, formerly physician in charge of the work at Walworth Centre, has been asked by the Royal Institute of Public Health to speak on the relation of Birth Control to Child Welfare at its congress to be held at Brighton in May.
FRANCE

IF the French would scan more closely their mortality figures and take health measures to cut these down they would not need to worry about their birth statistics. At a Conference on Common Welfare held under the auspices of the British Ministry of Health, figures were presented showing that in France during 1923 there were more births than deaths, but there were 73,000 infant deaths (96 per 1,000), as against England’s 52,000 (69 per 1,000).

COMING EVENTS

THE Preliminary Program of the Sixth International Neo-Malthusian and Birth Control Conference is given in another place in this issue. The corrected, detailed, program will not be ready for a few weeks, but it is expected that the arrangement of the sessions will remain substantially as in the present program.

On April 1st the Eastern Pennsylvania Birth Control League will hold a public meeting at the Bellevue Stratford, Philadelphia, at which the speakers will be foreign and American delegates from the Sixth International.

REV N J SPRINGER SAYS BIRTH CONTROL CAN BRING WAR TO AN END

“People ought to prepare for marriage and parenthood precisely as they prepare for business, art, letters, music or science,” said the Rev. Nelson Junius Springer in the last of a series of five weekly sermons on “Modern Marriage,” at the Fourth Unitarian Church, Brooklyn.

“Only the preparation for marriage and parenthood ought to be more sedulous Business, art, letters, music and science—everything—ought to be bent to the fulfillment of the dream of love.

“There are a great many things that Birth Control can end, not the least important of which is war. There are a great many other things that Birth Control could begin, beautiful things, such as families assured in advance of beautiful, healthy, virtuous, intelligent children. Science has taken over the functions of the fortune-teller and the palmist, with this difference. It exercises these functions with the precision and intelligence of science. Science can tell you the kind of person you ought to marry.

“Intelligent Birth Control begins with the selection of a husband or wife. Healthy children are not born from sickly parents. Intelligent children are not born from stupid parents. Beautiful children are not born from ugly parents. Virtuous children are not born from vicious parents.”—New York Times

Press Clippings

HYPOCRISY ON THE STATUTE BOOKS

THE birth control question, now up at Trenton, is a simple matter of making laws fit life. All the talk about birth control as a means of preventing war and so on has nothing to do with it.

On June 14, 1898, an act entitled “An act for the punishment of crimes” was passed. In Section 53 it declared that any person who WITHOUT JUST CAUSE should commit certain acts would be guilty of a misdemeanor.

One of these acts was sale or circulation of contraceptive devices and giving IN ANY MANNER information “how or where any of the same may be had or seen, bought or sold.”

The present proposal of the birth control advocates is to amend the act by adding this paragraph: “The contraceptive treatment of married persons by duly practising physicians, or upon their written prescription, shall be deemed a just cause hereunder.”

The effect of this amendment will be to permit doctors to give birth control information TO MARRIED PERSONS.

Doctors, the best of them, give this information already, in thousands of cases, to their regular patients. It so happens that only well-to-do and wealthy people go regularly to a family physician. As a result the poor and poverty-stricken families are seldom, if ever given birth control information.

The law as it now exists, is thus really class legislation. It is only partially effective. And it is absolutely unenforceable.—Camden Daily Courier

THE CATHOLIC ON THE SIDEWALKS OF NEW YORK

(Continued from page 81)

after missing him on Broadway, he bore down on me some months later while selling near Brooklyn Bridge. To my utter astonishment he told me what a fine thing Birth Control was for the poor, and how it would help to clear up the slums and stop the breeding of crooks. Imagine my joy and gratitude at this transformation of “Saul” to “Paul”.

Last Spring a lady told me she had just returned from Europe and the poverty she had seen there, especially in Italy, had converted her to Birth Control. “And I’m a Catholic,” she said, “and here is my rosary, blessed by the Pope.” Another Catholic lady who had only two children, and to whom I repeated my conversation with a priest who had bought the Review the previous week said, “I am glad they are waking up at last.” Another who had three children told me her father confessor had asked her why she did not have more and what she
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PRINTERS TO THE BIRTH CONTROL REVIEW

BIRTH CONTROL IN ITS RELATION TO TUBERCULOSIS

(Continued from page 83)

usually know where to get it, but that the poor living in the already overcrowded tenement houses and who have already a sufficient number of children, who need this information most, are denied the knowledge.

I have already referred to the marvelous reduction of tuberculosis thanks to popular education and improved sanitation, and to the frequent cures, but the tuberculous problem will never be solved,

did to prevent them, and had also spoken to her husband, who told him his wife was not strong enough to bear more.

These were not the only father confessors who wanted to know. A priest passed me near Grand Central and a few minutes later returned with his overcoat collar turned up by way of disguise and bought the REVIEW.

An elderly working man of Irish stock told me he had no use for people who had children with the idea of being kept by them in their old age. He had three boys, all put through Fordham. They were doing well for themselves, he had done his duty by them, thank God, but they had each yet to give him a dime.

One evening last Summer as I was going home, a young woman stopped me and asked, “Are you selling the “Catholic News?” I turned my papers towards her, gave her one and explained the meaning of Birth Control. When she left me I saw her join two older women, I hope the seed fell on good ground.

Two nuns at Broadway and 34th Street, looking round helplessly, asked me of all the people there—me, holding up the BIRTH CONTROL REVIEW—to direct them. Another nun, a sweet-faced old lady looking like a saint just stepped from her niche, gave me a kindly encouraging smile. Perhaps these nuns did not recognize what I was selling. I prefer to think they did. Perhaps if they did they are praying for my soul.

Many people are concerned as to where I’ll go to when I die and what will I do when I have to face God. One woman told me I was the instrument of the devil, but she was sorry for me and would remember me in her prayers. Bless her! Some pray to save my soul from what I am doing and others pray to help me in it. On the whole encouragement stands out in my mind more vividly than abuse.

Truth is dispelling “the error of misinformation and lack of proper knowledge”, though its progress against malicious prejudice may be slow, it is sure.
it will be with us until the end of time, unless we can add to our anti-tuberculosis measures, the education of the father and mother, among the poor as well as among the rich, in the duties of parenthood. This means that they should only decide to have a child when they believe that they can raise it properly, give it ample care and food, watch over it tenderly and educate it and raise it to be what every child should be destined to be—happy, healthy, and strong in mind, body, and soul.

In conclusion let me add to the opinion expressed by my medical teacher and friend, the late Hermann M. Biggs, that of a distinguished jurist, the Hon. Judge William H. Wadham, formerly of the Court of General Sessions, who says "In order to save the state from the burden of large families where there is no possibility of their being supported and where the neglect which follows often results in their becoming state charges not only because they are mentally, but often physically unfit to bear the burden of life, I am of the opinion that there should be some proper birth regulation after a certain number of children have been born, and that therefore, there should also be some modification of the laws with respect to the giving of information upon this subject. I think the sanitary, medical, social, economic, and moral status of the population would be improved by proper and more general information upon this subject."

The combat of tuberculosis as a disease of the masses is closely allied to the Birth Control problem. The eradication of the disease will be impossible without the realization by the medical profession and the social workers that it is their duty to teach the laity that a woman actively ill with tuberculosis should not be subjected to the burden of child-bearing before complete recovery. Where there are laws prohibiting such instructions, they should be modified accordingly.

VENEREAL DISEASES AND POSTERITY

(Continued from page 74)

Month evidence of syphilitic infection of the fetus are always lacking. Inasmuch as later fetal syphilis consists of an overwhelming spirochetal sepsis, he concludes that infection of the fetus must occur in the latter half of pregnancy, and that it must enter from the maternal circulation. That this mode of infection of the fetus is possible is shown by the animal experiments of Uhlenhut and Mulzer. They demonstrated that, in pregnant rabbits, the placenta is easily traversed by virulent treponemes inoculated intravenously, and that the organisms may be ready recovered from the fetal organs or the fetal portion of the placenta."
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If the infection is acquired within the first three months after conception the child is almost certain to die and the body be expelled. If the child acquires syphilis from the third to the seventh month, in pregnancy, it may survive for a time but is likely to be born prematurely, and very probably, dead. If the infection takes place after the seventh month of intrauterine life it will probably be born alive, although it may die later of the disease.

If the child does not die outright, or within a year or two after birth, there is a very high resistance set up within the body which, if reinforced by proper treatment may permit him to develop into a practically normal man. There enters into the control of syphilis as a contagious disease the same problem of personal, professional and community responsibility which appears in gonorrhea.

In the ignorant, the transmission goes on unawares, in indifferent ones the risk is ignored, in the vicious ones exposure is premeditated and to those who have been ill advised and treated it is a tragedy.

Syphilis and gonorrhea are infectious diseases. They are controllable. Medically there is every facility for diagnosis and treatment but not until we secure the tremendous force of public knowledge of the real menace of these plagues and of the manner of their dissemination, will they become controlled.

BIRTH CONTROL AS A PREVENTION OF ABORTION

(Continued from page 71)

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