Family Rehabilitation through Birth Control

Three Legislative Hearings
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What Have We Learned About Birth Control?

We have shown that Birth Control is the conscious regulation of the birth rate. The most practical method of Birth Control is the use of harmless mechanical and chemical devices for the prevention of conception. These devices, called contraceptives, are simple and effective and are the means of preventing the great and growing evil of abortion. On account of the forces of ignorance, indifference, prejudice and superstition, the spread of knowledge concerning the use of contraceptive methods of Birth Control is forbidden by law.

Why is Birth Control Necessary?

There are many reasons. We have already given the following:

I  The Health of Mother and Child
II  The Happiness of Married Life
III  The Relief of Overpopulation

This month we give

Reason IV — THE IMPROVEMENT OF THE RACE

In some cases individuals suffering from venereal disease can only give birth to defective children. The use of Birth Control in all cases of venereal disease would eliminate many of the defectives who are a burden to themselves and society.

Certain classes of criminals and degenerates are likely to produce criminal and degenerate children. Not only is the tendency to crime and degeneracy in some cases inherited, but in all cases the environment into which the children of criminal and degenerate parents are born is one in which there is practically no chance for them.

Feeblemindedness, epilepsy, the insanities and alcoholic predispositions, as well as predispositions to some diseases not of the mind, are often transmitted from parent to child. Without the use of Birth Control there is nothing to prevent persons with these diseases and predispositions to degeneracy or ill health from procreating indefinitely.

Birth Control is the practical and effective agent for improving the race.
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BIRTH CONTROL REVIEW

PUBLISHED BY

THE AMERICAN BIRTH CONTROL LEAGUE, Inc

104 FIFTH AVENUE

NEW YORK CITY

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MARY SUMNER BOYD, Managing Editor

The BIRTH CONTROL REVIEW is published on the first of the month

Single Copies—Twenty Cents Two Dollars per Year

Canada and Foreign $2.25

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

Subscribers are urged to send notice of change of address at least three weeks before it takes effect
EDITORIAL

THIS number of the Birth Control Review is dedicated to Social Workers and to those who have the welfare of the working class at heart. In it we publish the study of results in 48 cases of the pioneer experiment with Birth Control by a social agency, together with Harry L Lurie’s report on three years experience of Birth Control in family case work. The editorial from the Jewish Social Service Quarterly reprinted in our pages, we believe to be one of the landmarks in the progress of our movement, in the light it gives on the spread of interest and belief in Birth Control among social workers. On the day, which is not now far distant, when we have on our side at legislative hearings the weight of labor leaders and others who work among the poor, the sick and the unfit, we shall have no trouble in passing our Birth Control bill through State Legislatures.

IN THE Boston Medical Journal, Robert L DeNormandie last December called attention to the backwardness of medicine in respect to the child-bearing function. His article is on hemorrhage in childbirth, puerperal septicemia, puerperal albuminuria and convulsions. He appeals to medical men to study these preventable accompaniments of childbirth “so that we soon can say that the purely preventable deaths from childbirth are eliminated and that good obstetrical work prevails everywhere.” Dr DeNormandie is not the only gynaecologist to recognize that obstetrics is backward. A few years ago Dr Whitridge Williams, in his address as president of a great national organization of gynaecologists, called it the most backward of the medical sciences. “Most traditional” was the expression that he used, an expression which is suggestive of the slowness with which new ideas have penetrated this branch of medicine. It was only a few years ago that gynaecologists began to recognize, for example, that the pain accompanying childbirth was a detriment and not a necessary and desirable physiological accompaniment. They do not yet, indeed, fully realize this, nor do they realize that there can be no successful attack made on the preventable causes of death in childbirth until a woman is helped to space her children according to her health and strength. Birth Control should be as essential a part of the care given by obstetricians or gynaecologists, as prenatal and postnatal care now are. Without Birth Control we shall prolong the anomalous situation now existing of a body of highly trained American gynaecologists and obstetricians who are unable to lift this country from the position it has held at the bottom of the list in respect to mortality and morbidity in childbirth.

THE subject of Birth Control is so vast in its implications and so many sided in its relations to human welfare, that it is almost impossible for any one student of it to give equal value to all its aspects. Among its advocates some regard as of first importance the necessity of curbing population increase, in order that the nations may live together in amity. They see the fierce competition between peoples for raw materials, food, markets, and, most of all, for space. They know that war threatens whenever a virile race tends to overflow its borders and to demand “a place in the sun” for its teeming population. Birth Control to ensure international peace is surely, to these advocates, of supremest importance. Others urge Birth Control for eugenic
reasons to secure a better balance within the nation—to diminish the flood of the unfit and so to enable the fit to keep pace. Others again are aghast at the increasing burden of taxation for the maintenance of the non-producers, and demand Birth Control for the sake of the health and welfare of the community. They see no other solution for the problems of housing, sanitation and control of infectious diseases, for the new social conscience refuses to allow Nature to solve her own problem by killing off the weaklings, and, reversing the old order, the unfit survives at the expense of the fit.

OTHERS again are concerned over the happiness of the family. They know that the woman who bears many children, unless she is possessed of great and unusual physical health and strength, and also of an ample income, cannot keep her health, cannot endow her children with full vitality and cannot care for them with the individual concern that children need. They know that men's wages are not based on the needs of a family of more than two or three children, and that the fathers of large families are either unduly burdened or become reckless and neglectful. This enumeration takes no account of the psychological and moral aspects of the question. It does not include the contribution made to it by Havelock Ellis, nor that other great contribution which is to be found in Mrs. Sanger's new book, "Happiness in Marriage." These advocates of Birth Control are concerned with aspects which may appear more intangible, but which mean the regeneration of the human race. They advocate Birth Control because, without it, it would be impossible for men and women to lift sex from the mire in which it has been dragged, and make of it the high and holy thing which these seers know it to be.

SINCE we last addressed our readers, three State Legislatures have held hearings on Birth Control bills. In each of the three States, the bills were moderate and reasonable, and the case was pleaded with wisdom, restraint, dignity and common sense. Nevertheless in all three States the bills have failed of passage. What is the lesson for us from this? It is clear that what is needed is education and more education and still more education.

In many cases the Legislators come from more or less remote places where as yet people have hardly heard of Birth Control, where the old inhibitions still hold sway and both men and women scarcely dare to whisper the words. Before we can hope to secure the passage of the bills, we must carry the message of Birth Control into the constituency of every legislator. This is too great a task for the American Birth Control League to accomplish, unless it has the aid of its members and friends all over the country. In Connecticut, the Connecticut Branch of the American Birth Control League is addressing a letter to all its members, scattered all over the State, asking them to secure, before the next Legislature is elected, that there shall be at least one talk on Birth Control in their town. They are to find the audience, the League will provide the speaker. They can use their membership in women's clubs, and church organizations, or gather independent groups.

THIS is an excellent plan. While our friends and all the supporters of Birth Control are still smarting under the defeat, let us gather our forces together for victory in the near future. What is needed is not so much to convert people to a belief in Birth Control. They convert themselves, as soon as they really understand the message of Birth Control, where the old unhappy inhibitions, let us not suppose that all other people have done the same. Far from it. It is truly astonishing to find people of culture and education, people with a wide social view-point and much zeal in the service of humanity, who still feel it impossible to say the words Birth Control without a feeling of discomfort. Nevertheless, the situation is changing for the better every day, and is immensely changed since Margaret Sanger began her good work. Every newspaper, magazine and book, every teacher, preacher and lecturer that uses the words—whether to support or to oppose—helps to break down the barrier. And the barrier gone, the victory will be ours.
An Experiment in Constructive Family Help

**Part II  The Cases and the Results**

The following figures are based on the work with the 48 families in which Birth Control advice was secured. In all of them there were five definite reasons for referring: there was urgent necessity in the opinion of the organization, both parents were anxious to limit their families; the contact of the organization with them was such that we might hope to control the situation long enough to establish the habits of care necessary, the husband though not wishing more children, could not be relied upon to take protective measures, and finally, help from the family physician was impracticable.

**Size and Health of the Families**

One family had no children, one had 1, 4 had 2, 7 had 3, 10 had 4, 9 had 5, 6 had 6, 3 had 7, 4 had 8, 2 had 9 and one had 10. The average family for the 48 was 4.8. In 39 out of 48 families there was an income definitely below the minimum relief budget, all the time or for long periods. In eight instances, the husband was tubercular, and in one, the wife. In others, members of the family had been under observation for suspected tuberculosis, had once been so diagnosed, or were closed glandular cases.

In four cases the husband was insane but either not committable or else was frequently allowed to be at home. In one other the husband though still undiagnosed had a very apparent state of melancholy. In another the diagnosis was subnormality and psychopathic personality. In another the father had suffered from manic depressive insanity, and the mother, an epileptic, had a heritage of insanity. Consequently 7 families had a taint of mental disease.

In the case of eleven families, one or both parents had either been diagnosed from subnormal down to high grade imbecile, or else, being still undiagnosed by a mental clinic, were so obviously below normal that physicians had so graded them. In 4 instances, the mother alone was defective in intelligence, in 2 the father and in 5 both parents.

A number of the mothers were not as strong and physically fit as they should have been and the same might be said of some of the fathers, but the complete data on these points are lacking.

Of the 44 women taken to the special physician, 19 stated they had had from one to twelve abortions.

The condition of the children was frequently an argument against a larger family. In seven families there were from one to five children variously retarded mentally. In one instance of three children, one was a cripple and the other two were much of the time in the hospital with congenital bladder trouble. Others suffered from malnutrition, minor chronic pathological conditions, were physically neglected or beyond the control of the parents.

**Other Reasons for Limitation**

It is not possible to state in just how many of these homes there was unusual discord caused by the over-large family, or difficulties between husband and wife chiefly due to the woman's fear of having more children, but these two factors were present in varying degree in much the larger number of these cases. In some they constituted a very serious problem in the home life and were one factor in our decision to refer the woman.

Of the 48 cases referred, there were 12 in which the physical or mental condition of parents or children played a subordinate part as reason for limiting the family. These might be said to have been referred chiefly for financial reasons and as this basis appears to many to be much less sound than those involving hereditary factors, a detailed statement will be made of these cases. In this group were 3 families of 2 children, 3 with 4, 3 with 5.

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*Editor, Birth Control Review*

It is nearly two years ago that I first had an opportunity to read a report by the executive director of the organization whose experiment is the subject of this article, of his experience with Birth Control in the case of 48 families in his care. That report was an authentic, and I am sure, an accurate description of his organization's experience. I had not known of the work until, in the course of conversation with him on the subject of Birth Control, he casually referred to it. You can be absolutely assured of the authenticity of any statement made by him.

He is at present the director of an educational institution for social service, and he is one of the ablest and most reliable social workers in this country.

(Signed) **Morris D Waldman,**

Managing Director, United Hebrew Charities of Detroit
and 3 with 6. In one of the families of two children, the husband frequently deserted and the wife was anxious to be able to support the two children independently in his absences. In another the husband was so much older than the wife that there was constant discord, and furthermore she was afraid he would not be able in future to support more children. In the third case the husband had limited capacity to earn, the wife was able but quite uneducated and it was the wish of both that she should study and that the family should live according to good standards.

Of the families of four children, one father was a periodic drunkard and the mother generally ran down in consequence. In another instance, the father of the four children was only 24 years old and his wife was 23. The wife was an inefficient girl whom he had been forced to marry when she was 17. The husband earned little and he, as well as other members of his family, had court records. In the third case, the husband had temporary illness and business difficulties, at which times the wife worked. She asked this instruction, because she wanted to give her four children advantages she could not expect to give to more.

In the five children group, in one family the mother was only 26 and the father, who probably had reached his maximum earning capacity was barely able to support these in the most simple way. Another case was practically the same except that the mother was 40. In the third the chief reason was that the mother of five had induced twelve, or perhaps more, abortions. In one of the families of six children, the father was simply not very clever or skilled and was slightly predisposed to tuberculosis, and another, the father drank and deserted in addition, the woman had induced a number of abortions. In the third the strongest reason besides the economic was the serious difficulty between the man and wife because of her refusal to live with him, if she must have more children. In only two of all this group of cases was it probable that the family, by means of this instruction, would rise to rather comfortable living. In the other instances it seemed as though it could only be hoped that they would hold their own or become less dependent financially than they otherwise would.

**Results of One Year's Work**

Of the 44 women taken to the special physician, 34 had at the time of this study made the effort to follow instructions and were not pregnant. However, 9 of the 34 had forced menstrual periods that were from a few days to two weeks over-due. Of the other ten women, two were found to be pregnant when referred, three became so later in spite of the precautions, one refused the care, one was too dull to learn to care for herself, and three after a time, moved away without leaving addresses. They had successfully cared for themselves so long as the organization was in touch with them. In regard to the pregnancies and forced menstruations, we are not certain enough of the information given by patients to know in how many instances, if any, it happened in spite of the full following of instructions. We know that some cases were due to carelessness.

Of the four women who received only the dispensary instructions, two said their husbands agreed to prevent conception, but both forced over-due menstruation. Another would not say definitely, but implied that her husband did not cooperate because of the expense and as she was nursing a baby the chance of pregnancy may possibly have been lessened. The fourth woman had no mishap. Her husband bought his equipment but complained of the expense. Because of the expense, this method is less likely to be followed faithfully and, as the organization's contact is necessarily closer with the woman, it is unable to educate the husband to perseverance. Therefore, though the results of four cases are not adequate basis for judgment, it feels that it is justified in its opinion that this method is inadequate.
The special physician's detailed reports on local examinations, as a non-professional person interprets them, were 6 patients in good condition, 3 with slight abnormality, and the others showing injury or pathology more or less marked. It is perhaps more significant to note that repair operations were advised in 23 instances, that is in more than half the patients sent to her. Incidental to these examinations the following suggestions were made for further study, and, with the repairs were referred to the dispensary - general physical examination in 19 instances, Wasserman test in 22, eye, ear, nose and throat in 18, teeth in 14, eyes in 6, GC fixation test in 3, urine test in 4, tonsil and adenoid operation in 3, various other specific examinations in 12. For four patients found to be in good condition no recommendations were made.

During the year the physician recommended sterilization in 18 instances in which on account of mental condition or physical formation or injury the chance of failure of contraceptive measures seemed too great to risk in view of existing conditions. Three of these 18 patients have, since the recommendation, forced menstrual periods and one is now pregnant. The dispensary has confirmed five recommendations for operations to include sterilization. Three operations have been performed. The other two women are not willing at this time. Others are in process of examination at the dispensary.

Conclusions

The process of caring for these 48 women was time consuming and often difficult, but since this practical experience such care seems essential to our case work. Without it, these families, in spite of everything else we could do, would suffer a constant diminution of health and independence. Birth Control proved a strong influence in healing domestic discord, and as cared for by the special physician, patients received in addition to Birth Control a general medical consideration of the greatest value.

The degree of success as to contraception alone might be considered in connection with the three women who became pregnant and the nine who forced menstruation. Twelve such instances out of 44 cases is more than one might have expected, but in this connection it must be remembered that it is not known how frequently menstruation had been forced in the past, also, the nurse finds that one delayed menstruation serves as a warning that contraceptive measures to be successful must be unfailing. One such experience sometimes makes a woman understand the reality of the nurse's demand for "constant vigilance." Most of these women have never been scrupulously exacting about anything so that it must be expected that the educative process will be slow. It must be remembered also, that the homes are unheated at night, lacking in hot water, and the toilet facilities may be in a hallway and shared with another family.

The statement of this work seems incomplete without reference to a real though rather indefinable gain to the women under treatment. With two exceptions they were receiving more or less attention from district case workers as well as nurse, but it is certain that for the majority of them there was a particular gain from their contact with the nurse. She was in a position to give counsel on points that had caused difficulty in marital life and in most instances she educated the patient in matters of personal hygiene to some degree at least. The majority of the women made faithful efforts to follow advice and showed a loyalty and appreciation that indicates that something enabling and constructive was accomplished for them personally.

A Dirge

Rough wind that moanest loud
Grief too sad for song,
Wild wind, when sullen cloud
Knells all the night long,

Sad Storm whose tears are vain,
Bare woods, whose branches stain,
Deep caves and dreary man,
Wail, for the world's wrong

Shelley, (1822)
Birth Control — A Labor Viewpoint

By John P. Troxell

SOME OF MY bourgeois friends have difficulty in grasping the problem involved in making Birth Control a reality for the workers. These friends have the best contraceptive knowledge that is available and they can hardly understand that this knowledge is withheld from the great mass of the people. They assume, accordingly, that lack of foresight and restraint accounts for the large families of the poor, and they take their own better fortune in this respect to be additional evidence of their own general superiority.

It may be that there are working men and women who would do nothing to limit the size of their families, even if they had knowledge of the best contraceptives. I can only say that, if the workers whom I know are a good sample of our working-class population, such an attitude is exceedingly rare. The men and women who do the world’s work have hopes that their children’s lot will be a better one than theirs has been. Not that they want their children to leave the working-class and go into business or a profession (truly enough, many of them have that hope) But they want to give their children a good start in life—a sturdy physique, a good education, and then, a measure of freedom to choose the field which they will enter. They know that their chance of being able to do this will depend very largely on the number of children that they have.

Reaching the Peak of Earnings

At the age of fifty, the average worker’s earning-power has already reached its peak and started to decline. If his children then number only three or four, and range in age from fifteen to twenty-five, this prospect of lower earnings holds no great terrors for him. But if his family numbers six or more, with the youngest still in the early school grades, the worker’s problem of getting a living is more difficult than ever, just at the time when it ought to be getting easier. His large family has taken all his earnings, he has no fund on which to count in case unemployment or sickness confront him, his only security lies in his older children, who will presumably see to it that their parents, if overtaken by misfortune, do not suffer from actual want.

The workers know what is in store for them if their families become too large. Many of them, especially those whose parents were foreign born, know from experience what it means to be one of a family of eight or ten children. Few of them, I think, enter marriage without the desire to keep the number of their children within bounds, and to postpone the arrival of the first-born for several years.

Why Such Large Families?

Why, then, are large families so common among the workers? One family in six, among the anthracite miners of Pennsylvania, contains six or more children. Few miners receive as much as $2,500 a year, which would seem to be a very low figure on which to support so large a family. How reconcile this fact of large families, with my assumption that workers are generally as foresighted as any other class in regard to the menace of a too-numerous brood?

It may be that religious belief plays a part. Certain churchmen are special recipients of messages from the Almighty, so they say, and they let it be known that God considers it a sin for husband and wife to take any measures, other than dissolution of marriage physically, to prevent conception. The fact that families average somewhat larger among the foreign-born (for example, the proportion of families with six or more children is twice as high for foreign-born as for native-born anthracite miners) may indicate that the church’s dicta have some influence. But I suspect that the influence is slight.

There is a belief, perhaps fostered by the church, that all contraceptive methods, again excepting “moral restraint,” threaten the health of the wife. This belief has some currency among the unsophisticated.—I have no way of knowing just how much—and it may account for some of the large families among our working population.

The Main Reason

But the main reason for the relatively large families among workers is, I think, the fact that only the crudest and least satisfactory methods of preventing conception are available to the great majority of them. As these methods show themselves to be failures, and as successive pregnancies occur, both husband and wife become skeptical about the possibility of controlling conception, and they cease to be vigilant.

(Continued on page 125)
An Economic Necessity for the Workers

By James H. Maurer

James H. Maurer, President of the Pennsylvania Federation of Labor, is one of the oldest friends of Birth Control in the labor movement. The extract printed below which is part of an address delivered at the First American Birth Control Conference, has been recently reprinted by the education department of the Pennsylvania Federation of Labor as a leaflet for organized labor in Pennsylvania.

IT IS the poor, unskilled, the poorest of the poor, we find, who have the largest families, those who, through no fault of their own, live from hand-to-mouth in rented shanties or vile, disease-breeding tenements and who receive a wage scarcely big enough to decently support themselves. Yet these are the unfortunates who have the largest families. Tens of thousands of these mothers must, besides bearing the children, do all the house-work, cook, wash, sew, nurse the sick and, perhaps, get a job to help the husband earn a few dollars extra to buy bread for the hungry little mouths at home. Need I ask, "Can such a mother give birth to a vigorous, healthy, normal child?" Ordinarily common sense says, "No." Yet these are the mothers to whom present-day society looks for the perpetuation of the race while the well-to-do, the leisure class, with no cares, with comfortable homes and assured incomes, refuse to bear children, and in many cases for no other reason than that to do so might interfere with their life of play and their social ambitions.

A Contrast

On the other hand, we find a great many of the professional and skilled mechanics raising families within their means. The average among this class of workers are desirous of giving their children every advantage in the struggle for existence possible. Education, plenty of good, wholesome food, and comfortable homes. And this is only possible where the size of the family is kept within the income of the parents and the health of the mother is carefully guarded.

A Federal law prohibits the transportation of any information as to preventing conception, and the laws of eighteen states are still more drastic, forbidding the giving of such information by any means whatever, verbally or even indirectly. In all other states except four, there are laws of one kind or another, prohibiting birth-regulation. But all these laws seem to be "dead letters" in so far as the rich, or the middle class, are concerned. The size of their families proves that these more fortunate members of society can, and do, get the information—most likely, from their family physicians, the proper place to get it. But the poor, without influence or money, who need the information most, cannot get it and, as a result, many resort to abortion, dangerous bungling operations.

Time passes on, more children, not wanted, come, and of course, when here, are just as dear as those that came when wanted. The father, growing older, finds that the pace demanded to hold his job is getting beyond him. The plant has been Taylorized and speed is what counts. The wife is a mere frame of her former self, sickly and disheartened. Collectors everlastinglly demanding payment, eviction is threatened. Another baby dies. With father and husband out of work, or working short time, the stork threatens to come again. "Oh, God," says the mother, "must there be another one? We can't take care of those we do have, and that's why they die, so why send us babies only to die?" And many of these mothers, in sheer desperation, resort to abortion, sometimes without success, with the result that a deformed creature may be ushered into existence.

And if the father different from many others, does not weaken and, like a coward, desert his family to escape the tortures of misery and poverty, and if the mother does not die or go crazy, they may raise to manhood and womanhood, some of their children, only to see their sons, some day perhaps, taken from them to be used for "cannon-fodder" to feed a war inspired by men of small families or no families at all.

There may be some who think that this picture is overdrawn, but I assure you that it is not. There are millions of such families in the United States, and, in some of them the conditions are far worse than those I have described.

Another Labor Opinion

"Multiply and replenish the earth," was a good slogan in its day, because it was for those who owned the earth. Furthermore, there were only six or eight people on earth when this slogan was originated.

Working people should bring very few children into the world. With all kinds of machinery now doing the work of millions of laborers, and more and more labor-saving machinery being installed from time to time, what is to become of people who have to work for a living? Even the employed laborer has little enough to live for.

—From a Labor News Service
Saved by Reason or Ruined by Instinct

By George R. Kirkpatrick

The physically normal woman married at twenty-two and living with her husband a sufficient number of fertile years may become pregnant at least twenty times. Precisely that is what she is ordered to do, if we gullibly assume that blind instinct is the voice and the only "voice of God." If reason is not now a voice of God to guide woman in the swiftly changing conditions of our time, and if impulse or instinct is woman's only guide, to be blindly and slavishly followed as a pious duty, she will welcome the maximum frequency of pregnancy, will welcome each time the natural result, the so-called "God-sent reward," a child.

If knowledge, if reason, if science, if the consequences to herself, the consequences to her children, and the consequences for future mankind,—if all these count for nothing, absolutely nothing, as a guide for woman in the sexual relation, and if primitive, blind animal instinct ought to rule, instead of reason, she will indeed do her biological best. She will, as a bearer of children, go her animal limit.

Now, assuming the decencies of privacy and opportunity to be present, if any normal wife at any time, in any way, to any extent, for any reason avoids conception then she is, to some extent, actually practicing Birth Control, or rather conception control. If such a normal wife with a normal husband does not do her utmost (as the other female animals do their best) to secure pregnancy, then she, to that extent, lets reason rule, she refuses to be an animal only, a dumb, blind beast. So far she refuses to be a snared victim of unregulated instinctive urge, refuses to be tricked and choro-formed with piffl about her "sacred duty." She refuses to be a snared victim of unregulated instinct. She so far declares for the rule of reason and enters into her glorifying function of motherhood when and as her reason guides her instinct.

So far as any American woman thus declares for the rule of reason in the sexual relation, she can and she should hold up her head and proudly challenge all normal married women who do not let reason rule in this relation—challenge them to consider the consequences if no wives in the United States at any time in any way avoided conception during the next one hundred years.

Before we here point out these easily possible consequences, let us agree, first of all, that abortion is abominable, deplorable and inexcusable, and let us also understand that contraception—prevention of conception—can now be easily accomplished by means and methods that are convenient, reliable, inexpensive, wholesome, painless and harmless. Reason, through science, through knowledge of anatomy and biology, has come to the rescue of woman, showing her how she and the mate of her life may have the maximum of physico-spiritual joy of the sexual relation—and thus the consequent deepening and refining of the spiritual union of their lives—through all the years of their prime, and also have children, but when and only when reasonably safe and wise to do so. Reason through science now shows the normal husband and the normal wife how they may be unashamed, happy and wise, glad to bless the world with life but refusing to crowd and curse the world with surplus life.

Now let us consider briefly what is the possible outcome for this country if all normal American wives should go their animal limit, should do their biological best to bear children (just naturally, as the females of the lower animals do their best to bear, to "replenish the earth")—during the next hundred years. If, blindly obeying nature's bewildering urge, American wives should go their natural limit in child-bearing for the next hundred years the population of the United States in 2027 would exceed 3,500,000,000—three billion five hundred million—citizens, that is, twice the present population of the entire world, or about thirty times the present population of the United States. And if the present proportion between the urban and country population should continue throughout the hundred years, Chicago would have eighty million people. And if all the wives of the world were piously obedient to the shallow and cunning teaching that they should, as child-bearers, obey nature unguided by reason as to numbers, then the consequent crowding of the world and the inevitable cursing of the world with want and wars would make the recent World War look petty and unimportant in comparison. Again, suppose instinct rampant and unreined, throughout the world for the next two or three centuries—then what? Mankind is clearly booked for future spiritual starvation in the starving struggles for existence and in the wild wars of nations, unless the knowledge of contraception is spread and used.
Fortunately the voice of science has been heard and heeded by the wives of practically all the Roosevelts (including the late and loudly oral lecturer on race suicide) and the Tafts, Wilsons, Coolidges, the bishops and bankers, the great captains of industry and the labor leaders,—the so-called very best people. These very best people know and make use of the best methods of contraception and thus set an excellent example for the common people, and happily these very best people preach far more effectively by their example than they do by theirpatrotie and pious prattle.

The plain people will not always be the miserable victims of mocking insincerity in this matter. Fortunately most American wives practice Birth Control at least “a little”—so far as they know how, and presently they will all know the harmless and painless methods of contraception. Ere long the women will flatly refuse to vote for any legislator who deems this sorely needed knowledge to women generally—which is now used by the wives of legislators generally.

Nature is not always right. And that is why for the higher and higher uses of higher and higher man, ever marching forward in the improving light of reason we cut the weeds out of the corn, kill rattlesnakes, dehorn cattle, trim fruit trees, and do a thousand other artificial things in control of nature. Nature is indeed not always right, nor is a child the only “morally legitimate” purpose of the sexual relation between a husband and wife. The biggest, boldest and stupidest fraud in the civilized world today is the mocking pretence that Birth Control by harmless and painless contraception is indecent or vicious. This very contraception so attacked by a certain type of moralist, is easily one of the most important discoveries in the history of mankind.

The fundamental significance of civilization and human progress is that, so far as he can, man takes control of nature. Man must take charge of nature or live like a savage. What society must do it will do. What most civilized wives now practice “a little” and half-ashamed will presently be practiced universally by civilized wives, freely, unashamed and successfully.

Thus a new era dawns for the workers of the world and for society generally in the rise and rule of reason in the guidance of the altogether beautiful but brainless, adorable but dangerous instinct of procreation. It is up to the working class of the present day to catch up with the procession and insist on the knowledge that will enable them to adopt harmless and painless means of protection themselves, their children, and all mankind in the wholesome enjoyment of an almost irresistible impulse to an act in which instinct is, as usual, blind, and in which, as usual, reason can come triumphantly to the rescue.

Birth Control and the Hygiene of Married Life

By Harry L. Lurie

As a result of three years of intensive effort on the part of a family case work agency to educate families in voluntary parenthood, as a part of the plan of treatment, we have reached the conclusion that a carefully organized service is of exceeding value to the families. The need for such a service is beyond question. Two-thirds of the families with whom we have come in contact have habitually been using means, mechanical and otherwise, for preventing conception. In many instances harmful or unsuccessful results have followed, and proper medical advice is essential for the constructive solution of these difficulties. Nearly one-half of our families have previously resorted to the dangerous expedient of abortion, illegally performed. Our experience has indicated that even in the subnormal family (the despair ordinarily of the exponents of Birth Control) under proper guidance routine habits of sex hygiene can be established.

In the three years that the Jewish Social Service Bureau of Chicago has had a special service in sex hygiene, 104 women and 35 men in 104 families have been referred. These were all selected for their interest in problems of sex hygiene and their willingness to have instruction in contraceptive methods. In the case of the wife, a woman physician gave a gynecological examination. In the

*This article is part of an address delivered at the Chicago Symposium held under the auspices of the Women's Aid in January. The figures are taken from Mr. Lurie's article in the Jewish Social Service Quarterly for December.
case of the husband, a man physician gave a general examination. These were followed by instruction both in sexual hygiene and in contraception. The following table shows the serious reasons for which this advice was given:

**Table I**

<table>
<thead>
<tr>
<th>Reason</th>
<th>Number of Families</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chronic insufficient earnings</td>
<td>97</td>
</tr>
<tr>
<td>Serious illness and disabilities of husband or wife</td>
<td>60</td>
</tr>
<tr>
<td>History of abortions</td>
<td>47</td>
</tr>
<tr>
<td>Subnormality or mental deficiency of husband or wife</td>
<td>46</td>
</tr>
<tr>
<td>Serious domestic friction</td>
<td>36</td>
</tr>
<tr>
<td>Psychopathology of husband or wife</td>
<td>20</td>
</tr>
<tr>
<td>Children seriously defective</td>
<td>17</td>
</tr>
<tr>
<td>Sexual incompatibility of husband and wife</td>
<td>11</td>
</tr>
<tr>
<td>Syphilis of parents</td>
<td>11</td>
</tr>
<tr>
<td><strong>Total number of reasons</strong></td>
<td>345</td>
</tr>
<tr>
<td><strong>Number of families</strong></td>
<td>104</td>
</tr>
</tbody>
</table>

The number of previous pregnancies represented by these families is given in Table II:

**Table II**

<table>
<thead>
<tr>
<th>Number of living children</th>
<th>Number of Families</th>
<th>Number of Known Pregnancies</th>
<th>Number of Families</th>
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</thead>
<tbody>
<tr>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>1</td>
<td>5</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>2</td>
<td>12</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>3</td>
<td>14</td>
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<td>12</td>
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<tr>
<td>4</td>
<td>24</td>
<td>4</td>
<td>14</td>
</tr>
<tr>
<td>5</td>
<td>17</td>
<td>5</td>
<td>11</td>
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<td>6</td>
<td>12</td>
<td>6</td>
<td>16</td>
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<td>7</td>
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<td>8</td>
<td>6</td>
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<td>9</td>
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<tr>
<td>10</td>
<td>2</td>
<td>10</td>
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<td>11</td>
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<td>2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>24</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number of Families</th>
<th>103</th>
<th>Total number of children</th>
<th>468</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Pregnancies</td>
<td>0</td>
<td>Total number of pregnancies</td>
<td>0</td>
</tr>
<tr>
<td>Number of Pregnancies per family</td>
<td>0</td>
<td>Median number of pregnancies per family</td>
<td>0</td>
</tr>
</tbody>
</table>

(The number of pregnancies recorded is probably less than actual because of insufficient data on this subject)

While it is not probable that by means of instruction alone these families will rise to a more comfortable standard of living, on the other hand, the cessation of further child-bearing has in most instances held out promise of improvement. At least many families are holding their own socially and economically, and are not progressively living under more and more straitened circumstances, which would have been the inevitable effect of further increase in the size of families. The improvement in the relationship of husband and wife is also marked since the removal of the fear of pregnancy has had a therapeutic value in the marital relations of many of our families. And what we believe to be the most effective argument for the continuance of our service is that methods, socially and medically acceptable, have replaced undesirable and unsatisfactory means of contraception in at least two-thirds of our families. Finally our experience indicates that instruction in sex hygiene and carefully planned systematic medical service in this regard is a definite service that should be available to all married couples at the outset of their family life rather than at the time when lack of such knowledge has brought their distress to the attention of a case working agency.

**A LESSON FROM OUR ROBINS**

*By Laura A. Winkelspecht*

There is a cedar tree in our back yard which I planted twenty-one years ago in honor of our baby boy. As soon as it became tall enough for nesting, a pair of robins came every spring to build in it. I have enjoyed watching their movements and listening to their songs each year. At break of day they begin their beautiful carol of worship, right there at the one little spot they claim for a home.

The pretty pair work diligently together, gathering bits of dry grass and string and carrying it to the tree, where they carefully build it into a cozy nest. After the nest is completed the female bird lays the eggs. Then one bird sits on the nest and covers the eggs while the other goes out to find food, each bird taking its turn.

After the young birds are hatched, the same process goes on, except that there are more birds to find food for. There are generally three in a nest. As soon as the young become strong enough, the father bird and the mother bird teach them to fly, to hunt their own food, and to take care of themselves. Each bird learns its lessons, and then goes out into the world to find a mate, build a nest, and raise a family of its own.

There are usually two sets of young robins in one nest, but the first set is fully developed and educated before another set is hatched.

This seems a good example for humanity to follow.
A Philadelphia Symposium

In New York, Philadelphia and Chicago this winter, symposiums on Birth Control have been held which have aroused great interest. Last month we gave a digest of the New York Symposium. This month we publish part of the speeches at Philadelphia.

The Philadelphia Symposium was held under the auspices of the Pennsylvania Birth Control Federation at the State Conference on Social Welfare, February 11th. Mr. Bailey B. Burritt, General Director of the Association for Improving the Condition of the Poor of New York City, spoke first. He dwelt on the common use of Birth Control among the well-to-do and the much greater necessity for this information among the very poor with whom welfare workers come in contact. Mrs. Edith Houghton Hooker followed, speaking on.

A Little Rampart of Straws

One of the most encouraging signs of the times is the apparent intent on the part of the large groups of people here, there and everywhere, consciously to assist in determining the destinies of the human race. The Birth Control movement stands out as a conspicuous example of this trend, demanding as it does the substitution of reason for chance in relation to the fundamental question of population.

The opponents of Birth Control who regard children as the sole justification of sex, doubtless are convinced that the passage of laws such as the Anthony Comstock law, prohibiting the dissemination of contraceptive information, serves to uphold sexual morality. In this I believe they are under a misapprehension. Their effort is similar to building a little rampart of straws in an attempt to stem Niagara. The strength of the sex impulse may be measured in terms of its accomplishments. Through it life has been maintained on this planet for millions of years and presumably will be maintained for millions of years to come. Little groups of words in the form of statutes are impotent to repress so dynamic a force. But the Anthony Comstock laws while they cannot restrict sex solely to the purpose of reproduction, can by dint of their effect on the institution of monogamy, serve to deflect sex into wholesome and unnatural channels.

Almost any human being prefers a love relationship to a venal relationship in sex, but when marriage becomes an economic impossibility, prostitution of necessity takes the place of monogamy. The importance of Birth Control in monogamous marriage can hardly be overestimated. Sexual desire always awakens at least in the male before full economic productivity has been accomplished. The young man cannot afford to marry if by so doing he straightway becomes responsible for the financial support of a wife and children.

The man who is driven too hard by the actual needs of his family is forced to forgo his higher aspirations and to turn his attention instead to commercial considerations. Thus love, which should be an incentive to the creative impulses of the individual, becomes a millstone which drags him down to a debasing materialism. It is this disillusioning experience of his fellows which leads many a young man to choose, and which tends to give public sanction to illicit relationships in place of early marriage.

The false morality of today which denies contraceptive information to married people, thereby placing monogamous unions beyond the pale of economic feasibility, is but one side of the shield. On the other side is the institution of prostitution, with its dreadful toll of venereal disease.

The ethical values involved in Birth Control can only be comprehended by those who understand clearly the function of sex in human life. Among the lower orders of animals the primary purpose of sex is obviously reproduction. The gratification of the sexual instinct is a means to an end, and when the sexual act is divorced from procreation neither the individual nor the species gains in proportionate benefits. Among human beings on the contrary, the individualization of the sexual impulse has become so profound, that the use of the sex act apart from love inevitably appears as unethical conduct. Reproduction alone cannot, therefore, be regarded among human beings as offering a sufficient justification for sexual relations. Love as the human expression of the principle of sexual selection is recognized as the essential basis for sex relations between men and women. It is this fact which determines the moral value of monogamous unions and which proscribes polygamy, polyandry or promiscuity among civilized human beings.

Experience has clearly proven that where Birth Control methods are not understood, the violation of wedlock frequently follows. Married women whose health has been ruined as a result of the overproduction of children, revolt against sexual intercourse with the result that their husbands, sometimes even with the wife's sanction, seek satisfaction from outside sources.

The complete satisfaction of sexual desire, the mutual enjoyment of passion is an indispensable element in successful monogamous marriage. The emotion of love is

(Continued on page 125)
The First Comer

Three steps down, hesitantly, the door seems to stick, but comes open at last with a little push. Our first patient of the morning stands on the threshold, peering about the room at the painted, blue shelves lined with books, the long blue table with its little piles of pamphlets, the gay curtains at the window, the desk and typewriter—taking it all in at a glance in the moment before she is met and questioned about her appointment.

What a tired, careworn, hopeless woman our first patient is! As I take her into another room, where I can talk to her and get something of her history, it depresses me to see her so tired while it is still so early and the day so very bright. She tells me about her tubercular husband, "sick for two, three years." Occasionally he is allowed to come home to spend a short time with his family, to see his children who have almost forgotten him. There are six in this brood, all of them undernourished, and the last one more sickly and slower to develop than the others, for he came since his father has been ill.

Her eyes streaming, the poor woman tells me how, thinking of her last poor sickly baby, she dreads her father’s coming, even though he makes the mental effort, to see his children who have almost forgotten him. There are six in this brood, all of them undernourished, and the last one more sickly and slower to develop than the others, for he came since his father has been ill.

Aged Youth

As she dries her tears, and goes into the other room another woman enters—so frail, so nervous, and again so tired. She answers my questions timidly. "How old are you?" I ask, making ready to put down a thirty-five, perhaps a thirty-six. "Twenty-nine" I look again at that little lined face, old with care and worry. "And how many children have you?" "Ten" "Ten?" I am aghast. Her husband is a peddler, earning a meager sum each day. He is rheumatic and worn. What a picture of misery she presents, one little spurt of defiant despair showing itself when she tells me how, after her ninth child, she thought if she were to become pregnant again she would throw herself from a window. But when the tenth pregnancy occurred, she knew there was no way out for her. Who would look after her babies? And so, through nine months of stifled anguish she dragged herself about her dingy rooms, up and down the four flights of stairs, ceaselessly tortured by her hopeless thoughts. Then, at the end of the nine months the child was born, and after its delivery a slow broken recovery for the mother. The doctor told her that the child must have great care, as it had a weak heart. "I no want no more babies—no more babies," she cries.

Love and Trouble

Again the street door opens and two young people enter. The man has the face of a poet, a dreamer. The girl’s lovely eyes peer out of a face that is exquisitely pale and thin. There is a suppressed air of excitement about them, which the girl explains as she talks to me in the inner room. "You see we’re leaving for Europe this afternoon. I suppose our case is different from most of your cases. We’re from California, Don and I were both studying there. We were going to be married next year. Neither of us has a soul in the world. I must have been doing too much, studying and tutoring and writing—and suddenly last winter I collapsed. I thought I was gone for good. It was just Don that made me pull out of it, but then I got sick again, and had scarlet fever. I don’t know how I ever got over that—in fact I didn’t. My kidneys are bad and my heart is—oh, I just can’t talk about it.

The doctor said if I could travel, I’d get well, but my money was all gone for doctor bills, and Don never had much. Then Don got a scholarship to study art in Paris, and the doctor said we could get married, so that Don could take care of me and I would have the ocean voyage. He told us we must not have any children, but he didn’t tell us anything definite at all. Just warned us very seriously, now we’re both worried all the time, and I don’t know what to do. We simply can’t risk having children—they might not be born healthy, or I might never be able to take care of them. We do want children, but not now.”

Twelve Pregnancies

The next patient is a woman sent by a nurse at a large woman’s hospital. The patient’s husband is a porter—his earnings about $25.00 a week. He is ignorant, but
kind and thoughtful The woman has had twelve pregnancies since she was married fourteen years ago At thirty-two she is old, worn, ill, and suffers with chronic kidney trouble She has eight children living—two children are dead—two pregnancies resulted in abortion. The last three or four pregnancies were difficult and dangerous, necessitating her going to the hospital for weeks before the delivery, so that she might be treated for a skin condition of the hands, high blood pressure, legs and arms that were swollen hard and itched with excruciating ceaselessness.

During each of these deliveries the patient was near stupor. There was no attempt on the part of the physicians to give information so that she might avoid further pregnancies. Were this woman afflicted with recurring attacks of any other illness she would be advised. But because her condition was the result of pregnancy, she was allowed to go on hopelessly, each year getting worse and worse.

A young woman came in next, she was nineteen years old, and had three children. Two of them had bad hearts, and were being treated in a hospital from the time of their birth. No attempt had been made to give this mother contraceptive advice, so that she need no longer bear children unhealthy from birth, and wear herself out until the possibility of her ever bearing healthy children is lost entirely.

A Tragedy of Married Life

The next patient was a young woman of culture and intelligence. Her story began with her first marriage. Her husband was tender, intelligent, loving—they began their lives very happily. The first baby came very soon, and was followed shortly by the second. The woman began to feel burdened, for she had been forced to give up her interests and the greater part of her social life. Her happiness with her husband was based on their complete compatibility and devotion. Their sex life was, as it often is in marriage, vastly important to them, yet forced into the background—disquieting, never fully giving them the happiness or close harmony that should have been between them emotionally as well as intellectually. There was a period of abstinence,—the only methods of Birth Control they knew were either obnoxious or had been proven unreliable. The wife consulted her family physician, and was advised by the well-meaning old gentleman, but in a short time discovered she was to have a third child.

In five years she had four children. She had no time to read, concerts and the theatre were almost unknown to her, the stimulation of society, friends, discussions, was a thing of the past. She began to shrink from her husband, and he was visibly hurt and at a loss. Then suddenly one day he was brought home, fatally injured in an accident. They had never reached a complete happiness, these two people who were ideally mated, hone and sensitive and loving. Their last year she remember with horror.

All this was over six years in the past, and now she was married again. She came to us asking for information, wanting to know about living a normal sex life, eager to cast aside her old inhibitions and fears and ignorance, eager to give and receive the happiness she might have had years before. Most of all, she wished to be free of the slavery of enforced child-bearing. She wished children, perhaps two or three in this marriage, but she wished also to plan for them so that she could give each all the time and care she knew a child should have, and to do so without depriving the elder children of her attention, to live her life happily and fully as well as to bear children. To this reason was added the knowledge that she might have to undergo a major operation shortly, making the necessary information practically imperative.

Husband a Drug Addict

The woman whom I next interviewed was a wondering, broad-eyed person, sent us by a charitable association who has been supporting her since her marriage ten years ago. She is now twenty-seven, and the mother of six children. The baby has rickets, and another, also little more than a baby, a chronic kidney condition. She has had ten pregnancies, four resulting in abortions. She has kidney trouble. Her husband is a drug addict and a drunkard, who has never contributed anything to his ever increasing family. He was now about to return home, after several months on Welfare Island. If he cannot get drugs, he drinks until he gets into trouble and is returned to the Island once again. The hopeless tragic cycle repeats itself continually, and this young woman comes to the clinic hoping that she can at least be saved from the thing that haunts her most—the fear of further pregnancies.

We are told sometimes that we, who are supposedly intelligent and sensitive, exaggerate in our minds the burden of the poor and ignorant. We are told they are used to their condition, they know nothing better and do not realize the true tragedy of their circumstances. From my experience in the Outer Office I do not believe that this is true. This young woman is overwhelmed by her unhappy lot, and she expresses her despair so that one cannot help but be touched by the sadness of it.*

The next patient too, surely realizes and feels keenly her condition. She comes to us from an obscure village far from the city. She too has nine children, has had pregnancies which were spontaneously terminated because her tasks on the farm were far beyond her meager strength. Her husband is cruel, an idler and a drunkard,

*This woman testified at the hearing on the New York Bill.
The Legislative Hearings

NEW YORK

THE New York Legislative Hearing in 1925 marked the passage from prejudice to willingness to listen on the part of legislators. The Hearing March 1st on the Birth Control bill presented this year marked no less striking a change. It brought out an eagerness on the part of legislators to learn. The proceedings began in the room of the Codes Committee, but because large numbers were waiting in the hall to hear or take part, the Hearing was transferred to the Assembly Chamber, which was filled. Dr. Cooper introduced the earlier speakers for the bill, later Mrs. F. Robertson Jones, Chairman of the Executive Committee of the Birth Control League, took charge. Dr. Cooper told of resolutions demanding the right to give contraceptive advice passed by the two national bodies of gynaecologists. Specifically on this bill, he showed 594 postcards, 28% of a local circulation, of endorsement from physicians in New York City alone.

Mr. Percy Clark of Cornell University gave further evidence of the growth of medical support when he told of three questionnaires sent by Professor Willcox of Cornell to members of the Tompkins County Medical Society. To the first, four years ago, there were 49 replies, 25 against, 24 favorable. To the second, 45 replied, 21 in favor, 24 opposed. While to the enquiry sent out this year there were 50 replies, 13 opposed and 37 in favor. Of those opposed two wrote: "Doctors are giving contraceptive advice anyhow. Why do we need the bill?" This, Mr. Clark held, summarized the present situation. Are we to legalize Birth Control, to bring it under control and standardize it for rich and poor alike, or is it to remain the bootlegged and uncontrolled luxury of the rich and of those who wish to use it for immoral purposes? Further medical testimony was given by Dr. S. Adolphus Knopf, who told of the origin of his interest as a physician working for the prevention of tuberculosis.

Testimony from the Clinic

Dr. Hannah M. Stone spoke of the class of patient who now asks help of the Clinic Research Department of the American Birth Control League in vain, since she is not ill enough to come within the present law. These are frail and poverty-stricken women to whom every additional child means greater poverty and greater physical drain, but who cannot be helped in the clinic until the cumulative strain has actually made them invalids. An example of the typical health case which can be treated at the clinic was given by a patient who testified. Dr. Walter Timme, who could not himself be present, sent the following endorsement through his wife a member of the Board of Directors of the American Birth Control League: "After careful study and consideration in the line of my work, which brings me in touch with nervous and endocrinologically disturbed women, I heartily endorse this bill."

The presenting of non-medical evidence for the bill was in Mrs. F. Robertson Jones' charge. Mrs. Lewis Delafield, Vice President of the American Birth Control League, asked that New York bring its law up to the standard of those 33 states in the Union which either have no prohibition of Birth Control or allow very much greater latitude than this State. This would not be revolutionary legislation but rather in the truest sense conservative and in accordance with standards set by the majority of our States.

Organizations Endorsing the Bill

In answer to a question as to whether the ordinary homekeeping woman supported the bill, Mrs. Jones read a list of 26 organizations which included, besides health and civic bodies, mothers clubs, day nurseries, church clubs and organizations of women who aim to alleviate the lot of poor babies and children.

The following is the full list of endorsing organizations: League of Women Voters of New York, Hospital Social Service Association, Federation of Child Study, Woman's Press Club, National Women's Trade Union League, Citizens Union, Women's City Club, Legislative Committee of the Ethical Culture Society, Society for Political Study, Board of Managers of Five Points Mission, Lenox Hill Hospital Social Service, Inc., Civic Club, Gamut Club, Inc., Virginia Day Nursery, Medical Board of the Babies Hospital, University Settlement Society, Federation Settlement, Nat Assn for Study of Epilepsy, Chapel of the Incarnation, Children's Haven of Far Rockaway, Foster Mothers' Association of America, Portia Club, First Hebrew Day Nursery and Kindergarten of Brooklyn, Yonkers Unit of the Speedwell Society, Eisman Day Nursery, Home for Hebrew Infants, Hopewell Society of Brooklyn.
Representatives of some of these organizations were present and gave their endorsement. They were Miss Dorothy Kenyon and Miss Sally Peters of the State and City League of Women Voters respectively, Mrs. Louise Martin, Society for Political Study, Mr. R. E. McGahen, Citizens Union, New York City, Mr. Charles H. Studin, Civic Club, New York City, Mrs. Clara Boyer, Hopewell Society and Mrs. Louise Loeb of the Portia Club. Another speaker was Mrs. William A. McLaren, vice president of the social service department of a great New York City hospital.

The only speaker in opposition was Mr. Joseph A. Gavilan, a member of the Assembly and of the Codes Committee, who expressed the members of the Committee and the close questioning as to matters on which they had not a perfect understanding. These were not the captious hec-toring questions with which we are only too familiar at legislative hearings. They were sincere efforts to get the facts and to find the answer to charges brought against the Birth Control movement. Notable among these questions were those which made it possible to answer malicious criticism. The Committee satisfied itself in this way that Birth Control was not abortion, but was a preventive of abortion, that the American Birth Control League was not an organization which manufactured and sold contraceptives, that, though there was not yet an 100% reliable contraceptive — any more than there was 100% perfection in any other medical procedure — science had made strides in recent years and the methods now recommended were successful on a large scale, and were perfectly safe.

Mr. Gavilan alone of the Committee believed that there was a moral argument against Birth Control, the rest apparently agreeing with Dr. Cooper, who maintained that there was no unchanging "moral standard in human affairs" except the good of the race.

THE CONNECTICUT HEARING

A large and thoroughly sympathetic audience filled the old Senate Chamber at the Hartford Capitol, for the Hearing on Birth Control before the Judiciary Committee. There were two bills before the Legislature, but the one sponsored by the Connecticut Branch of the American Birth Control League was the only one which received attention, the author of the other bill desiring his own in favor of the simpler measure. The bill consisted of merely a dozen words, repealing the law as it now stands, which prohibits entirely the use of contraceptives. There is no mention in the Connecticut law of the giving of Birth Control information or advice, but the doctors feel that so long as the present law remains in force they are not free to advise their patients to commit a crime.

The hearing was conducted by Mrs. Thomas N. Hepburn, and the first speaker after her introductory remarks was Dr. Hannah Stone, Director of the N. Y. Clinical Research Department. Dr. Stone gave first hand evidence concerning the need for Birth Control as illustrated by the patients who come to the clinic, and cited cases which showed the terrible position of many mothers and families when they fail to receive the proper instruction.

Mrs. George H. Day, Sr., Chairman of the Connecticut Branch, then presented to the Committee a large number of letter endorsing the bill, written by men and women who were too busy to be able to come to the hearing. These included endorsements from Professors Irving Fisher and Ellsworth Huntington, both of Yale University, from Rev. Rutledge Beale, Chairman of the Social Service Commission of the Congregational Church of Connecticut, and also from many doctors, nurses and social workers.

Mrs. Porritt, as one of the Directors of the American Birth Control League, then sketched the aims and history of the movement and made a plea that we be allowed to aid the State by diminishing the enormous of dependents for which this year larger appropriations than ever before are being asked from the Legislature.

Mr. S. Hudson Chapman, an instructor from Yale University, who brought with him an endorsement of the bill from a long list of his colleagues, then told of the great need of Birth Control for the individual woman, giving instances of college graduates whose experiences of too rapid bearing of children had weakened them and made them unfit later to have the families they desired. Birth Control wisely exercised in these cases would have made possible larger families among the very people who most often rebuked for race suicide.

Mr. Henry F. Fletcher, the introducer of the other bill, made a strong plea for tolerance for others from the Roman Catholics, who were just now asking tolerance for themselves. He also pointed out that this bill was on lines recommended by the Governor — clearing the Statute Book of obsolete and useless laws.
THE PENNSYLVANIA HEARING

At the hearing on the Birth Control Bill, held at Harrisburg on March 9th, there were about 150 present, and judging by the frequency and volume of the applause the majority were favorable to the bill.

Dr. Heffernon, a dentist, was chairman of the committee. He was courteous and fair and gave a good impartial hearing. He announced that 45 minutes would be given to each side, 8 minutes to be taken by each of 4 speakers and 12 minutes for rebuttal.

The first speaker for the affirmative was Dr. Mudd, of Philadelphia, who spoke on two points, namely that the passage of this bill would tend to prevent abortions by permitting physicians to advise women who should not become pregnant in contraceptive measures. The second point was that it would promote morality by permitting young people to marry earlier, thus avoiding tendencies to promiscuous living.

The next speaker was Mrs. Donald Hooker of Baltimore, whose message was that Birth Control would help materially to maintain monogamous marriage and the integrity of the home. She pointed out that there are many women who are weak or ill or for other reasons feel that they should not become pregnant. These women often fear the approach of their husbands because of fear of consequences. Thus many men are driven to extra marital relations which may result in infections and often lead to domestic rupture. If monogamy is to be maintained, therefore Birth Control is necessary.

Eugenic Support

The next speaker was Professor Roswell Johnson, President of the American Eugenics Society, who met the objection that Birth Control is unnatural. This was perfectly true, said he, but so is all that we class as civilization. Birth Control is only one of the hundreds of unnatural practices which are necessary and benefic. He also called attention to the fact that because of higher death rates it was necessary in earlier times to produce larger families to carry on the race. Formerly, a family of about 18 was necessary, now only 4 are needed. If smaller families can now make as large a contribution to race progress as a larger one formerly, they should be properly spaced and come at such times as mother’s health and other conditions indicate.

The next speaker, a physician from the western part of the state, made a splendid appeal from the standpoint of moral and religious accountability. This ended the affirmative presentation.

The Opposition

The opposition was next called. Only one person appeared, Dr. John A. McGlinn of Philadelphia. Dr. McGlinn contended that doctors do not want this bill, and that the lay group, the American Birth Control League—who want it—are unethical and stoop to contemptible methods to further their cause. He claimed that he represented a Philadelphia medical society and that ethical medical men are not associated with this movement. He also asserted that boys and girls coming out of New York Theatres where salacious plays are presented are solicited by representatives of the movement to purchase Birth Control literature. His remarks were not addressed to the merits of the proposal of the proposed bill or the principle of intelligent procreation, but were scurrilous attacks and denunciations of its advocates.

The Rebuttal

Dr. Cooper, who was called to speak in rebuttal, asked Dr. McGlinn if he would present to the meeting his credentials from the medical society who had commissioned him to speak. In reply, Dr. McGlinn said he had an oral commission. Subsequent inquiry among Philadelphia physicians who are members of medical societies failed to bring to light any society which had authorized Dr. McGlinn to speak for them.

Dr. Cooper pointed out in proof that doctors do favor Birth Control that

1. The section on Obstetrics Gynecology and Abdominal Surgery of the American Medical Association in 1925 passed the following resolution: RESOLVED, that this section hereby recommend the alteration of existing laws wherever necessary so that physicians may legally give contraceptive information to their patients in the regular course of their practice.

2. The American Gynecological Society in 1925 passed a resolution favoring the opening of the U. S. Mails to medical books, medical and scientific journals and reprints therefrom containing articles on contraception.

3. He had himself spoken during the last two years to over 135 County Medical Societies, State Societies, Academies of Medicine, Medical Schools, Hospital Staffs and other medical bodies in nearly every State in the Union.

As most of these addresses were given on tours, over 90% of the meetings were specially-called meetings on dates convenient for his itinerary and
the entire meetings were given over to the discussion of the subject of Birth Control. In only 3 of these meetings was opposition expressed. This is good evidence that doctors are keenly interested. In regard to the character of physicians interested, he pointed out that the list of such men was too long to give, but among them are Dr. William Allen Pusey, who when he was President of the American Medical Association in 1924—the greatest position of distinction and honour that the medical profession can bestow on any man, made Birth Control the subject of his presidential address.

On this point, Mr. Sterling, sponsor of the Bill, interrogated Dr. McGlunn. He read the names of a dozen well-known physicians of Philadelphia and asked if they were well-known and ethical men, to which Dr. McGlunn replied they were. Mr. Sterling said that he was not in any way speaking for these men, but they were members of the Pennsylvania Birth Control Federation.

Dr. Cooper took up Dr. McGlunn's charges about the sale of the Birth Control Review. He stated that this is a monthly magazine of a very high type, containing nothing of a salacious character and having no appeal except to those interested in intelligent parenthood. It has, it is true, been sold on Times Square, New York for the past 10 years, but it is absolutely false that any attempt is made to have these magazines sold near theatres where salacious plays are presented.

Those who worked for the bill were encouraged by the response on the part of legislators. Birth Control was a real live issue. The publicity was good and the hearing satisfactory.

Appreciation from Our Correspondents

Los Angeles, Calif., Oct. 21, 1926

Editor, Birth Control Review

The copy of your splendid magazine, Birth Control Review, which I received tonight from San Francisco, my former abode, is highly appreciated by me. It gives me much to be thankful for, not for the appearance of my letter to Station KTAB, Oakland, California, but to know that such work is being done.

Of course I am proud of the fact that my thoughts are worthy of the space which you have given them, and I have been highly honored by the courtesies of the League, by placing my name among so many illustrious and learned Thinkers and Writers. It is a wonderful compliment for which I thank you most sincerely.

Yours with utmost esteem,

WESLEY R. RUBLE

Montclair, New Jersey

Editor, Birth Control Review

I cannot let the opportunity pass to call your attention to the article in the November number of the Birth Control Review, "The Problem of Too Many Children," by Jose Lanauze-Rolon, M.D. This article seems to cover many advantageous points for Birth Control, the most excellent and all embracing article I have ever seen on the subject. I wish it could be published again and again, and even in pamphlet form, to reach the minds of humanity far and near. Dr. Lanauze-Rolon is courteous, kind and sane at every point and, from his own point of view, unbigoted and unprejudiced.

Can you not do something with this article beyond this, our publication? I wish I could drop it into every home in the world—that through it, once for all, Birth Control could be understood and put upon a rational basis of human experience.

Yours very sincerely,

MRS. T. L. DIX

Editor, Birth Control Review

I was pleased to have you quote my article "On Bights" but I guess I "tooted up" the Japs sky high. On the previous page (287) your Japan increase is one cipher short of mine—700,000 instead of 7,000,000. Next time better ask me to revise my figures. I copied a statement without stopping to think. My World Almanac says the United States population jumped only 21,000,000 from 1900 to 1921—20 years. Even for the United States, 7,000,000 per year would have jumped us up from 76,000,000 to 216,000,000. Next time you better check me up. My arithmetic is deteriorating with age. I am 65 but outside of that (arithmetic) I am all right.

I glory in your courage. Keep pounding away, sister.

H. L. HOARD,
Publisher of Jefferson County Union

P.S. I am publishing the article in the December Review on the Sesqui in my paper. It is very interesting and well written. It may raise a rumpus among my readers, but it will start them thinking, I guess.

*Birth Control Review for September
News Notes

UNITED STATES

Dr Alice Hamilton, member of the National Council of the American Birth Control League, has been appointed advisory member of the Health Committee of the League of Nations.

New York

PRELIMINARY work which solidified the support given the New York bill at the hearing was done by Percy Clark and Mrs F Robertson Jones. On February 12th, Mr Clark held a debate with Father Edward P Duffy, under the auspices of the Erie County League of Women Voters at Buffalo. The arguments were based on the moral issue alone and the vote in favor was 27 to 19. The local papers gave good publicity.

On February 28th, Mrs F Robertson Jones spoke at the Hotel Astor before the Foster Mothers Association of America. Great interest was shown, and the result was that this association allowed its endorsement to be used at the hearing on the state bill.

A Birth Control bridge party was given by Mrs Francis N Bangs, New York City, on February 28th. Mrs F Robertson Jones addressed the group, who were young married women and most enthusiastic in their support of Birth Control. The proceeds of fifteen tables at $10.00 a table are to be donated to the American Birth Control League.

The outcome of the Hearing and the work for the bill is thus recorded in one of the New York newspapers:

BIRTH CONTROL BILL FAILS BY ONE VOTE

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Shows Gain in Strength in Committee action

(Special Dispatch to The New York Telegram)

The New York Telegram Bureau, Albany, Wednesday

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By a majority of but one the Assembly Codes Committee voted to deny recognition to Birth Control as a legal factor in the life of the State at this session of the Legislature. Assemblyman Gavegan, of New York City, led the opposition to the legalizing bill.

Assemblyman Hackenburg proposed that the bill be amended so as to be retroactive, and in that form only apply to its advocates.

This is the nearest that a bill legalizing Birth Control came to be reported to the Assembly. In other years even the introducers refused to support the bills in committee.

Connecticut

THE event of the month in Connecticut was the Hearing on the bill repealing the law against the use of contraceptives. The response to the appeal for support made by the Connecticut Branch of the American Birth Control League, received from people all over the State was most encouraging. The change of feeling since the legislative campaign of 1925 has been tremendous, and whatever the result of the present attempt it has been amply worth while as a means of education.

On February 23rd, as a preliminary to the Hearing, Mrs F Robertson Jones addressed a group of 55 social workers at the home of Mrs Percy Walden, President of the Connecticut Child Welfare Association, and Chairman of the Child Welfare Committees both of the National and the Connecticut Leagues of Women Voters. To many of these workers the question was new, and there was still much of the almost medieval fear of the subject and inhibition regarding sex questions, which used to be practically universal, but which are rapidly disappearing with the spread of Birth Control education.

After the Hearing the Connecticut Branch made every effort possible to get letters to the members of the Judiciary Committee asking for a favorable report. But on March 15th the bill was unfavorably reported to the Senate by a vote of 8 to 7, and rejected without a roll call vote.

Pennsylvania

THE Hearing before the Committee on Public Health and Sanitation on House bill number 456, introduced by Hon. Philip Sterling of Philadelphia is described on another page of the Review. The bill for this bill was ably planned by Dr Stuart Mudd, President of the Pennsylvania Birth Control Federation. Mrs A C Martin, an old campaigner in the suffrage movement directed the work in the field and at Harrisburg. Friends of the movement rallied around her and gave good help in interviewing and writing to their legislators. Every man was canvassed, supplied with literature and nearly all were interviewed personally.

Birth Control was a live issue and there was some talk of having the bill called out of committee. Names of 104 assemblymen favoring the bill were obtained. Mrs Dunning, Dr Janvier, Mrs Moorehouse, Miss Pennypacker and many others lobbied for the bill. Preliminary work was done up to the very day of the Hearing. The
day before, the Legislative League, a group of twenty-two members of both houses, met to discuss bills and other related matters. Dr. James F. Cooper addressed this group which showed an intelligent interest.

Following is a list of the member of the Pennsylvania Birth Control Federation to whose work the excellent hearing at Harrisburg was due:

Brooke M. Ansparse, M.D., Philadelphia; Kate W. Baldwin, M.D., Philadelphia; H. C. Bassett, M.D., E. R. C. S., Philadelphia; Mrs. Horace Forbes Baker, Pittsburgh; Franklin N. Brewer, Moylan; Mr. and Mrs. Stanley Bright, Reading; Lida Stewart Cogill, M.D., Philadelphia; Miss Anna F. Davies, Philadelphia; Nera R. Deardoff, Ph.D., Bryn Mawr; A. Lovett Dewees, M.D., Haverford; Karl de Schwennitz, Philadelphia; George L. de Schwennitz, M.D., Bethlehem; Rabbi W. H. Fineshuber, Philadelphia; Rev. Roger S. Forbes, D.D., Philadelphia; Malcolm Z. Gearhart, M.D., Reading; Rev. Frederick R. Griffin, D.D., Philadelphia; Annie Bartram Hall, M.D., Philadelphia; Hornell Hart, Ph.D., Bryn Mawr; Stevens Hecksher, Philadelphia; Mrs. and Mr. Clarence G. Hoag, Haverford; Barton Cooke Hirst, M.D., Philadelphia; G. Victor Janver, M.D., Philadelphia; Lawrence Litchfield, M.D., Pittsburgh; Mrs. Horatio Gates Lloyd, Haverford; John E. Livingood, M.D., Reading; Baldwin H. Lucke, M.D., Philadelphia; Rev. J. Archibald MacCallum, D.D., Philadelphia; Huester H. Muhlenberg, M.D., Reading; J. Prentice Murphy, Wayne, Pa., Mr. and Mrs. Allen S. Olmsted, 2d, Rose Valley; Henry K. Pancoast, M.D., Philadelphia; Anna M. W. Pennypacker, Philadelphia; George Earle Raiguel, Philadelphia; Florence H. Richards, M.D., Philadelphia; Homer J. Rhode, M.D., Reading; Mrs. Louis N. Robinson, Swarthmore; Isaac M. Rubenow, M.D., Philadelphia; Mrs. Jay Schamberg, Philadelphia; George A. Sloan, M.D., Narberth; Frances R. Sprague, M.D., Philadelphia; Alfred Stengel, M.D., LL.D., Philadelphia; Mr. and Mrs. Arthur H. Thomas, Haverford; Mrs. Marmaduke Tilden, Jr., Jenkintown; Norris W. Vaux, M.D., Philadelphia; David Wallerstein, Philadelphia; S. Burns Weston, Philadelphia; Mary Winsor, Haverford; Mrs. Pope Yeatman, Chestnut Hill.

When the Review went to press the bill had not been reported.

Texas

During February, Mrs. Anne Kennedy was in Dallas where she spoke before The Central Labor Council of Dallas, Executives and Chairmen of the Woman's Forum, Executives and members of the Council of Jewish Women, Executives and members of the Y W C A, The Business and Professional Women's Club, the Legislative Committee of the Woman's Club and before a general meeting sponsored and held in the Y W C A.

England

All through the winter and early spring a vigorous controversy over Birth Control has been carried on in the English and Scotch newspapers, and at frequent intervals men, well known in various walks of English life, have lectured on the subject. British Rotarians have taken it up. They secured Professor J. Arthur Thomson to lecture to them on it at Aberdeen and Sir John Ramsay, in Bayswater, Julian Huxley recommended Birth Control as practical Eugenics in a lecture before the British Science Guild, and Lord Riddell presented the subject at a public health meeting in Norwich.

The London Spectator printed a long series of articles on Birth Control by F. A. Mackenzie, who is perhaps best known here as former editor of the weekly edition of the London Times. Mr. Mackenzie was vitriolic but on the whole sympathetic. In a Labor paper, Lansbury's Weekly, Gilbert Chesterton and Mrs. Bertrand Russell faced each other, Gilbert Chesterton carrying off the honors for wit and casuistry, and Mrs. Russell for humanitarian feeling for women and for general good sense.

In other London papers, Dean Inge and Bernard Shaw and Earl Russell have contributed their share to the Birth Control cause. In Health and Strength, Dr. T. Bowen Partington made a strong plea for consideration for the wife and mother and even the opponents who appear in print usually manage to give an impetus to the movement.

There has also been a very practical advance made, in the opening of a new Clinic at Birmingham, and the strengthening financially of the Southampton Clinic, which had been in difficulties for lack of funds.

Side by side with this active movement, and probably partly due to it, there has been a very remarkable fall in the British birthrate which for 1926 was 17.8 per 1,000 of the population. This compares with 35 per 1,000 some thirty years ago and, even in 1910, 25 per 1,000. There is however no reason for Great Britain to fear depopulation, as the surplus of births over deaths, even at this low birthrate, was in 1926, 241,000 or nearly a quarter of a million.

The ideal family is as many children as the mother wants, and can take care of, and every mother should be allowed to decide for herself, how many.

—Arthur Brisbane in San Francisco Examiner.
Book Reviews

The Beginning and End of Marriage

THE OUTLINE OF MARRIAGE, by Floyd Dell The American Birth Control League 25 cents

As might be expected, an "Outline of Marriage," published by a society for the propaganda of Birth Control, makes its first and best point in connection with the extra-reproductive as well as the reproductive uses of marriage. As could also be anticipated, an "Outline of Marriage" by Floyd Dell is cleverly written, and written with all Mr. Dell's known capacity for posing his problem in its most effective perspective for his own generation. Having produced an average member of that generation to state the immediate case for marriage, Mr. Dell proceeds to evoke witnesses such as the biologist, the biochemist, and others to elucidate the origin and evolution of what is generally known as the sex impulse.

What the author sets out to do, and succeeds in doing simply and convincingly, is to rid that impulse of its gathered overtones of propriety and traditionalism, and to restate it in that impersonal light in which all biologic impulses must be stated before they can be effectively used as guides to behavior. Mr. Dell makes so excellent a case for the reproductive instinct in primary life forms, and for its relation to what later can be described as "sex-behavior," that it would be an esteemed service to our time if he could be persuaded to put the first part of his thesis into permanent shape, somewhat extended for the sake of those who need what he has to say and who cannot yet take it in the concentrated scientific form of many of his arguments.

But no sooner has Mr. Dell arrived at the insect stage of life and reproductive evolution than he jumps a little matter of twenty million years or so to the Borneo boy, from which point he proceeds without once returning on his track to cover the missing interval. And yet it is within this overlooked period that the most significant features of our human sexual life took their rise. Here began the specialization of sex-behavior as the species mark, and the whole scale of psychological reactions which are differentiated under the general term "love" and its by-product, jealousy. At no point does Mr. Dell attempt to describe the species-sex-behavior for homo sapiens, nor to locate its point of departure from that of mammalia. Nor can one accept his anthropologist as an entirely competent witness to the tribal phase of the evolution of marriage. He is not even an up-to-date anthropologist, and he accepts too many of Mr. Dell's own prepossessions about the part played by psychology in the evolution of marriage custom.

Mr. Dell's anthropologist accepts Freud's "Totem and Taboo" at fourth hand, for Dr. Freud himself collected it at second and third hand from books some of which have been superseded and practically all of which were compiled from anthropological data collected before any of our modern psychological science had been applied to such study. It is, in fact, only since Freud's "Totem and Taboo" appeared that any really revealing and sociologically reliable study of totemism has been made. Much the same sort of thing can be said of Westermarck's work on human marriage. Monumental for its time, it must be borne in mind that since Westermarck's time the tremendous bulk of data drawn from intensive studies of the American tribes has profoundly altered many of our anthropological concepts in regard to the origin of human institutions. Another item overlooked by the anthropologist who assists Mr. Dell's "Outline" is that practically all of the available data have been collected by men, and that nowhere is there to be found a scientifically compiled Women's Lore of Love which goes further back than the Ghost of Queen Elmor raised by Mr. Dell for his purpose. For the Greek ladles whom he cites had nothing to say publicly on the subject. The best item in this part of the "Outline" is the delineation of the part played in modern marriage by the historic enslavement of women.

If one feels, then, that the second half of Mr. Dell's "Outline" is a little thin—I have just explained that there isn't any middle—it can scarcely be called Mr. Dell's fault. Very much work remains to be done covering the interval between the specialization of mating habits as a species mark—or should one say, near-mark?—and the modern situation before anything like a considered outline can be offered. Mr. Dell has neatly, and one suspects correctly, closed his sketch of marriage on the modern triumph over the reproductive instinct by the discovery of Birth Control. The contraceptive device is probably the weapon with which the human race will free itself from the nearly inexpressible pressure of instincts that have outlived their biologic function. But it by no means closes the adventure of mating, nor does it cover more than a small arc of the range of problems both social and personal which spring in the nature of things from the married relation. Nevertheless, Mr. Dell's pamphlet takes us competently over the first stage of the evolutionary process, and evokes confident anticipation of a final and structurally sustained complete outline.

Mary Austin

A Review reprinted from the N Y Nation
THE STORY OF PHILOSOPHY, by Will Durant, Ph D
Simon and Schuster, New York

O F THE making of outlines there is no end, and no limit to the telling of stories. We have outlines now and stories of history and of literature, of art and of science, of humor and of poetry, and even the Bible has been outlined for us. There soon will be a need indeed, for an “Outline of Outlines” and a “Story of Stories”.

The popularity of the outline is readily explicable. We live in an age of speed and concentration. Our life today is intensive rather than extensive. We have time only for the high-ways and the head-lines. We lack the leisure or the desire to linger at any one spot, and have no passion for venturing into the side-alleys and less-known passages. Our food, whether for the body or for the mind, must first be prepared and concentrated for us. We prefer the appetizers and desserts, leaving the main course for one whose appetite there is nothing great in his eyes.”

Because the outline is a product of our time, Dr. Durant’s “Outline” has the quality of being a perfect example of an outline. With its lucid exposition, its sparkling wit and stimulating fashion, it becomes a most palatable and potent mental tonic.

“The ideal man,” says Aristotle, “is never fired with admiration, since there is nothing great in his eyes.” Even at the risk of losing the opportunity of becoming the ideal man, one cannot but grow enthusiastic over Dr. Durant’s book. It is an exceedingly fine “Story,” a story not only of philosophy but of the philosophers as well. Interweaving the history of the lives of the major philosophers with an analysis of their thoughts, the author frames the philosophies of the centuries in a vivid setting of biographical description.

Dr. Durant does not attempt to include all philosophies and all philosophers in his volume. Rather he selects those whom he considers the major philosophers of the ages, and devotes ample space to each one of these. His selections are always well made, and what the book may suffer from lack of comprehensiveness, it gains in the clarity and completeness of the masters discussed.

On reading this connected story of the progress of human thought, it is particularly interesting to note that most of the social and moral problems with which mankind is grappling to-day are neither new nor modern, but have occupied the minds of philosophers for many centuries. The problems of war and peace, of aristocracy and democracy, of political freedom and economic emancipation, of population, eugenics and even Birth Control were dealt with by Aristotle and Plato, by Bacon and Spinoza, by Kant and by Nietzsche as well as by contemporary philosophers.

Aside from the social problems, the main ideas of the major philosophers are clearly interpreted and analyzed in the “Story.” Those who have had or still have occasion to grope through the many obscure passages of philosophic thought, who have to struggle with the “Entelechy” of Aristotle or the “Substance” of Spinoza, with the “Pure Reason” of Kant or the “Will” of Schopenhauer, with the “Superman” of Nietzsche or the “Elan Vital” of Bergson will find in the present volume most illuminating and stimulating aid. The seasoned philosopher will glean from its pages a refreshing review of the subject, while the beginner will find its sparkling wit and lucid exposition an invaluable aid to the appreciation and understanding of the history of human thought.

“Life” says Schopenhauer, “swings like a pendulum backward and forward between pain and ennui,” adding, that we are scourged by pain or want on week-days and by ennui on Sundays. On reading the “Story of Philosophy” one feels certain that we can at least free ourselves from the scourge of ennui. We need only devote our leisure to the reading of Schopenhauer himself or of any of the other great philosophers who are brought to earth and to life in this volume.

Abraham Stone, M.D.
"Licht, mehr Licht!"

Editorial From Jewish Social Service Quarterly

It is our hope that the articles will not appear offensive to anyone. They are written in the most dignified tone, with due regard to literary usages and to the exactions of Federal laws. Words are, after all, peculiar things. The same object or action or idea may frequently be expressed in words of literary quality and words of the gutter. Though both forms of expression may mean exactly the same thing, one is tolerated and the other may create a definite moral revulsion.

It is an interesting psychoanalytic problem why this is so. Probably the true explanation lies in the association of any particular word with the people who commonly use it. Nor are those distinctions particularly fixed for any length of time. Some of us who have completed a half century run may still remember when the very word "sex" called an unbought blush to the cheeks of modest maidens. Fancy a reaction like this, even if it were physiologically possible, in 1926! In the future museum of the history of culture and civilization, a special case should be provided for a copy of Martin's "Human Body," a college text book on physiology very popular in the nineties, of which a special edition appeared for women's colleges, with the whole chapter on Reproduction excluded. As far as the college education of these young women is concerned, there really was no such thing as reproduction. Perhaps the flapper of 1920 was a reaction and a protest against the psychology of their mothers brought up on such a theory.

To the readers of the Quarterly scattered throughout the country, the discussion will convey a most interesting though perhaps obvious conclusion. What is absolutely prohibited in Pennsylvania, and not only prohibited but considered something indecent and lascivious, is permitted in New York under severe restrictions and quite permissible in Illinois. And above all the states, there stands the Federal jurisdiction approaching the Pennsylvanian idea.

If legislation is a formal expression of the mores, whose mores are we supposed to live up to? Would anyone assert that the mores in Chicago are so much worse than in New York? And the mores in Philadelphia so much better? Will someone page General Butler?

Whatever our personal viewpoint, Birth Control is one issue not to be easily disregarded. One glance at the membership of the National Council of the American Birth Control League should be sufficiently convincing, at least as to its eminently respectable. It includes some of the best known biologists, sociologists, statisticians, physicians, economists, literateurs, bishops, rabbis and social workers. We cannot avoid discussing it. We want all the information which can be brought together. In the words of immortal Goethe, (or was it Heine, or some equally immoral person?) we want more light.

Periodical Notes

American Medicine (New York)—In a recent number, this broadest of American medical reviews, has an editorial on the declining birth rate of most civilized countries. It points out that a civilization has never been saved by large families, nor has it been destroyed by small ones, and that a small birth rate means high standard of living and high intelligence. Of the United States, statistics show that North Carolina has the highest birth rate, and "American Medicine" asks cogently what outstanding contribution this State of low living standards for poor white and negro, has made to American culture.

Journal of Social Hygiene (New York)—Hornell Hart and Wilmer Shield's conclusions as to the ideal age for marriage, which we quoted in the March Birth Control Review, (page 94), are challenged by Paul Popeneoe in the December Journal. He is answered by Dr. Hart in January, who points out that Dr. Popeneoe's main criticism is based on incomplete analysis of the two pieces of research on which he places his reliance and which, fully analyzed, support the rather high age limits for happy marriage suggested by the Hart and Shields study.

Red Book Magazine (Chicago)—In its last six numbers, this magazine has been publishing a series of articles by Judge Lindsey on the "Moral Revolt." He describes the travail of middle age which has since the Great War seen the foundations of its old moral standards shaken. The series is a story not of the throwing over of old moral standards, but the painful struggle between old and new ideals. Judge Lindsey counts among the responsible causes of unhappiness in marriage, "poverty—plus too many children" or, "poverty alone" he goes on "does not necessarily make trouble in marriage, for a husband and wife, free from incumbrances, can, if need be, both work, and so be self-supporting. This is an excellent solution, particularly in the case of young couples who need and want each other, and who are not financially able to afford marriage on the usual basis. But when children come in such marriages, the poverty which, prior to their coming, was merely an inconvenience which youth puts up with light-heartedly, often becomes a tragedy."

Journal of Social Hygiene (New York)—In its February number, C. E. Stiles gives a resume of the discussion of problems of sex at the World's Young Men's Christian Association Conference at Helsingfors, Finland, last August. The discussion appears to have touched rather aimlessly upon a multitude of aspects of the subject and to have come to no conclusion except that sex instruction was perhaps desirable for adolescents. There was some discussion of Birth Control, but in respect to this as to all other subjects it is impossible to tell from the resume what was the consensus of opinion.

*The articles are by Morris Waldman and Harry Lurie (see page 109)
April, 1927

"The Christian Century," (Chicago), an early fall number has made a study of the Passaic Strike. Many minds on both sides of the struggle have contributed to this study. The evidence shows that the living conditions of the workers are deplorable and that women are driven to night work in order to supplement the wages of their husbands. Miss De Lima tells us that the average family is rare in Passaic. Of the workers visited more than half had more than three children, seven and eight children were not uncommon in families who lived in two or three dark, badly ventilated rooms.

_Eugenic News_ (N Y.), for December makes Havelock Ellis the subject of its regular monthly leading article on heredity. The study is sadly disappointing. It makes the barest reference to heredity and in its analysis of the work and character of the man himself it is at once cheap and superficial, opined and didactic.

_Social Service_ (February)—"This organ of the Chicago Council of Social Agencies tells us that an item of $3,500,000 a year, as the cost of the ten-per-cent of Chicago children who have to repeat their grades each year to be put to the account the subnormal, the extra cost of whose education has to be borne by the taxpayers.

**Books Received**


*The Mother and the Unborn Child,* by Samuel Raynor Meaker. Williams and Wilkins Company, Baltimore $2.50


*Sex and the Love-Life,* by William J. Fielding. Dodd, Mead & Company, New York $2.75


WORK OF CHILDREN ON ILLINOIS FARMS, by Dorothy Williams and Mary E. Skinner, Children's Bureau, Washington, D. C.


THE ESCAPE FROM THE PRIMITIVE, by Horace Carnes, M.D. with a preface by Smith Ely Joffre, M.D. Charles Scribner's Sons, New York $2.50

THE SCIENCE OF SOCIETY, by W. G. Sumner and A. G. Keller. Yale University Press, New Haven, Conn $4.00

HOW I CAME TO BE, by Armenouhi T. Lamson. The Macmillan Company, New York $1.75

SOCIAL ADJUSTMENT, by Robert Cloutman Dexter, Ph. D. Alfred A. Knopf, New York

**Two States Favor Sterilization**

INDIANA GOVERNOR SIGNS BILL

INDIANAPOLIS, March 11 (A P)—A Eugene Sterilization bill, enactment of which has been sought by social welfare agencies for two decades, became law today when Gov. Jackson affixed his signature to the measure.

Its application is restricted to mentally unfit persons in insane hospitals for whom physicians at the institutions see no hope at all of recovery. Surgical operations contemplated in the measure would be performed by the medical staffs at the institutions at State expense.

—_N Y World_

VERMONT SENATE FAVORS STERILIZATION

Montpelier, Vt., March 16—(UP)—A bill providing for eugenic sterilization has passed the Vermont senate, 21 to 0. The bill would allow sterilization in the case of feeble-minded persons, with the consent of the subject.

—_N Y Times_

**A Few Medical Facts About Birth Control**

**I. The Need for a Birth Control League**

_THERE_ never was a time when there were as many movements and organizations for the bettering of human conditions Anti-Tuberculosis, Safety First, Child Welfare, Cancer Prevention, No More War and other conventional campaigns have been popularly supported. The need for Birth Control has not until recent years been as well understood as some of these other movements. In order to understand it, let us compare it with a very popular and obvious campaign, namely the abolition of War.

The popularity of this movement is based upon the needless sacrifice of human life. Since the signing of the armistice of the World War, nearly 250,000 women have died in the United States from childbirth. Infinitely more women have died in childbirth than men have died in War—and the chances are much greater today that the average woman will die in childbirth than the average man will die upon the battlefield. It may be stated that war is avoidable, but childbirth is necessary for the continuance of the race. But according to the best authorities most of the deaths from childbirth are preventable.

Among the more obvious causes of death are tuberculosis, heart, kidney and other general conditions, which so reduce the resistance and vitality of a woman that she cannot undertake the added strain of maternity with-
out serious danger of life and health. If these women were protected from maternity, the death rate would be heavily cut down. Nor is this annual maternal mortality of 25,000 American mothers the whole story. Hundreds of thousands of broken-down women are being treated in dispensaries, hospitals and in private practice who are in their present condition because of indiscriminate and un-intelligent childbearing. It has been estimated by a high authority that half a million women a year are made sufferers from the sequela of childbirth. Only when this most essential and beautiful human function becomes a matter of intelligent regulation will this terrific maternal mortality and morbidity be reduced. Can there be any more worthy cause than a movement to make motherhood voluntary, safe and intelligent?

II The Increase of the Diseases of Middle Life

For the last generation we have been reversing the old law of nature, the survival of the fittest, and instead of allowing weaknesses to die off as a result of exposure to trying conditions, we have been taking these infants, putting them in incubators, scientifically feeding and caring for them and in many ways saving thousands of children, who in more heroic days perished.

The increase in late years of cancer, diabetes, heart and kidney troubles and other diseases of middle life have brought up the question as to the relation between morbidity in middle age and the saving of weakly babies. Whether there is any relation or not, it must be obvious that the saving of weak and sickly girl babies makes it increasingly important and necessary to give women who have not an abundance of vitality more care and protection when they reach the childbearing period.

III The Tension of Modern Life Causes More Mental Defects

There is no doubt that the complicated character and the confusion of modern life make greater demands on the mental and nervous system than at any previous time. There has not been a corresponding increase in vitality and stamina, in fact, it sometimes seems as if the opposite were true. Insanity and feeble-mindedness seem to be increasing about three times as fast as the normal population. All our State institutions throughout the country for the care of mental defectives are crowded to capacity and can only care for a small number of those who need care. This is another reason why motherhood should be undertaken with prudence, forethought and discretion.

IV Birth Control is Needed to Prevent Abortion

Most of those present know that Birth Control is not abortion. The alarming increase in self-induced abortions among married women in this country is a cause of great concern to all medical men. In the final analysis this practice represents a revolt against an unwanted pregnancy. How much better to place in the hands of these distracted women the means of preventing pregnancy so they will not be driven into practice which is repulsive to all the finer feelings of humanity as well as being a severe threat to the health and life of the mother.

Birth Control or Contraception, as we speak of it medically, will prevent abortion.

V Birth Control Two-Sided

Birth Control is not merely limitation. Birth Control is the application of intelligence to the childbearing process: Control may mean more or less speed, a turn to the right or left as circumstances dictate. For instance, a well-mated pair, well endowed mentally and physically and who are financially able to raise a family and have domestic tastes and a desire for a large family may have 5, 10, or even more children. They will welcome them into a good home and give them a fine training and present to society a number of good citizens. Nobody can have anything but the greatest of admiration for such a family and there is nothing in their program which is against Birth Control, as a matter of fact many of our group are in exactly this position. They love children, they have them when they want them and can best care for them. This is intelligent parenthood and that is what Birth Control means.

On the other hand there are some couples who are abnormal in mind or body or both, who have an inadequate income and are living under atrocious conditions. These people do not want children. What good purpose can be served by compelling them to live in ignorance and forcing them into indiscriminate breeding?

How absurd then, for anyone to say "I advocate large families" or "I advocate small families" without any qualifying statements. In one case a large family is a splendid contribution to society, in others, it is tragedy, whose unhappy victims force unwillingly and unintentionally upon society one of its greatest problems — dependency and care of the socially inadequate.

VI Clauses

In order to make this program effective, the American Birth Control League conducts a Research Department which is seeking to develop safe and simple methods. I have lectured about this work and put the best methods before medical societies in nearly every state in the union during the past two years. The medical profession are more interested than ever in this problem and the Section on Gynecology Obstetrics and Abdominal Surgery of the American Medical Association, at their annual meeting in Atlantic City, 1925, passed the following resolution:

"Resolved that this Section hereby recommend the alteration of existing laws wherever necessary so that physicians may legally give contraceptive information to their patients in the regular course of their practice."
embodied in physical passion and love itself is repudiated when it is denied full expression. Sex among human beings is a creative instinct, but the children of love appear not in the flesh alone, but in art, music, science and altruistic effort. To demand sexual abstinence or "self control" between married people, save when children are desired, is to brand the marriage relationship as something unclean, demanding ulterior justification.

As a means toward improving the race stock through the elimination of the unfit, Birth Control offers incalculable benefits. Those who believe in this movement should not be content merely to endorse it. Faith without works is dead. The program demands workers, members and money.

It is hoped that from this meeting great gains may come both to the Pennsylvania League and to the National Movement.

BIRTH CONTROL—A LABOR VIEWPOINT

(Continued from page 106)

If this assumption is true, the way out is plain—Expert knowledge must be made available for the poor, as it is now for the rich. The fight for the repeal of laws which prohibit doctors from giving such information must be pushed zealously, untringly. We must make it possible for any worker and his wife to approach their doctor, without hypocrisy or shame, and seek advice on this, as on any other question of vital importance to them, and to receive at moderate expense the necessary drugs and articles. If it runs counter to the religious belief of anyone to do this, well and good—let each one decide for himself. The present laws make law-breakers out of the doctors and druggists who have courage enough to give help to those who need it, they force up the price for simple medical advice to a figure which appalls many of the workers, they surround the whole question with an atmosphere of distrust and suspicion which ought never to have arisen in connection with it. It is far too high a price to pay for the forced observance of a religious belief or a moral conviction which ought to command the willing loyalty of those who profess adherence to it.
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**THE OUTER OFFICE**

*(Continued from page 118)*

and on several occasions when she had gathered enough money, after weeks of saving, to make the trip for advice, he has found her little treasure and gone off to buy his drink. Sometimes before she could save up enough money again she was already pregnant, and the trip must be delayed. At forty, this woman feels that life is a burden too terrible for human endurance. But at last she has been able to come for help.

There is much coming and going in the Outer Office. Old patients return for renewal of prescriptions, or to consult the doctor on some difficulty. Here is a patient who after two years of deliberate waiting has just had the baby that she planned. We admire it and we with each other for its favor, while the mother is re-examined and advised by the physician inside.

During the session, which lasts about three hours, fifteen patients are often seen by the doctor, while others come in to make appointments or to bring friends. Doctors drop in to observe and to examine and advise patients under the supervision of the doctor in charge. Social workers, realizing that they cannot do constructive work in many cases without first securing that no more children will be born into the family—with its problem of disease or feeble-mindedness—come in to bring their clients. Most of the women have children whom they cannot leave to make the trip to the doctor. They bring them with them and a baby lies sleeping in the crib, and two little boys are playing in the little play-room, until their mothers have had their turns to see the doctor.

The stories heard in the Outer Office are often tragic ones. But to us they do not seem hopeless. They tell of human suffering and waste, but we can help them. We can give them what they ask for. The tragedy is that as yet we must wait until people are tubercular, until they suffer from heart or kidney trouble, or are hopelessly afflicted with illness. Some day we shall be able to give instruction in sex hygiene and Birth Control not only to the sick, but the women who need it for reasons quite as urgent in the conservation of life and family happiness.

The unfit and the unneeded! The miserable and despised and forgotten, dying in the social shambles. The progeny of prostitution—of the prostitution of men and women and children, of flesh and blood, and sparkles and spirit, in brief, the prostitution of labor. If this is the best that civilization can do for the human, then give us howling and naked savagery. Far better to be a people of the wilderness and desert, of the cave and the squatting place, than to be a people of the machine and the Abyss.

—From *The People of the Abyss*, by Jack London
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