Education for Marriage
By Meyer E. Nimkoff

Is Birth Control Legal?
By George Packard

The Cincinnati Clinic
A Test Case

Book Reviews by:
MARGARET SANGER
J. A. MacCALLUM

LESLIE A. WHITE
MIRIAM KEELER
CONTENTS

EDITORIAL 243

EDUCATION FOR MARRIAGE By Meyer E. Nemkoff 245

IS BIRTH CONTROL LEGAL? By George Packard 248

THE CINCINNATI CLINIC ON MATERNAL HEALTH Report by Alice C. Boughton 251

THE PRINCIPLES OF BIRTH CONTROL By Baldwin Anciaux 253

A TEST CASE By George Bedborough 255

MARRIAGE—NEW STYLE By Francis C. Uridge 256

POPULATION SECTION THE BALANCE OF BIRTHS AND DEATHS A Review, by Guy Irving Burch 258

BOOK REVIEWS By Margaret Sanger, Leslie A. White, J. A. Mac Callum, Joe Gould, Miriam Keeler 261

NEWS NOTES 265

IN THE MAGAZINES 268

LETTERS FROM READERS—Miners' Wives Need Birth Control Biological Contraception, etc 270
Editorial

A legal battle of great importance in the fight for birth control freedom was won on July 16th when Judge John M Woolsey ruled that Marie Stopes' book *Contraception* did not come within the proscription of the Tariff Act of 1930, and adjudged the book legal for entry into the United States. Judge Woolsey's opinion, handed down in the United States District Court, Southern District of New York concludes:

It is a scientific book written with obvious seriousness and with great decency, and it gives information to the medical profession regarding the operation of birth control clinics and the instruction necessary to be given at such clinics to women who resort thereto. It tells of the devices, used now and in the past, to prevent contraception, and expresses opinions as to those which are preferable from the point of view of efficiency and of the health of the user.

Such a book, although it may run counter to the views of many persons who disagree entirely with the theory underlying birth control, certainly does not fall within the test of obscenity or immorality laid down by me in the case of United States vs One obscene book entitled "Married Love," 48 F (2d) 821 at 824, for the reading of it would not stir the sex impulses of any person with a normal mind.

Actually the emotions aroused by the book are merely feelings of sympathy and pity, evoked by the many instances in it of the sufferings of married women due to ignorance of its teachings. This, I believe, will be the inevitable effect of reading it on all persons of sensibility unless by their prejudices the information it contains is tabooed.

The decision is characterized by Alexander Lindey, who argued the case before Judge Woolsey, as "a signal victory of far-reaching importance. It was always assumed under the previous Tariff Act, and it has been assumed under the new Tariff Act of 1930, that the Customs ban covered not only contraceptive articles such as drugs, medicines, mechanical and chemical contrivances, but also contraceptive information. We have always scouted this theory and it has now been judicially exploded. Under this ruling of Judge Woolsey, contraceptive information can be freely imported, and although it may not be circulated through the mails under the Postal Law, it may be circulated through other channels."

Every wise interpretation of law, every liberal ruling breaks another link in the legal chain which binds birth control. Any discussion of the laws on the subject must take this into consideration. We print in this issue Mr George Packard's analysis of the legal situation, and his answer to the question *Is Birth Control Legal?* He advises birth control workers to permit restrictive laws to die by nullification, and to put their efforts into the education of the public. Margaret Sanger, whose activities during the last few years have been largely directed toward securing an amendment "of Federal laws which obstruct the administration of State laws relating to birth control," has commented on Mr Packard's point of view, at our request. She writes: "This is an interesting article but not one that need disturb anyone trying to secure legislative action. Mr Packard fails to recognize the tremendous educational advantage that there is in trying to change legislation. While he claims that it is useless to try to change the laws he also acknowledges that the Churches have already had to change their point of view since the beginning of (the birth control) campaign in 1914."

All roads lead to the same goal—legislative work, which may or may not change laws, but which inevitably brings the subject out into the open, and educates the general public, educational work of all kinds—lectures, meetings, pamphlets, articles, the Review—all that falls into the two categories of the spoken word and the printed word, the founding and development of clinics. Dr Alice C. Boughton's report on
the work of the Cincinnati Clinic on Maternal Health, given in this issue, is inspiring reading. A clinic sponsored by the local Academy of Medicine, operating in the city’s largest General Hospital, serving, as the statistical data shows, the class of people who are most in need of birth control, is a model which may well be copied by other communities.

We may look forward to the ultimate development of the birth control clinic into a centre of wider scope, where psychological as well as physical difficulties will be handled, where help in solving marriage problems and education for marriage will be given by experts. When law, religion and social work accept birth control, when contraceptive information is available for all who need it, then we shall be ready to coordinate our knowledge, and establish centres which can truly serve the community in a constructive way. Tentative steps have already been taken in this direction.

The August 12th issue of The Commonweal, a well-edited Catholic weekly, discusses the declining birth rate among Catholics. Figuring on a ten-year basis, statistics show an increase in the Catholic population of slightly under 15 per cent. This is about twice as high as the national increase, but some 40 per cent under the Catholic average of twenty years ago. “The children and grandchildren of Catholic immigrants in general do not seem to have a higher number of births than the average American family,” the writer continues. “This is not due to birth control, but to late marriages and the practice of avoiding sexual relations during certain periods.” Granting the truth of this statement, are these better methods of keeping down the birth rate than contraception? Or are Catholics practicing nullification?

Remember that the Central Conference of American Rabbis, the more liberal Jewish Group, has adopted resolutions favoring birth control as a method of “coping with social problems” at three successive annual conventions. It is not too sweeping a statement to say that, with the exception of the Catholic Church, the religious organizations of America are slowly falling into line. Approval, discussion and study are merely questions of degree. The churches no longer ignore the issue. They know that birth control is here to stay.

Delegates from eight Southern States will consider “how to bring prosperity back,” when the Southern Trade Conference meets in Charleston, South Carolina, from September 22nd to 25th. A spectacular indicator of the long road from the rebel beginnings of the birth control movement in 1914 to its accepted position today may be seen in the invitation extended to the American Birth Control League by this Conference. Mrs. F. Robertson Jones, President, will tell the assembled Southerners what birth control offers as a means of hastening the return of prosperity, and bettering conditions in the south.

Facts Worth Remembering

I

There are eighty-one centers in the United States where contraceptive instruction is given. Some function independently, others are adjuncts of hospitals or dispensaries. All are manned by qualified physicians.
TWO paradoxical aspects of the present marriage state seem especially pertinent to the program of education for marriage: an astounding degree of failure in marriage, and an undiminished enthusiasm for married life.

First, with respect to the failure of persons to achieve happiness in marriage, it is appropriate to inquire how extensive this failure may be. It has been customary to employ as a gauge the divorce rate, that is the ratio existing between the number of divorces granted and the number of marriages contracted in a given year. For 1926 this was 1 in 7. This, however, is a useless index, since the divorces granted in a given year do not represent the marriages of that year only, but rather marriages entered into at varying times in the past. A more reliable index is supplied by the "probability of divorce" rate. Utilizing this index, Professor W. F. Ogburn1 concludes that "the chance of 1 divorce out of 6 or 7 marriages is not sufficiently great if the divorce rate continues to increase. If divorce should continue to increase in the next generation or so as it has in the past, then the chance of a 1926 marriage ending in divorce might possibly be as high, indeed, as 1 in 5, for the United States as a whole." In view of this estimate for 1926, and of the fact that the divorce rate has mounted significantly since then, we shall be altogether conservative in our conception if we regard 1 marriage in 5, or 20% of all marriages, as doomed to disorganization.

Divorce, however, is but one of the indications of family failure, albeit the most objective. Can we estimate, besides, the number of married persons who do not separate in this manner, or by desertion, but who continue to live together in what, after Malthus, we might call "a state of misery"? This index, which may be termed the discord rate, if obtainable, would provide us with a more accurate picture of the situation. Fortunately, several studies have been completed along this line which, though not as extensive as we should like, nevertheless furnish considerable insight into the problem. I shall refer only to Dr. G. V. Hamilton's study 'A Research in Marriage,' since the findings of the other researches simply bear out his conclusions. Of the wives reached by his study, 55% declared they were unsuccessfully married, and 49% of the men attested to the same fact. Two other choices of declaration were open to them. They might signify that their marriages were either "successful without reservations" or "successful with reservations." It would therefore seem that the above percentage represent the amount of thorough-going dissatisfaction with marriage found by Hamilton. On the basis of evidence of this kind, may we hazard the statement that one out of every three couples regard their marriage as unsatisfactory. The exact ratio is a problem in precision for the statistician, but exactness aside, there can be no question as to the overwhelming number of discordant marriages which confront us.

The second aspect that modern marriage wears is singularly opposed to the one we have just examined. Marriage is still popular. Perhaps it is even more popular now than ever, a number of indications point that way. Consider the attitudes of those about to marry, those who have married poorly, and those who fail to marry and they all suggest a strong faith in marriage. For example, "there were more married persons in the United States in proportion to the population in 1920 than at any previous decade of which we have a record." In 1928, 1,182,497 marriages were contracted, in 1929, 1,232,559—a marked increase of 4.2%. Evidence of this kind indicates that marriage is still highly attractive to young people. According to the theory of modern psychology, this should not be the case, however. These young people should be reluctant to marry, since they (that is, one-third of them), have come out of homes marred by failure, and modern psychology makes a great deal of the influence of the home upon the

1 Address at a meeting of the Pacific Sociological Society, April 25, 1931, Los Angeles, California.


attitudes of children toward marriage. Apparently, if young people are dismayed by the example of their elders in this regard, they have a peculiar way of showing it.

Not only does marriage still appeal to young people, but it appears to keep its attraction even for those whose experience with it is one of failure. The figures are not altogether reliable here, but suggest that more than half of those who secure a divorce do remarry. In this connection, too, Dr. Hamilton's study was most revealing. It will be recalled that approximately 50% of his subjects testified to an unhappy marriage. This question was then put to them, "If you could get unmarried as easily as you could turn out that light, would you press the button?" Only 30% of this group replied in the affirmative. Again, Dr. Katherine B. Davis put some such question as this to a group of women, 40 years of age and above and graduates of Vassar College, who had never married. "If you were still to meet the right man, would you wish to marry?" Eighty-two per cent replied in the affirmative.

Faith in Marriage Persists

What, then, is the present situation with respect to marriage? What do these facts indicate? I take it they show, on the one hand, a deep desire for happiness in marriage, and on the other hand, altogether too often, abysmal failure to achieve it. But even this failure has not led to dissatisfaction with marriage itself. In a word, the feeling seems to be that marriage is capable of providing full and harmonious self-realization. This faith that men and women show should be an active challenge to all who are interested in promoting human happiness. But how may they be helped?

Possibly we may derive valuable suggestions for achieving happiness in marriage from the experience of those who have achieved success in that relationship. If we adopt this hope and turn inquiringly to the several studies along this line that are available, what do they reveal to us? Foremost, this fact asserts itself,—that successful marriage is distinguished from unsuccessful marriage not by the number of problems or the kind of problems which married people need to face, but rather by the presence or absence of resources for dealing with the common problems at hand. The successful and the unsuccessful alike have problems. The resourceless people are overcome by their problems, the resourceful overcome them.

It would seem, then, that we must build up within men and women resources for meeting the demands of marriage, if a larger number are to be brought into the category of the successful. Knowledge, skills, techniques,—these are among the resources we can attempt to supply, and the process will be one of education.

In order to awaken a greater consciousness of this need for providing young men and young women with more adequate resources for marriage and family life, the Institute for Marriage and Family Guidance was organized a year ago in Los Angeles. It is devoting itself primarily to the prosecution of a program of preventive education. To be sure, it provides also clinical assistance for those already in difficulty, but its chief emphasis is prevention through education. To this end, the Institute has devoted itself to the working out of a course on Marriage Education,—the first effort in the United States to build up a systematic content in this field, to the writer's knowledge.

The Institute's program grows quite naturally out of the nature of marriage itself. Marriage is, first, a human relationship, and, second, a special kind of human relationship, different from all other forms of human association. A program of marriage education needs to be adjusted to both of these facts. To be married well, husband and wife must first of all be capable of ordinary social adjustment, and they must be equipped, besides, to meet the special claims of marriage.

An effective program of marriage education thus requires a sufficient survey of mental hygiene principles. Special attention needs to be given such matters as the common sources of friction in human relations, the psychology of likes and dislikes, and the processes of psychological tension. A simple example may help to illustrate this point: Mary and John are both young and recently married. There is a modern marriage, for both are at work full-time outside the home. In the morning, before they separate for the day, Mary commissions John to get at the market during his noon hour certain items of food that will contribute to the evening meal. John comes home that evening to find Mary already at work in the kitchen preparing dinner. But John has failed in—
his duty, and what was intended to give the dinner just the right touch is not at hand. Whereupon Mary discourses upon the fact that she must bear a double responsibility alone. In the course of her complaint she turns away from the gas stove for too long an interval and the dinner suffers. This offers John his opportunity and he takes it. Half an hour later they are both certain they ought never to have married each other, and they have removed themselves altogether in conversation from the kitchen and the present episode. The fact that relationships have a history is amply revealed, for each goes back into the past to secure additional fuel to add to his ire.

Now a working knowledge of personality would have caused John, for example, to act differently. If Mary showed special irritation over her forgetfulness, John—if he had insight—would reason somewhat after this fashion: “Mary has worked hard all day. She has, besides, the responsibility for getting dinner afterwards. Altogether this is too much strain for her. She is physically tired. Under the circumstances it is not strange that she should lose control of her tongue and temper. What she needs most is rest. Henceforth, when she comes home from work, I shall see to it that she lies down for half an hour.” Thus John, equipped with psychological insight, would seek to make an objective analysis of the tension, instead of carrying the conflict to its “logical extreme.”

After this fashion, we carry over into our work the consideration of such behavior mechanisms as projection, identification, compensation, introjection, transference, and ambivalence. Their chief distinction in our program is the special application we make of them to pre-marriage and marriage relations. There is, however, no need to present in detail here these mental hygiene aspects of our course of study, for they are familiar matter to modern educators.

The other phase of our program is new and relates specifically to the experiences and problems which are peculiar to marriage. This field is a large and complex one, and no single course can hope to encompass all of its ramifications. For the sake of expediency, it becomes necessary, therefore, to select such content as may be included within the limits of the standard university extent on course. We have chosen a group of topics to which we relate principles and techniques of behavior, based upon an analysis of source materials. Our treatment may be suggested best, perhaps, by indicating some of the major topics with which we deal. For example, in connection with the basic course on “Preparation for Marriage,” these are as follows: The Choice of a Mate, The Nature of Courtship, Problems of Courtship, The Engagement Period, The Wedding, The Honey-moon, Problems of the First Years of Marriage, The Economic Aspects of Marriage, Sex Adjustments in Marriage, and The Treatment of Marriage Discord.

It will be observed that the first topics follow the natural course assumed by the relationship between a man and a maid who have that unique affection for each other called “romantic love.” There is available, fortunately, a considerable body of case material on each of these topics, to which the members of the class are introduced. The real and concrete nature of this material causes it to take hold of the attention of young people and thus constitutes an effective teaching medium.

TRAINING NEEDED AND WANTED

Classes are instituted through various educational agencies, such as schools, churches, clubs, the YMCA and the YWCA, which means that we meet with groups already organized. Separate classes are conducted for young men and young women, the enrollment in each group being limited to 30 persons, in order to provide an atmosphere conducive to informal discussion and the putting of questions. If there are questions of a personal nature, they are submitted confidentially in writing and are then considered at a later meeting. In this way the work keeps close to the interests and needs of the members of the group.

To those class members having especially difficult personal problems the Institute extends consultation service. In addition to the Executive Staff, there are provided a group of affiliated experts in the fields of medicine, psychology, and law. The value of this case work to the client is greatly enhanced by his membership in the class, since he is receiving therefrom instruction in scientific approaches to difficulty. Thus we find in these clients intelligent allies in the solution of their own problems.

To be sure, our program is a beginning only. But it is high time something were begun along these lines. Young men and young women need such instruction and, what is more, want it. Fortunately, there are signs on the horizon that suggest this need will be met.
Is Birth Control Legal?

By GEORGE PACKARD

The laws on birth control are in most instances bentighted, illogical and absurd. But all is not lost on that account, even if amendments cannot be readily secured. The language of these laws, in the light of present day scientific knowledge, is irritating in the extreme to those who easily accept the emotional appeal. Still, I believe that the real cause of contraception, confined as it should be to medical supervision, is not seriously hampered by the laws in their present state. A time will come when even legislators will see the light, and I would counsel patience to those who are insistently but vainly wasting their efforts in trying to secure immediate legislative action. It cannot, in the face of certain obstacles, be secured. The efforts of all who desire to see such action should be directed at removing those obstacles.

There are two great intertwining human forces that destroy all hope of action in securing the amendments to existing birth control legislation—politics and the church. And when I say politics, I mean that species of personal politics that is based on the hope of reelection. If you are able to remove the pressure that shatters this hope, then you have reduced the obstacles to one, namely, the organized opposition of the church. Happily the mists are scattering here, sect after sect has announced its support of the principle of birth control. One church, however, stands against it obstinately. Its potent threats completely paralyze the legislative mind. The power of this organization, the most autocratic of all ecclesiastical vehicles, is not to be gainsaid. Until it yields to the pressure of intelligent public opinion in its own ranks, it is useless to hope for new legislation on this supposedly sacro-sanct subject.

It is the same difficulty, under the banner of a spurious moral issue, that blocks the attempts of the liberal-minded to bring about any change in our disrupting prohibition law. Here it is a different combination of organized religious enthusiasts that is able to make the legislative mind think that any change in this law would be fraught with grave political consequences to the legislators who dared to support it. Because a few weak people abuse the privilege of drink, the nation makes a potential criminal—not of the person who drinks, but of the manufacturer, transporter and seller of intoxicating beverages. So with contraceptive devices because there are some irresponsible people who would take advantage of an opportunity to obtain such devices to prevent the natural consequences of their illegal acts, all married women must continue to suffer (with the sanction and positive encouragement of one great church) and the over-population of the world must go merrily on.

This was the logic of the mind that induced Congress some sixty years ago to brand contraceptive devices as obscene. To that mind all sexual matters were obscene. Most of us feel differently about these things today—even legislators are with us, privately, although they publicly remain blind to the appeals of suffering motherhood, blind to the dawn of rational thinking, blind to the call of science, blind to the fact that most churches are yielding to the demands of eugenics and common-sense. Why? Because they see so plainly the opposition of a single large religious sect, boasting the most completely organized ecclesiastical domination in the world, and see political defeat for all who dare oppose its dogmas.

Physician's attitude must change.

When we come to examine birth control laws and their consequences, it is apparent that there is another factor that helps retard the issue—the timidity of some of the medical profession when they think there is some law that might interfere with what they know they ought to do. Without study or expert advice our law-abiding doctors assume that, because there are some laws that in some connections and for some purposes have classified contraceptive articles as "obscene," they should not recommend contraception to their patients or explain its use. They do not reflect that with just as much reason a pair of obstetrical forceps might be called "obscene." Then there are some doctors who do not believe in birth control at all—but that is another story. There must be a practically united front here for success.
I am not interested as to whether or not there should be free commerce in contraceptive articles, but I am keen on preserving to the medical profession the unfettered right to prescribe for its patients whatever seems necessary in a given situation. That is a right which it has always been the privilege of this profession to enjoy, and without which the practice of medicine would be a farce. I believe that any direct legislative interference with that right would be an abuse of police power, and an unconstitutional interference with liberty and property. Communications between physicians and patients in most states have always been treated as privileged, and neither may be compelled in a court of justice to reveal what transpires between them. I do not interpret any of the laws forbidding the giving of contraceptive information as subversive of this right.

LEGAL SITUATION ANALYZED

Let us look, briefly, at some of these laws as they stand today. For a great many years this country has suffered from the absurdly fallacious idea that in order to get rid of what is deemed by some to be an objectionable thing, there should be laws passed to prevent it, regardless of whether they can be enforced. They rely perhaps too much on one of our most precious heritages from the English, that we are a law-abiding people. But so great has become the mass production of laws in the last few years, that people are now beginning to reflect that a law that is not or cannot be enforced is a stench in the nostrils of human progress. Thinking people in constantly increasing numbers believe that there is all the difference in the world between evils that are essentially and by common consent deleterious to human society —such as murder, rape, robbery, and the like—and actions that are declared wrong by legislation, about which there may be a division of opinion. The old common law used to describe this difference as *mala in se* and *mala prohibita*. People are becoming more and more convinced that no law can be enforced or should exist that does not have behind it a practically united public sentiment, and are setting off against our traditional law-mindedness a steadily increasing emphasis on personal liberty.

The result is that law enforcement as such is getting badly shattered and confused. And the fault is not on the part of those who refuse to obey a law which is against their conscience, but lies at the door of those who insist on putting unenforceable laws upon the statute books. The old cry that a law is a law, and just for that reason must be blindly obeyed, has no place in the modern forward-looking, liberty-loving humanitarianism of present day life.

What is the underlying cause of the ridiculous legal situation in which the subject of contraception finds itself today? The difficulty began with an enthusiastic, fervid-minded fanatic some sixty years ago, who almost singlehanded turned to Congress for a law which would make criminal the use of the United States mails, and of express companies in Interstate Commerce, for the transmission of unquestionably obscene things such as indecent books, lewd pictures, and the like. No right-minded person can seriously object to such a law. But Anthony Comstock went further than this. He possessed the kind of mind and imagination, common enough in that day, that saw in sex something innately nasty and dangerous to morals. Articles to prevent conception had something to do with sex—and therefore could well be classed with things obscene. And they were so included in the law and there they remain to this day, and have furnished the model for legislation by various states for a like classification, in the passage of laws and ordinances under the police power for the repression of traffic in things obscene.

It must be remembered that so far as this Congressional law is concerned, it has no force except as applied to the three appropriate subjects over which the Federal Government (in the absence of Constitutional sanction such as was given in the matter of prohibition) has any power—the Post Office, the Tariff, and Interstate Commerce. So if you find your own state has been silent on the subject of traffic in contraceptive devices, you need have no fear that any act of yours in that connection will be called to account, unless you use the express companies or the mails. It does not even have the effect of establishing a public policy for any state. In Margaret Sanger's compilation of laws on the subject, *Laws Concerning Birth Control in the United States*, published by the Committee on Federal Legislation for Birth Control, I am surprised to find the inclusion as a Federal law of a very stringent provision against having in possession, manufacturing or advertising contraceptive material. This, of course, applies only to the District of Columbia, where Congress acts as a kind of Board of Aldermen, and enjoys an "ex-
exclusive jurisdiction." It has no application to any state.

The above mentioned pamphlet by Mrs. Sanger is the only attempt at a compilation of the state laws on the subject of birth control. One trouble with it is that it takes no heed of the various municipal ordinances, which, even in a state whose laws are silent on birth control, may have a most fettering effect if you are going to be squeamish about disobeying such enactments. You are not safe in that sense until you have examined and interpreted not only the state laws but the ordinances of the municipality in which you reside—for cities have police powers, as well as states. However, where a state, like Illinois where I live, has a statute against obscenity generally, and does not mention contraceptive devices, you are safe to go ahead. For no judge outside of a mad house would class modern scientific contraceptive devices as "obscene," in the absence of legislative fiat to the contrary. Mrs. Sanger says there are 23 states with the law as it is in Illinois. Yet in Chicago, there are city ordinances prohibiting the distribution of literature on this specific subject, of giving information in public places, or advertising it in any newspaper. This does not at all prohibit the giving of advice by physicians to patients in office, clinic, home or hospital. There are many similar ordinances all over the Union.

**EFFECT OF CHANGE IN FEDERAL LAW**

The elimination of the desired words from the Federal Comstock law would of course have no effect on ordinances such as these. It would have no effect on any state law. For the states alone are responsible for the creation and enforcement of state laws, and the Federal government is only concerned with the enforcement, within its own territorial or district jurisdiction, and with the use of the mails, the operation of interstate-commerce and tariff laws. The law as it stands does not place any serious limitation on a physician's right to give advice as to birth control and contraceptive methods. He could not give advice by mail, or send books or literature on the subject if he was caught. But that represents a relatively minuscule part of his possible activities in this field. It leaves unfettered his unquestioned right to advise his patients directly. And while it seems, in the light of modern science and modern thinking, and any humanitarian point of view, that the classing of contraceptive devices as obscene in any law, Federal or State, is silly and ridiculous, we must remember that it was a classification that was dictated in its origin by a moral purpose. Laws so born and so labeled have always been next to impossible to change. There is always some organized church group to fight it. The opposition in the present instance is confined, practically, to a single very powerful and magnificently disciplined church, but it is a very real opposition, and one that the eagle-eyed politician will always respect. Until that church can be persuaded to change its view—and there, in my judgment, should be the focal point of attack—all attempts to change this spuriously termed "moral" law will prove abortive.

The only hope, for the present, of getting rid of this or any other "blue law" is to let it fallow. Nullification, as Senator Borah calls it in a fiercely reproachful tone I could never quite understand, is the only way out. And we can always remember that the fear on the part of a reputable physician that by giving his patients medical advice on the subject of contraception violates his physical well-being he is violating some indefensibly ridiculous enactment, is more or less groundless as a practical proposition.

I note that Mrs. Sanger in her recapitulation of laws on birth control enumerates 31 states where physicians may legally give information on contraception. Without an extended personal examination of such laws, I see that she included Illinois, which, as I have shown is silent on the subject. So I infer she included all states in this category which do not specifically forbid the right of physicians to advise their patients. If that is so, I should include in this classification all the states of the union with the possible exception of Mississippi, which seems to forbid the giving of information orally by anyone. But I know what I should do, in any given case that needed such advice, if I were a physician in Mississippi.

Address your activities to a far-flung campaign of education against the absurdities of a dark-age conception of marital relations. Create a healthy demand for correct information, and a real understanding of what contraception means. The best teacher is the example that the clinics in New York, Chicago, and elsewhere, are offering daily to women of every race and creed, with great success. The relief so afforded permeates very far, and every patient becomes a real and ardent advocate of the cause of birth control.

(Continued on page 271)
The Cincinnati Clinic: A Report

The Cincinnati Clinic on Maternal Health which is held at the General Hospital is the only clinic of its kind in the world. It is operated by and under a committee of the Academy of Medicine of Cincinnati, assisted by a coordinating Citizens' Committee on Maternal Health. Its program follows that of the National Committee on Maternal Health as outlined by Dr. Robert Latou Dickinson in a address made before the Academy in April, 1929. The program has four main divisions:

A. The organization of a Contraceptive Clinic for
   1. Married women requiring postponement of pregnancy or prevention of childbirth in order to safeguard health, life, or sanity.
   2. Married couples who for adequate health reasons must postpone child bearing and who wish to space their offspring.

B. Sterilization without unsexing in its eugenic and therapeutic aspects, including
   1. Insane and feeble-minded patients who, if unable to procreate, might safely be allowed to return to homes and occupation and thus relieve the State of the cost of their care, and make room for many custodial cases now unprovided for.
   2. Men and women who socially normal themselves are likely to transmit serious mental or physical defects and who should therefore not reproduce but who should not have to remain unmarried on that account.
   3. Women with health conditions making pregnancy forever forbidden.

C. Diagnosis and treatment for sterile husbands and wives.

D. Preparation and examination for fitness for marriage and parenthood.

In the first year and a half, the chief work has been the operation of a contraceptive clinic at the General Hospital. The General Hospital was chosen because it is a public hospital, is the largest in the city, has a flourishing outpatient dispensary and is the teaching hospital for the Medical School.

The main this clinic serves the city's underprivileged.

The staff consists of a clinician-in-charge assisted by the resident obstetrician who gives her services for the sake of the experience, of a secretary-recorder, and of a nurse. During the organization period there was also a clinic director whose services will be needed until the mechanics of operation are on a firm basis. The Clinic is operated two afternoons a week in the Out Patient Dispensary, but it is under the direction of the Committee on Maternal Health of the Academy of Medicine and its policies are established by the Committee. It has its own budget, employs its own staff and its workers are not on the payroll of any outside organization.

The most important problem which confronted the Clinic was the determination of the basis upon which patients would be received. It was decided to accept patients referred by private physicians, by clergymen, by departments of the General Hospital or other hospitals, by the Out Patient Dispensary of the General Hospital or other hospitals, by accredited social, church, and health agencies.

An analysis of the first 500 cases may be of interest in answering the question 'are the birth control clinics reaching those most in need of help? There were 327 white and 173 colored patients.

56 per cent have more than four living children,
82 per cent have been married five years or over,
51 per cent have been married ten years or over,
The women who have attended the Clinic vary in age from 15 to 45, but 75 per cent are over 25 and 52 per cent are between the ages of 25 and 35.

At first glance it may seem questionable to give contraceptive advice to 52 per cent of the patients by the time they reach 35 but a study of the ages at which these women marry and begin to bear children reveals the reason. Three hundred and thirty-eight or two-thirds of the first 500 cases had one or more children by the time they were 21.

The breakdown follows:

1. Woman gave birth to a child at 13 years of age
   6 women "   "   "   "   "   "   "   " 14 "   "
   11 "   "   "   "   "   "   "   " 15 "   "
   35 "   "   "   "   "   "   "   " 16 "   "
   57 "   "   "   "   "   "   "   " 17 "   "
   62 "   "   "   "   "   "   "   " 18 "   "
   166 "   "   "   "   "   "   "   " between the age of 18 and 21
   162 "   "   "   "   "   "   "   " after the age of 21
Interviews with the individual women indicate that the compelling force which has brought them to the Clinic is a deep sense of responsibility. They have come not in order to evade obligations present or future but because each increase in the number of children means for them not only a lessened standard of living but in the majority of cases a genuine inability to meet what they conceive to be, according to their own standards, their obligations toward the children they now have. With incessant child-bearing and insufficient income, the woman's strength, vitality, and spirit are depleted to the point where she feels unable and is unable to cope with the situation. It is a nice question whether these women are more troubled by their inability to feed and clothe their children properly or by the breakdown in family morale when children get out of hand, play hookey and get into the kind of trouble which eventually leads to the Juvenile Court and the Reformatory.

This is no imaginary picture. While 44 per cent of the women who have visited the Clinic have less than four living children and are comparatively affluent since there is an income of $5.20 per capita per week for their families, the remaining 56 per cent have four or more living children and for them there is a weekly per capita income of but $2.11.

<table>
<thead>
<tr>
<th>Weekly Income</th>
<th>No of Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dependent upon Charity</td>
<td>120</td>
</tr>
<tr>
<td>Weekly income $10.00—$14.00</td>
<td>31</td>
</tr>
<tr>
<td>&quot; 15.00—19.00</td>
<td>95</td>
</tr>
<tr>
<td>&quot; 20.00—24.00</td>
<td>123</td>
</tr>
<tr>
<td>&quot; 25.00—29.00</td>
<td>70</td>
</tr>
<tr>
<td>&quot; 30.00—34.00</td>
<td>34</td>
</tr>
<tr>
<td>&quot; 35.00—39.00</td>
<td>11</td>
</tr>
<tr>
<td>&quot; 40.00—44.00</td>
<td>3</td>
</tr>
<tr>
<td>&quot; 45.00—49.00</td>
<td>3</td>
</tr>
<tr>
<td>&quot; unknown</td>
<td>10</td>
</tr>
</tbody>
</table>

A significant factor in connection with the question of family income is the frequency with which the women say "my man makes so much per week when he works." In 444 instances or 89 per cent of the cases the family income—even when the husband is working—falls below the minimum requirement as given for 1928 in Spending the Family Income. In this study the minimum requirement as given for a family of five consisting of a father, mother, 15-year-old boy, 10-year-old girl, and 3-year-old child, is $31.55 per week and this does not include saving for emergency or illness.

In twenty-eight families only is there an average of at least one room per person and in 52 per cent there is real overcrowding, by which is meant that more than two persons sleep as well as cook, wash and attend to all other household tasks in these so-called bed rooms. Moreover, 277 share toilet facilities with one or more other families.

For the entire 500 cases, the average number of agencies which have worked with the families is seven and of these five are health agencies, at one time or another practically every health agency in the city has been interested in these women or some member of their families. The table which follows indicates the extent to which these patients have become wards of the city.

**LENGTH OF TIME AND NUMBER OF AGENCIES ASSISTING THESE FAMILIES**

<table>
<thead>
<tr>
<th>Patents</th>
<th>1 case aided by agencies for 18 years—21 agencies</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>&quot; &quot; &quot; &quot; &quot; 18 &quot; &quot; 6 &quot;</td>
</tr>
<tr>
<td>1</td>
<td>&quot; &quot; &quot; &quot; &quot; 17 &quot; &quot; 7 &quot;</td>
</tr>
<tr>
<td>1</td>
<td>&quot; &quot; &quot; &quot; &quot; 16 &quot; &quot; 23 &quot;</td>
</tr>
<tr>
<td>4</td>
<td>&quot; &quot; &quot; &quot; &quot; 15 &quot; &quot; 9 to 15 &quot;</td>
</tr>
<tr>
<td>5</td>
<td>&quot; &quot; &quot; &quot; &quot; 14 &quot; &quot; 13 to 26 &quot;</td>
</tr>
<tr>
<td>1</td>
<td>&quot; &quot; &quot; &quot; &quot; 13 &quot; &quot; 14 agencies</td>
</tr>
<tr>
<td>1</td>
<td>&quot; &quot; &quot; &quot; &quot; 13 &quot; &quot; 3 &quot;</td>
</tr>
<tr>
<td>1</td>
<td>&quot; &quot; &quot; &quot; &quot; 11 &quot; &quot; 18 &quot;</td>
</tr>
<tr>
<td>1</td>
<td>&quot; &quot; &quot; &quot; &quot; 11 &quot; &quot; 17 &quot;</td>
</tr>
<tr>
<td>1</td>
<td>&quot; &quot; &quot; &quot; &quot; 11 &quot; &quot; 11 &quot;</td>
</tr>
<tr>
<td>11</td>
<td>&quot; &quot; &quot; &quot; &quot; 10 &quot; &quot; 7 to 25 &quot;</td>
</tr>
<tr>
<td>12</td>
<td>&quot; &quot; &quot; &quot; &quot; 9 &quot; &quot; 4 to 13 &quot;</td>
</tr>
<tr>
<td>20</td>
<td>&quot; &quot; &quot; &quot; &quot; 8 &quot; &quot; 3 to 19 &quot;</td>
</tr>
<tr>
<td>39</td>
<td>&quot; &quot; &quot; &quot; &quot; 7 &quot; &quot; 3 to 23 &quot;</td>
</tr>
<tr>
<td>37</td>
<td>&quot; &quot; &quot; &quot; &quot; 6 &quot; &quot; 4 to 20 &quot;</td>
</tr>
<tr>
<td>39</td>
<td>&quot; &quot; &quot; &quot; &quot; 5 &quot; &quot; 5 to 15 &quot;</td>
</tr>
<tr>
<td>43</td>
<td>&quot; &quot; &quot; &quot; &quot; 4 &quot; &quot; 3 to 16 &quot;</td>
</tr>
<tr>
<td>65</td>
<td>&quot; &quot; &quot; &quot; &quot; 3 &quot; &quot; 2 to 16 &quot;</td>
</tr>
<tr>
<td>71</td>
<td>&quot; &quot; &quot; &quot; &quot; 2 &quot; &quot; 2 to 15 &quot;</td>
</tr>
<tr>
<td>68</td>
<td>&quot; &quot; &quot; &quot; &quot; 1 &quot; &quot; 2 to 9 &quot;</td>
</tr>
<tr>
<td>67</td>
<td>&quot; &quot; &quot; &quot; &quot; 1 to 11 months</td>
</tr>
<tr>
<td>10</td>
<td>&quot; &quot; &quot; &quot; &quot; 6 &quot; &quot; not at all</td>
</tr>
</tbody>
</table>

The first year and a half's work has shown that there is a need in Cincinnati for a contraceptive clinic for the underprivileged, and it is the hope of the Committee that the clinic at the General Hospital may be continued to take care of this need, and may in time be taken over by the Hospital and included in the regular session of the Out Patient Dispensary Gynecological Clinic.

**ALICE C. BOUTHOU**
The Principles of Birth Control

By BALDWIN ANCIAUX
Massachusetts Institute of Technology, Class of 1934

THAT "any use whatsoever of matrimony exercised in such a way that the act is deliberately frustrated in its natural power to generate life is an offense against the law of God and of nature, and that those who indulge in such are branded with the guilt of a grave sin" was the declaration made by Pope Pius XI in his Encyclical issued on January 8, 1931.

This statement which sums up the stand of the Catholic Church in regard to birth control marks the cross roads of the Old System and the New. The Catholic Church has definitely declared itself as opposed to any form of birth control other than continence, and in so doing has separated itself from all advances made in sociology, psychology, economics and medicine.

Basing its teachings on the a priori assumption that its head, the Pope, is God's representative on earth and is divinely inspired and consequently infallible, the Church assumes the role of interpreter of the moral and religious life of its members. Doctrines expounded by austere monks of centuries past are quoted as authorities, notwithstanding the fact that these monks and priests based their statements upon their own personal beliefs and not on actual scientific investigation. Furthermore, conditions of life today are far different from what they were in those days, and many advances have been made in the study of the human mind and body, and man's relations with other human beings.

The fundamental precept of the Catholic Church is that this life should be dedicated to the preparation for a hypothetical existence hereafter, and that all things must be subordinated to this one great object. On the face of it this seems a very worthy principle, but as it is interpreted it proves to be a most pernicious doctrine.

Apparently the Lord made a mistake when He endowed man with sex and sexual desire, for, declares the Church, the conjugal act is designed primarily for the begetting of children, and those who perform it for any other purpose are committing a deed which is intrinsically vicious. It is further stated that all sexual education is sinful, that the youth of both sexes should be kept in virtuous ignorance of the functions of their sex organs and on the other hand given unceasing religious training, and awakened to the love of angelic virtues.

Celibate priests express great admiration and concern for the suffering of mothers, but instead of offering any relief smugly promise them a reward in heaven. It is better, claims the Church, to have child labor, overcrowded tenements, diseased children, a disgracefully high infant and maternal mortality rate than to prevent the birth of one baby. It is better that a mother die than to perform an abortion.

As regards birth control, the attitude of the Church is the practices condemned by the Church are degrading, for they bring husbands and wives down to the level of mere instruments of indulgence, the various contraceptive devices all tend to diminish both self respect and mutual reverence, normal men and women rarely, if ever, begin such practices without suffering a severe mental shock, and rarely continue them without suffering serious moral degeneration, continence is recommended strongly, but no circumstance can justify the use of any other means for preventing conception.

Above are summarized a few of the principles applying to sex which are upheld by the Catholic Church. In theory many of these principles do not seem very harmful, but in practice it is generally otherwise. Just where the Church obtained its authority to say that sex is sin and the sexual act purely for procreative purposes is not clear, if this is so then the majority of mankind are sinful, for it is doubtful if one per cent of those born are created with this thought in mind. Most babies are not the result of deliberate creation but come by accident. Modern psychology considers that there are two functions of the sex relationship, independent and equally moral—the love function and the creative function.
The economic situation of modern civilization makes it impossible for the average man to provide adequately for a family of more than four or five children at the most. The only way he can solve this problem is to marry late in life or to restrict the size of his family, the Church condemns the use of contraceptives but upholds continence, in other words after this man has had as many children as he can support and his wife must cease all sex relations. In taking this stand the Church is lending its support to one of the greatest blemishes on the face of civilization—prostitution.

Authorities state that the prevalence of prostitution is attributable in large part to late marriage and maladjustments in marital relations.

Self control is an admirable ideal towards which to strive, but it must be a voluntary self control and not one forced upon man. To quote J. Whitridge Williams, professor of Obstetrics at Johns Hopkins University and one of the leading men in his profession in this country, “If men were angels such advice (continence) might hold, but even among the most intelligent and well meaning I hesitate to recommend continence for too long a time, as I know from experience what it means to give advice which may lead to a blasted marriage.”

The advocacy of sexual abstinence as a means for reducing the birth rate would necessarily mean the degeneration of the race stock, for it would leave procreation in the hands of people having the least moral strength, who were merely slaves to their passions, and diminish the number of children chiefly among those of strongest mental and moral character. Indeed, investigation seems to show that even in its most idealized aspect continence over a long period of time for people living in the intimacy of married life produces serious mental and physical disturbances.

This is a practical world and regardless of all the beautiful principles which may be put forward, unless they fit the facts of life and prove of some real assistance to mankind they are useless. If nature takes its course a woman may bear from fifteen to twenty children during the course of her life, but there is no place for these children, they come to an already overcrowded home, perhaps, and cannot be supported by their father’s wages. These children are forced to go forth to join that army of children employed by industry, displacing their parents in the process.

Too frequent pregnancies are fatal to a mother, and if she has some disease such as tuberculous or heart trouble, to have a child is equivalent to signing her death warrant. Syphilis is inherited and is the cause of ninety per cent of the insanity and fifty per cent of the still births in this country. It is estimated that one million prospective mothers perform illegal abortions every year, such is their dread of adding to an already crushing burden. The maternal and infant death rate is, if anything, on the increase, despite all efforts made by social workers and hospitals. When the above facts are considered, together with the fact that in Holland and New Zealand, where birth control is an affirmative part of the law, the death rate has been found to decrease with the birth rate, there is but one conclusion.

Modern scientific methods of contraception are safe and effective, actual experience has not proven that their use either demoralizes or fosters over indulgence, on the contrary those who use them are on the whole happier and more able to contribute to the welfare of society by being less of a burden. The people who use birth control are the people with small families, who have the means and leisure for mental and spiritual development, their children do not have to go into factories, but are well cared for.

Abortion

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

RACHELLE S. YARBOS, M.D.
A Test Case

By GEORGE BEDBOROUGH

WHETHER it is right to characterize the so-called "safe period" method of contraception as a form of birth control, is the subject of a libel action now pending in England Dr Marie Stopes, commenting on the recommendation of this method by Monseigneur Canon Brown (now Bishop of Pella) in his evidence before the British National Birth Rate Commission, said that although the Bishop's method was neither scientific nor reliable, it showed conclusively that Catholics still advocate some form of birth control.

The Tablet, a Catholic newspaper, stamped Dr Stopes' generalization as "an equivocation" Dr Stopes, (for a long time anxious to put to the test the futility of the Catholic attitude) has brought a libel action against Cardinal Bourne and the other proprietors of The Tablet. A libel writ served on the Primate-cardinal of England is a novel departure. The words actually used by Canon Brown, as quoted in The Tablet are "When all other deterrents fail, married couples may be allowed to limit intercourse to the intermenstrual period, sometimes called the tempus agenesos.

There seems therefore to be at least a clear-cut issue for the secular courts to decide, namely, Is it a form of birth control to regulate and avoid conception by studying the calendar and carefully controlling the period during which coitus may safely take place? The Tablet claims that "birth control has only one meaning," and that that meaning is not favored by Catholics.

The attitude of the present pope, Pius XI, towards birth control is assumed by the most casual readers (and by some careful ones) to be contra-contraception. The Papal Encyclical of January 8th, 1931, is certainly denunciatory of breaches of "natural," "moral" and "divine" law. There is one sentence which leaves no loophole, if it were taken alone. "Since, therefore, the conjugal act is destined primarily by Nature for the begetting of children, those who in exercising it deliberately frustrate its natural power and purpose, sin against Nature and commit a deed which is shameless and intrinsically vicious."

The same Encyclical does however except from its denunciations "circumstances in which husband and wife, strengthened by the grace of God, fulfill faithfully their duties and preserve in wedlock their chastity unspotted."

It is difficult to see how a married couple can fulfill all their duties and yet dodge the question of procreation without incurring the Catholic accusation of frustrating "the primary end of marriage." The Catholic Truth Society's pamphlet Birth Control, now in its 30th edition, rather extravagantly claims that "every created thing has its predestined part in the scheme of the universe," which at first glance implies that mosquitoes, diphtheria germs and every deadly enemy of the human race should apparently live and (by analogy) be encouraged rather than "controlled at or before birth." But if one bears in mind the teaching of the same church that the wicked are specially created for the Day of Judgment, one understands better why even man-eating sharks ought not to be controlled.

Havelock Ellis in Sex in Relation to Society defined the historic attitude to birth control.

The question was definitely brought up for Papal judgment in 1842, by Bishop Bouvier of Le Mans, who stated the matter very clearly, representing to the Pope (Gregory XVI) that the prevention of conception was becoming very common and to treat it as a deadly sin merely resulted in driving the penitent away from confession. After mature consideration the Curia Sacra Poenitentiaria replied by pointing out, as regards the common method of withdrawal before emission, that since it was due to the wrong act of the man, the woman who had been forced by her husband to consent to it, has committed no sin. Further the bishop was reminded of the wise dictum of Ligouri, "the most learned and experienced man in these matters," that the Confessor is not usually called upon to make inquiries upon so delicate a matter as the "debitum conjugale" and, if his opinion is not asked, he should be silent.

Until recent years certainly cotus reservatus has been recognized by Catholic authorities as permissible, and Dr Halliday Sutherland, m
Marriage—New Style

By FRANCIS C. URIDGE

I BECAME interested in birth control when a young couple, very close to me, decided to be married. Neither of them had a job, and their combined savings amounted to about five hundred dollars. Bob was training himself for a career of freelance writing, so he would not be able to provide for a family for some years. Phyliss, though she hoped eventually to be a home-maker and a mother, was just recovering from a long illness and could do no more than earn her share of the expenses for the time being. In spite of their handicaps, both Bob and Phyliss had strong aspirations. They wanted to travel while they were young. Their plan was to get jobs in different parts of the country, if not the world, where Bob could study and serve the apprentice years which his career demanded. It made an attractive picture. So attractive, in fact, that the parents and well-meaning friends stepped in.

"Impossible!" they cried, "how about children?" "We are not having children until we are ready," was the reply. But the older people were wise in their way. They knew that Bob and Phyliss were madly in love. They answered the louder "Impossible!" You two young fools don't know what you are letting yourselves in for. You'll be having one child after another until you finally wake up to the fact that there is no such thing as marital happiness without children. Wait a year or two, until you are on your feet, then you will be able to afford children as they come along."

But love is a beautiful thing, too often runned by long engagements. You can not snatch love from the crest of a wave, lay it on the shelf for a year or two, and then expect to put it back on the crest of a wave again. Bob and Phyliss were determined to speed along with nature's rhythm. They had so much promise, they had so much of that peculiarly youthful fire, they were planning such a worthwhile life together, that I, with but one or two other friends, backed them in their determination to marry and thus start their life together. Seen from our point of view, the only course to be followed was marriage. As a married couple they could live more economically, provided the question of children could be satisfactorily handled. One thing, then, must be found, a method of adequately regulating conception. Having given our moral backing to the marriage, we felt a certain obligation to aid in the search for birth control. And search we did.

The term birth control, like so many newly popularized terms, is capable of a number of differing interpretations and of causing much misunderstanding and confusion of thought. Bob's and Phyliss' parents believed in birth control, but they were convinced that there was only one effective method, a method which no loving couple was capable of applying abstinence. According to the older generation's way of doing things, a young couple fell in love, married, and then proceeded to have children until they learned to subliminate their love into "higher" realms of human activity. In other words, birth control was most necessary for Bob and Phyliss, but the only effective method would be to subdue their physical love. The old folks knew that there was no likelihood of the youngsters adopting this method, or, if they did adopt it, there was no hope of its success in preventing the advent of at least the first child and at too early a date.

The search for adequate conception control ended happily, but with no thanks due parents, older friends, family doctors, ministers, or social workers with whom any of the searchers came in personal contact. Colleges, seminaries, medical
Augustine and Aristotle on Abortion

According to Hasting's Encyclopaedia of Religion and Ethics St Augustine's most detailed statement concerning abortion occurs in Quæstiones in Exhæmeron 80 and in Quæstiones Veteræ et Novi Testamenti, 23, as follows

"The body is created before the soul. The embryo before it is endowed with a soul is infirmatus, and its destruction by human agency is to be punished with a fine. The embryo formatus is endowed with a soul, it is an animate being, its destruction is murder, and is to be punished with death."

There is some doubt as to these two sets of Questions being authentic Augustine material, particularly the first mentioned. In any case, however, the view represented in them was without much doubt Augustine's, since it was the generally accepted one up to modern times. The authority for it was Aristotle, whose successors worked the matter out in some detail.

The Encyclopaedia continues "Aristotle held that the soul of the zygote at conception was the vegetative only, that after a few days it was informed by the animal soul, and later by the rational. His followers distinguished between the male and female embryo in the date of animation. The male was regarded as being animated forty days after conception, the female eighty days later. The moment of animation was fixed for both sexes at the fortieth day. The Roman jurists adopted the latter view. The general distinction between the animate and inanimate foetus was clearly held by Roman and Canon Law, and lasted to modern times."

Augustine also discusses whether abortions shall have a part in the resurrection, and inclines towards an affirmative answer. (City of God, Bk XXII, Chapter 13) If they do, "Who will dare to deny, though he may not dare to affirm, that at the resurrection every defect in the form shall be supplied?" (Enchiridion, Chapter 85)
The Pertinent Question

By GUY IRVING BURCH

The "racial suicide" bogey of a generation ago makes its appearance again in Dr Robert R. Kuczynski's little book The Balance of Births and Deaths. Notwithstanding the fact that there is still a "large excess of births over deaths" in countries of Northern and Western Europe, Dr Kuczynski tells us that the "population did not reproduce itself but had a deficit of about 7 percent." The reader may ask with Dr Kuczynski "How is it to be explained that with a birth rate of 19.2 and a death rate of 13.0 the population does not hold its own?" "The answer to these most pertinent questions," continues Dr Kuczynski, "is to be found by a study of the age composition." The gist of Dr Kuczynski's argument is that "the proportion of the women in the child-bearing age is particularly large and the proportion of young children and old persons particularly small," which would seem to give a false increase in population, so to speak, because the favorable age composition of the population tends to swell the number of births and tends to lower the number of deaths. Still when the various age groups of the population are isolated, Dr Kuczynski finds that 100 mothers give birth to 93 future mothers (in 1926).

It seems that what Dr Kuczynski really means is that a certain group of the population, namely, women in the child-bearing age, is not reproducing itself, but his statement that the "population does not hold its own" does not seem to be correct, and if it were correct, would not be alarming. We know from the past that 1,000 mothers can produce 1,500 potential mothers, and that this could be repeated as often as the economic and social conditions of population pressure and standard of living warranted.

It is true that a favorable reproductive age group tends to swell the number of births, and that a large proportion of the population in the middle age groups tends to lower the number of deaths. But population growth is a complex phenomenon in which many factors enter and many "tends" must be considered. As regards the death rate, the favorable age composition of the population would seem to have a deciding effect, because, notwithstanding all that modern science has done, the highest death rates remain in the early and late age groups.

However, the effect that the favorable reproductive age group has on the birth rate is not so easily measured. It may be, and probably is, completely nullified by economic and social conditions and the practice of contraception. We know from past experience that a relatively unfavorable reproductive age composition has increased population at a much faster rate than it is now increasing. As far as the biological possibilities of population growth are concerned, it is possible for a population to double about every 17 years, and it is biologically possible for a woman to have about 17 children. Yet Dr Kuczynski seems to get excited because in 1926, 100 mothers gave birth to only 93 future mothers. In 1936, if economic and social conditions warranted, 93 mothers could easily give birth to, say, 150 future mothers.

Now if a favorable reproductive age composition of the population creates a situation in which "the population does not hold its own," Dr Kuczynski leaves to our imagination what will happen in a few decades when there is an "unfavorable" reproductive age composition. Because the percentage of women of child-bearing age is unusually large in proportion to total population since the World War, Dr Kuczynski seems to think that the composition of the population is favorable for reproduction. Had not the World War slaughtered so many men in the reproductive age group there would not now be so many women of child-bearing age in proportion to total population, the sexes would be more equalized and, because of this fact, the population would be in a more favorable reproductive composition than it...
is now with a relative scarcity of men and a superabundance of women. In fact, what Dr. Kuczynski would have us believe is a favorable reproductive composition of the population is in reality an unfavorable reproductive composition.

However, even if the percentage of women in the child-bearing age had increased at the expense of the older age groups, economic and social conditions might have made a rapid growth of population disastrous to the well-being of the population. It should be borne in mind that, as far as the capacity for population growth is concerned, we have little to fear even if the percentage of women in the child-bearing age decreased as much as five units, or about one-fifth Dr. Kuczynski writes:

"The pertinent question is not: Is there an excess of births over deaths? but rather are natality and mortality such that a generation which would be permanently subject to them would, during its lifetime, that is until it has died out, produce sufficient children to replace that generation? If, for instance, 1,000 newly born produce in the course of their lives exactly 1,000 children, the population after the death of the older 1,000 will remain unaltered. If natality and mortality continue to be what they were, the 1,000 children will in the course of their lives again produce 1,000 children, and if natality and mortality remain permanently the same, the population will always exactly hold its own. If more than 1,000 children are produced by a generation of 1,000 newly born, the population will increase. If less than 1,000 are produced, the population will decrease and finally die out.

"Since we are concerned here with birth-giving only, it suffices to take into account the female population. The pertinent question then is: Are natality and mortality such that 1,000 newly born girls will in the course of their lives give birth to 1,000 girls? If this is the case, the first generation of 1,000 females will at its death have been fully replaced by the girls they have borne, and the population will remain constant, otherwise, it will in the long run increase or decrease.

In looking back over this quotation and considering Dr. Kuczynski's work generally, one wonders why he seems to find it necessary to repeat the alarming phrase "bound to die out." The fecundity of every country has had its trends upwards and its trends downwards. For some years the trend of fecundity has been downward but had Dr. Kuczynski made his calculation during the decade 1891-1900, when for instance, 1,000 Swedish women gave birth to 1,958 girls, 1,435 living to the reproductive period, his alarming phrase "bound to die out" might have been "standing room only"—if fecundity and mortality remained constant.

After considering this earlier trend, Dr. Kuczynski says "But fertility and mortality, of course, change."

To reason or even suggest that a given trend in fecundity is going to continue until there is no more standing room left or until the population dies out, may be an interesting statistical game or theoretical problem, but it has little place in the practical science of population growth. Long before standing room is occupied, or even the necessities of life gave out, men will be cutting their neighbors' throats for a "place in the sun" either for themselves or for their children. Likewise, long before the population dies out or becomes half its size, mothers will be replacing themselves with future mothers perhaps two or three times over. As a matter of fact trends in fertility have little or no value in the science of population apart from the economic and social conditions of population pressure and standard of living, which are the real controls of population growth. In the past we have found that less favorable reproductive age groups have produced higher birth rates than we are producing now. The cause probably was less population pressure or a lower standard.

The Real Controls

As the economic and social factors of population pressure and standard of living seem to be the real controls of population growth, Dr. Kuczynski's statement of the "pertinent question" might be challenged. In the first place, population pressure and standard of living are influenced by the entire population and in turn react upon the fecundity of the reproducing age group. Past fecundity and mortality as well as present must be considered in a consideration of future fecundity and population growth. Dr. Kuczynski realizes this. But fecundity must be studied in relation to economic and social conditions rather than in its relation to the number of women in the child-bearing age group. And it is the excess of births over deaths, or gross increase in population, rather than a change of a few per cent in the reproductive age group, that influences population pressure and standard of living.

It is academic to speak of generations being permanently subject to a certain natality and mortality, and certainly the pertinent question is not whether 1,000 women in one generation produce 1,000 women in the next generation, because when economic and social conditions warrant, as they did in the Colonial days in this country, it is possible for 1,000 women to produce perhaps 3,000 potential mothers. The pertinent question as regards fecundity and population growth is are fecundity and population growth in keeping with the best interests of the population?
If a given country is overpopulated a decrease not only in fecundity but in number of births over deaths might be in keeping with the best interests of the population. In fact, it is probably the consensus of opinion among population authorities in the United States and Northern and Western Europe that not only a slowing down in fecundity, but a slowing down of the increase of births over deaths is in keeping with the best interests of the population.

"According to the fertility and mortality in Western and Northern Europe in 1926," Dr. Kuczynski concludes in heavy black type his chapter on the Net Fertility Rate, "100 mothers give birth to 93 future mothers only. With the fertility of 1926 the population is bound to die out unless mortality of potential mothers decreases beyond reasonable expectations. And fertility continued its downward trend in 1927."

The above passage would seem to suggest a dark population outlook for Western and Northern Europe in the near future. But as a matter of fact, as Dr. Kuczynski says himself, there is "still a large excess of births over deaths" in Western and Northern Europe, and almost every country in this part of Europe is at a loss to know what to do with its surplus population now that the New World is closing its doors to immigration. With hundreds of thousands of prospective emigrants backed up on Europe to intensify population pressure it is no wonder that 100 mothers were in 1926 and 1927 producing 93 future mothers.

Furthermore, 1926 and the few years that followed were especially favorable to Dr. Kuczynski's thesis. As Dr. Kuczynski says, the World War did not change the general trend of the birth rate, but it did create a few rather violent short trends or saw-teeth in the curve of the birth rate. During the war period, 1915-1919, the birth rate of Western and Northern Europe sank abnormally low, as might have been expected. The five-year period immediately after the war, 1920-1924, saw a violent upward trend from the low war-time level. Then after this first spurt, we might expect another lull in fecundity as a fairly normal reaction. The years 1926 and 1927 caught this lull, which continued during the period 1925-1929. For 1930, however, we find the birth rates of such countries as Italy, and England and Wales increasing and holding firm, and a greater number of births over deaths has resulted.

It may be noted that we have used the word "fecundity" where Dr. Kuczynski might have used "fertility". Dr. Kuczynski speaks of the "fertility rate" as the number of births per 1,000 women of child-bearing age, namely, women between the ages of 15 and 50 years. It seems to us that the use of fertility in this sense, although rather common now, is misleading. There are many fertile women, who, because they are not married, or because they use contraception during marriage, do not show their real fertility. Because of these factors, fertility cannot be properly measured, and all calculation concerning "fertility" rates are impractical. It would be less misleading to use the word fecundity.

CONTRIBUTORS TO THIS ISSUE

George Packard is a prominent Chicago attorney, president of the Chicago Ethical Society and a director of the Chicago Tuberculosis Institute and the Fresh Air Hospital.

Alice C. Boughton is executive secretary of the Committee on Maternal Health of Cincinnati (Dr. Boughton will come to the American Birth Control League as executive director in October).

Miriam Keeler is the Acting Head of the Research and Publicity Department of the National Child Labor Committee.

Leslie A. White is professor of Anthropology at the University of Michigan.

J. A. MacCallum, D.D., is the Minister of the Walnut Street Presbyterian Church, Philadelphia.

Joe Gould is a frequent contributor to the liberal magazines.

By his knowledge and power man has in a measure risen above nature, he has eaten of the fruit of the tree of knowledge and has become as the gods, knowing good and evil, and now it remains to be seen whether in future ages his race may secure the fruit of the tree of life and become immortal.

Edward Grant Conklin.
Book Reviews


In the hands of the most enlightened, both science and poetry are invaluable tools in freeing humanity from bondage. It is to the scientists that we are indebted for the new realization of the sexual impulse as the basis of altruism, the realization of the physiological and psychic value of its joyful fulfillment, and the appreciation of the social responsibility which accompanies this fulfillment. But to make this knowledge operative by bringing it home to the heart as well as mind is particularly a poet’s opportunity for service—an opportunity brilliantly followed by Ralph Cheyney.

One of the first masculine poets to write on the feminine side, Ralph Cheyney presents no worship of sex per se but a reverent attitude toward sex as an experience valuable in itself and of vastly more vital significance in its consequences. Throughout Pregnant Woman in a Lean Age, he expresses such realizations as that of Havelock Ellis when he wrote of “the sacrament of sex.” In so doing, Ralph Cheyney performs a vital service.

Margaret Sanger


This anthology of anthropological literature, with selections grouped under such headings as Social Organization, Sexual Customs and Social Practice, Evolution of Attitudes, contains thirty-nine essays excerpted from the writings of Franz Boas, Robert Briffault, E. B. Taylor, Bachofen, Sigmund Freud, E. Sapir, A. L. Kroeber and others. Some of the most interesting essays are The Concept of Right and Wrong, by Paul Radin, The Peking Man, by J. H. McGregor, The Savage’s Dread of Incest, by S. Freud, Banaro Society, by Richard Thurnwald.

It is difficult to see much continuity in the volume. Some essays are included because of their intrinsic value today, others because of their historic interest. And the uninitiated reader has no way of knowing, in a number of cases, whether a selection is presented to teach the facts of anthropology, whether it represents an interesting but defunct phase in the history of science, or whether it is merely an aberration. There is, for example, only a faint and obscure hint in the editor’s preface that would guard the unwary reader against accepting the plausible but fantastic essay of Elliot Smith upon the influence of Egypt in Central America. To the experienced reader in anthropology such safeguards are, of course, not necessary.

Mr. Calverton’s Introduction, Modern Anthropology and the Theory of Culture Compulsives, is interesting. The first part deals with currents of thought associated with Lewis H. Morgan and E. Westermarck. Morgan’s evolutionary theories derived modern monogamy from a primitive promiscuous horde. His emphasis upon the role of property caused radicals to incorporate his work in their teachings. Middle class revulsion against these theories found expression in the work of Westermarck, who used any shred of fact or fiction that he could to “prove” that the monogamic family was not cultural nor historical in nature but instinctive and pre-human. Some modern anthropologists, such as Lowie, Malinowski, etc., and biologists, such as Jennings, and T. W. Galway have accepted and defended the conclusions of Westermarck. The work of Briffault, Gertrude Miller and others has knocked Westermarck’s great structure into a cocked hat. Man is by nature promiscuous, and polygamy the world’s most popular form of marriage.

The second part of Calverton’s introduction is a bit labored. He goes to much pains to explain his theory of cultural compulsives (which means that people tend to believe what they want to believe rather than that which has been verified as fact) as if it were a novel idea. It is a sound and important idea, but I think that most students of the humanities recognize it and take it for granted.

But Calverton’s “exposure” of Westermarck and those who in his wake worship the fetish of an instinctive, pre-human family and monogamous marriage is worth twice the price of the book. And this is only an introduction to eight hundred pages of fascinating stories of primitive peoples and their ways.

Leslie A. White
CHRISTIAN ETHICS AND MODERN PROBLEMS, by the Very Reverend William Inge
Putnam and Sons, New York 1930 $5.00

WETHER or not, as some critics hold, Dean Inge has passed the zenith of his creative power, it is still a fact that he is the most comprehensive and realistic clerical thinker in the English speaking world. No other churchman has so extensive a hearing upon such a diversity of subjects, so that when he speaks we have no choice but to listen, even though we may not be particularly impressed by his argument. Already the ultimate fate of every pioneer is dogging his footsteps for he can hear the tramp of the millions who are catching up with him and will soon have left his landmarks behind.

Thus, while there is nothing startling in this valedictory, ("probably the last considerable work that I shall have time to write"), it is suggestive in that it indicates the drift of ecclesiastical opinion upon the large number of ethical and religious questions with which it deals, for the most part in a sketchy or too summary manner.

For the majority of the readers of this Review the main significance of the book will be found in its discussion of the control of population, a subject to which the author devotes only twenty-three of the four hundred and twenty pages. Since a portion of his treatment is historical it is easy to see that insufficient space is left for an adequate examination of the more specific problem of birth control, a question that he faces without flinching but with evident diffidence. This reluctance is not surprising in the light of his inherited taboos. For Dean Inge stands before the world in the double capacity of an ex-Victorian and a churchman. In fact, the surprise is that he had the temerity to face the issue at all.

But the exigencies of the present world situation demand the attention of so virile a thinker and Dean Inge is the last man to side-step an issue because it is embarrassing. Yet he narrowly seeks to avoid the logic of his own argument by the suggestion that "the proper method of dealing with a temporary congestion (of population) is by State-aided colonization." Merely to mention India is to show the depth of fallacy into which even a strong mind can fall when seeking a way of escape. Moreover the same condition of economic depression that exists in Britain is also to be found in Canada, South Africa, and Australia, and these dominions are therefore giving a cold welcome to emigrants from the mother country. But even if the dominions were clamoring for population the Dean's suggestion would offer only a temporary remedy and sooner or later the question of curtailing the increase of population would have to be faced.

Evidently he realizes the inadequacy and perhaps the inconsistency of this proposal for he goes on to face the crux of the issue in a brief but sane and modern discussion of birth control. While his approach to the problem is conservative, he forces himself with some strain to keep an open mind and takes the ground that he "cannot approve of the deliberate withholding of medical knowledge from adults who wish to obtain it." Evidently he would not confine such knowledge to married people, a provision which many less sophisticated churchmen offer as a safeguard to the morals of the unwed.

Nor has Dean Inge any illusions as to the capacity of human nature to withstand the sexual urge except for purposes of procreation. "No one," he says, "who knows anything of human nature could suggest that total abstinence is the solution of the problem. It is far more likely to wreck the happiness of married life, as St. Paul seems to recognize."

Dean Inge then goes on to state his belief that the population question has two sides, the quantitative and the qualitative, and that "the quantitative problem will ultimately be solved through general use of means to prevent conception." The qualitative problem is difficult and grave because at present the less desirable elements in the community are so much more prolific than the educated classes. Some kind of compulsion will probably be necessary to redress the balance. Dean Inge is usually forthright and since in another connection he does not shrink from advocating the lethal chamber for habitual criminals he is not afraid of the sterilization of those who are unfit for parentage. But eugenists, he recognizes, "have a hard battle to fight against the indifference of politicians, the ignorance and prejudice of the public, and the determined hostility of the Roman Catholic Church."

Enough has been said to show that this outstanding religious leader has gone so far as to throw his weight unreservedly on the side of birth control, even though he casts an occasional sidelong glance with the hope of finding another solu-
tion of the problem of population. The value of his book lies not so much in what he has too briefly said upon the subject, but in the fact that it is symptomatic of the trend of ecclesiastical opinion. The church has rarely led in moral reform but when a movement gathers sufficient head to give promise of eventual success it usually throws its weight on the right side and hastens the coming of the new day. Dean Inge is a sign of the times, an index finger pointing to the education of the people by the State in the control of their divinely given power to rear a healthy, happy race, or in the words of George Meredith, “to keep the young generations in hall, and bequeath them no tumbled house.”

J A MacCallum

LOVE CHILDREN, by Miriam Allen de Ford

Lincoln MacVeagh, New York, 1931 $3 50

MIRIAM ALLEN DE FORD writes on illegitimacy, which she feels is a tragedy. There are officially two and a half million bastards in this country, and they are made to feel the weight of a stigma for which they are not to blame. This consciousness of inferiority is a handicap. Society is not justified in this feeling. Those born in conventional wedlock were not always premeditated—and we would all like to consider ourselves love children.

Miss de Ford attempts no contribution to sociology. She is interested in the individual and writes a straightforward biography of each of her heroes. She discusses William the Conqueror, the bastard as King, Alexander Hamilton, the bastard as statesman, Erasmus, the bastard as scholar, Leonardo da Vinci, the bastard as painter, d’Alembert, the bastard as scientist, Borodin, the bastard as composer, and Strindberg and Dumas fils, the bastard as litterateur. She has no chapter on the bastard as religious teacher. Two-Gun Crowley achieved fame too late to be written up to represent the bastard as social reformer. She also makes a partial list of other distinguished illegitimates. She notes that there are few illegitimate women who have won distinction. This is because of the difficulties that the sex labored under before feminism. As one would expect, the cheap press was established by Girardin, a bastard.

In dealing with these varied characters it is difficult for Miss Ford to find any common point. She says, “I doubt if there is or ever has been an illegitimate without a touch of neuroticism, the influences of early childhood upon the most fortunately situated of bastards cannot avoid such an effect, however slight.” In making this statement Miss Ford seems swayed by her beliefs. She neglects the fact that perhaps the majority of illegitimates are born of low-grade parentage, without enough mentality to be neurotic. On the other hand, there is a neurotic streak in legitimate children with the hereditary predisposition. Nature does not regard these conventions at all.

Although there are sensitivities about bastardy, they vary with space and time. Chastity is a mere temporary fad of the last few thousand years. In many primitive races, a woman who has borne children can make a more desirable match than one who has not demonstrated her ability to increase and multiply.

When Alexander Hamilton was referred to as a West Indian bastard, the adjective hurt him worse than the noun. He was ashamed of his birthplace. Miss de Ford misunderstands the rage which led William the Conqueror to one of his cruelest reprisals upon the people of Alençon. When he was besieging them, they taunted him by hanging hides upon the walls. He was reminded that he was the grandson of a tanner. That rankled more than his illegitimacy. The Norman ducal house was sufficiently Scandinavian to disregard the parvenu Christian tradition. The chronicles say that William dispossessed the proud kindred of his father to aid his half-brothers. Miss de Ford is wrong in attributing too high a neurotic context to illegitimacy. Strindberg would probably have been equally eccentric and Leonardo da Vinci, just as solitary had they been born in wedlock.

It would seem that the eminent sociologist, Judge Webster Thayer, was wrong when he spoke of Sacco and Vanzetti as “anarchist bastards.” Parvenus are usually more royalist than those of ancient birth. For this reason bastards are disposed toward conservatism. Not being sure of themselves, they are not in any psychological position to criticize the social order. Miss de Ford remarks that “Bastards are frequently apt to be sexual Puritans just as drunkards’ children tend to become fanatical prohibitionists.” She also says, “Perhaps those who bestow on illegitimates ancestors ranging from noblemen to gods are acting on sound instinct.” For if there is one generalization which may be made of those bastards at least who reached distinction, it is that they are conserva-
CHILD SLAVERY IN HONG KONG  

THE MUI TSAI SYSTEM, by Lt Comd and Mrs H L Haslewood Sheldon Press, London 1930 2s 6d

"THE MUI TSAI is a pathetic outcrop of China's economic faults, the disposable part of a surplus population," wrote the Hong Kong correspondent of the London Times in the issue of September 20, 1929 "Child of pauper parents, she is sold into domestic service She goes with the daughters of the rich as part of their dowries She toils unremittingly for wealthy people, for well-to-do middle-class families, or lower middle-class families. She may be treated well, she may be treated ill, she may be married as a first wife into a family of the lower class, or sold as a concubine or prostitute. There are homes where she is well fed, if overworked, there are others where she is beaten or tortured by burning."

This system is a custom which China has been trying to outgrow ever since she became a Republic in 1912, and declared it illegal. In Canton, at least, stringent regulations against the mus tsas system have been passed, with severe penalties for any evasion of the law.

But in Hong Kong, a British colony under British rule, for many years the mus tsas system was "not recognized" and what is not recognized, as Mr Churchill pointed out in Parliament in answer to a question as to whether there were any legislative limits as to the age at which a girl could be sold into slavery in Hong Kong, cannot be regulated.

The story of the long and heartbreaking struggle to induce the Hong Kong government to acknowledge its responsibility toward these slave girls is told by Lieutenant-Commander and Mrs Haslewood in this small but telling volume. The first sign of success was the passage of the 'Female Domestic Service Ordinance' early in 1923, which prohibited the employment of any new mus tsas or of any girl domestic servants under 10 years of age, and provided for the registration of existing mus tsas, after a date to be set by proclamation. But the proclamation fixing the date for registration to begin was not forthcoming, and the only effect of the ordinance appeared to be greater activity in investigation charges of cruelty. In 1929 it was believed that the number of mus tsas in Hong Kong has actually increased since the passage of the ordinance, from 8000 to about 10,000.

Late in 1929, as the result of renewed pressure, an amendment to the Ordinance of 1923 was passed, bringing the registration provisions into force. This was encouraging, since registration was regarded as the necessary preliminary to regulation if not to abolition of the system. Nevertheless, when the Haslewoods's book went to press in the spring of 1930, registration, although begun, was progressing slowly and the enforcement of the Ordinance was still far from satisfactory.

The reluctance of the British Government to abolish this form of slavery in territory under its jurisdiction is ascribed partly to the difficulty of proving that a girl is a mus tsas rather than an adopted daughter, and partly to the "difficulty of providing for the unwanted female children of poor parents if there were no market for them." The possibility of dying up at the source this surplus-girl-into-slave proposition through the dissemination of birth control information is not discussed by the Haslewoods. If the Government is anything like that in our own progressive land, this might indeed present difficulties, but they could scarcely be greater than those encountered in the attempt to eliminate the mus tsas system by direct legislation.
News Notes

UNITED STATES

The Methodist Episcopal Church study conference, meeting in Delaware, Ohio, in July, adopted a report sanctioning the church’s support of birth control. The report reads:

It is time some pioneering religious bodies take the leadership in a humane and righteous campaign for the education of the people in the ethics of birth control.

It is becoming increasingly clear to many leaders of Christian thought that the proper guidance and most reliable information in this vital subject should come either from the church or with the sanction of the church.

The church must not be diverted from the task of getting the most helpful information about marriage to her youth, even though she may be criticized in the process.

The American Birth Control League is calling a New England States Conference on Birth Control, to be held in Providence, Rhode Island, Baltimore Hotel, on October 14th. All persons interested in the subject and living in Maine, Vermont, New Hampshire, Massachusetts, Rhode Island and Connecticut are invited to attend. The program will consist of four sessions: 11:15 A.M., Round Table for officers and representatives of State Leagues; 1:15 P.M., Luncheon; The Eugene Aspects of Birth Control; 4 P.M., Round Table for Social Workers; Discussion of the Birth Control Clinic and Family Rehabilitation; 5 P.M., Demonstration (for physicians only), Modern Contraceptive Technique.

The Committee on Arrangements includes Mrs Alfred K. Potter, 280 Irving Avenue, Providence, R.I., Chairman; Mrs Bary B. Colt, Invitations; Mrs Raymond B. Ostby and Mrs Arthur H. Ruggles, Luncheon.

New England readers are urged to send their names to Mrs. Potter. For further details of speakers, etc., see October issue.

The Pan-American Medical Congress, meeting in Mexico City during the last week of July, debated on birth control without reaching any decision on the subject. The discussion was started by an address of Dr. Rafael Carrillo, of the University of Mexico, on Some Aspects of Birth Control.

CALIFORNIA The Presbyterian Synod, in session at Sacramento, July 17-20, recommended the adoption of a law limiting the sale of contraceptives and the dispersion of birth control information to married persons on the prescription of a physician.

DELAWARE The Birth Control League of Delaware, whose membership includes prominent men and women of the state and the city of Wilmington, opened its first clinic at 1019 Pine Street, Wilmington, on July 16th. Dr. Verna Stevens is in charge, assisted by Mrs. E. M. McComb, R.N. As there is no law forbidding the giving of birth control information in Delaware, the league plans to establish similar clinics throughout the state.

IOWA A struggle between the Lanteen Laboratories of Chicago, and the district attorney’s office of Des Moines may result in a test case as to the legality of distributing birth control literature in drug stores. Rufus Riddlesbarger, president of the Lanteen Laboratories, claims that section 13195 of the Iowa code, containing exceptions to the Iowa law forbidding “the sale or advertisement of any medicine, article or thing designed or intended” for birth control, permits the distribution of pamphlets issued by his firm and distributed by druggists. The section reads:

Nothing in the five preceding sections shall be construed to affect teaching in regularly chartered medical colleges or the publication or use of standard medical books, or the practice of regular practitioners of medicine or druggists in their regular business or the possession by artists of models in the necessary line of their art.

NEW YORK The Reverend Dr. Caleb R. Stetson, in his preface to the year-book of Trinity parish, New York City, issued in August, characterized the present attitude on birth control, companionate and trial marriages as “a throwback to outworn and outdated ideas, common enough in pagan society,” and expressed his gratification that the Protestant Episcopal Church “has remained officially silent on the unsavory topic of birth control.” As might have been expected his ideas brought out a shower of rebut-
tal opinions from prominent women physicians, among them Dr Hannah M Stone, who summed up the argument "Not only are proper birth control measures harmless to a woman's health, but in a majority of cases they are an invaluable aid to the conservation of health of the woman and the family."

Pennsylvania The Pennsylvania Birth Control Federation is able to report that it has had the most active summer since it organized in 1927. Mrs A C Martin, State Executive Director, has returned from a trip throughout the state, she has been confering with the Executive Boards of the local Committees and with the physicians who are conducting birth control clinics.

A State Board meeting was held at the home of the Vice-President, Dr Joseph Stokes, Jr., of Germantown on June 1st. Interesting reports were given by the chairmen of the various Leagues throughout the state Bethlehem. Mrs George L deSchweinitz told of the work of her committee in visiting 100 families and of the practical help they are giving in Bethlehem—50% of the fathers being out of work. Easton. Mrs Bolton Love, Chairman, sent a report of the activities of the Easton Clinic which is conducted by Dr Carl Gaines and is cooperating with the social agencies. Pittsburg. In June the Birth Control League of Allegheny County had its annual meeting and election of officers. Mrs Wm Thaw, Jr., was elected President. John M Versteeg, D D has been appointed Chairman of the Endorsement Committee. Dr Versteeg was the clergyman responsible for the endorsement favoring birth control that was passed by the Pittsburgh Conference of the Methodist Episcopal Church. Scranton, Mrs David Bues, Chairman, and Mrs N H Cowdrey, Vice-Chairman, arranged for a meeting of the Executive Board and Council of the Lackawanna County League which was held at the Woman's Club on July 23rd. Among those present were Mrs Edwin W Warren, Mrs C A Connell, Mrs Mortimer Fuller, Mrs Jacob Mechlowitz, Mrs Ralph A Ammermann, Mrs J C Ottinger, Mrs Paul Kadak and Mrs Guy Ellmore. Mrs Stuart Mudd and Mrs A C Martin were the speakers at this meeting. Mrs Mudd gave an interesting report of the activities of the Philadelphia Maternal Health Center. A Maternal Health Committee has been appointed for the Lackawanna County League.

Rhode Island The Rhode Island Birth Control League opened a clinic at 163 N Main Street, Providence, on July 30th. Contraceptive advice is given to married women referred by a private physician, hospital, clinic or social agency. The committee of physicians, one of whom attends each session of the clinic is Dr Edward S Brackett, chairman, Dr Paul Appleton, vice-chairman, Dr Anna M Dannemann, secretary, Dr Bertram H Buxton, Dr Eric Stone, Dr Robert Whitmarsh. The object of the Rhode Island Birth Control League, as stated in the by-laws is "to educate the public concerning the medical, social, economic, and ethical importance of birth control, to provide clinical and other service for birth control prescription and treatment, and to co-operate with the American Birth Control League."

A resolution condemning the operating of the clinic was adopted by the Board of Aldermen a week later, on August 6th, by vote of eight to three. The resolutions, given below, show little understanding of the general principles of birth control and of the objectives of the clinic. No further action has been taken.

Whereas, the operation of so-called birth control clinics in the city of Providence are not needed for any good purpose, and
Whereas, the operation of such clinics may do much harm by wrongfully influencing the health of the people of Providence, and

Whereas, the operation of clinics specifically for the purpose of birth control are morally wrong and may seriously affect the morals of the people of the city of Providence,

Now therefore, be it Resolved, That the Board of Aldermen hereby condemn the operation of such clinics and urge the people of Providence to refuse to become a party to such clinics.

ENGLAND

A BILL permitting voluntary eugenic sterilization for mental defectives was defeated in the House of Commons on July 21st by 167 to 89 votes The Woman’s Leader (London) comments editorially in its issue of July 24th “That this vote was due to the fear of antagonizing certain religious groups in their constituencies rather than to their individual conviction was clear from the derisive reception generally given to the fantastic arguments brought against the Bill by its opponent, Dr Morgan Before it is introduced again in the House of Commons far more spade work must be done to persuade the man and woman in the street to give the same support to this Bill as do many eminent scientists and others, including Miss Maude Royden, the Bishop of Winchester, Sir Thomas Horder, Sir Farquhar Buzzard, and Professor Sir J Arthur Thomson, M.A., who realize the imperative necessity of raising the quality of the race.”

HAWAII

A RESOLUTION expressing the desirability of regulation of births in order to achieve better born children was endorsed by the 11th territorial Conference of Social Work of Hawai, meeting in Honolulu on July 24th Dr Nils P Larsen, addressing the conference in the debate preceding the passing of the resolution pointed out that “birth control is not being advocated as a cure all It is merely an essential public health measure to help check the rising tide of inadequacy, mental deficiency, poverty and human agony It is attacking some of our problems at their source.” Dr Larsen quoted from the Church and Medical numbers of the Review, and quoted our leaflet “Birth Control is a Health Measure” (March, 1931, Review.)

INDIA

The Madras Neo-Malthusian League has begun to issue an excellent bimonthly periodical The Madras Birth Control Bulletin, giving views and news of the birth control movement in India. The objects of the League are

1. to spread among the people by all practical means, a knowledge of birth control and of its possibilities for human welfare,
2. to give under medical help and guidance, instruction on hygienic contraceptive methods to all married people who desire to limit their families or who are in any way unfit for parenthood,
3. to publish pamphlets and leaflets a periodical Journal on Malthusianism and birth control,
4. to organize lectures before societies of various kinds on this subject and,
5. to form a library and to subscribe for journals on birth control.

The limiting of membership to the following three classes is interesting. All persons above the age of 20 who are married or about to marry who are members of the medical profession or who have children are eligible for membership. Communications regarding the work of the league should be addressed to G Gopalaswami, 30, East Mada Street, Mylapore, Madras.

Preliminary figures of the 1931 census indicate that the population of India has increased over thirty million during the last ten years—approximately by ten per cent.

JAPAN

One of the promising features of the birth control movement in Japan is its close connection with the proletariat movement. Legalization for birth control is one of the first demands of popular parties in Japan. The first birth control association was established in Osaka, the largest industrial center of the empire last year, while a similar association in Tokyo, the capital city, was organized in May, 1931 (see July issue of the Review.)

The Japanese Birth Control Association was formed on March 10, 1930, by the Federation of Women, affiliated with the Zensoku Toshukai, the All-Japan Popular Party. One of its first activities was the founding of clinics at Abenobashi and at Minatoku, working class districts of Osaka. They are called Eugenic Consultation offices.

Contributed by Ryoichi Ishii
In the Magazines

THE NATIONAL CONFERENCE OF SOCIAL WORK

Not the least exciting feature of the conference was the manner in which birth control insinuated itself into the program as health. Call it Regulation of Births, as Chairman Robert W. Kelso did, or Better-Born Children, as Dr. Fred Adair of Chicago did—there it was. There were no joint sessions between the Health Division and the American Birth Control League, but there was a strong common bond that caused the two groups to overflow many of each other's meetings.

Dr. Adair, who hails from the University of Chicago Medical School, warned the division against a blanket acceptance of birth control as a solvent of social ills. "Birth control will not accomplish race betterment unless it takes into consideration two factors—compulsory segregation and sterilization of the unfit, and selection. The human race cannot afford to curtail the supply of human beings who are derived from superior groups and who are suitably reared, nor can it afford to leave the decision of reproduction to the individual actions of the inferior groups, such as mental defectives."

The American Birth Control League put on a meeting one broiling evening which all but burst the walls of the Gethsemane Parish House. Here George Packard, Chicago lawyer, discussed Is Birth Control Legal, and decided that "the real cause of contraception, confined as it should be to medical supervision, is not seriously hampered by the law in its present state." Here the Rev. David Bryn-Jones, Baptist pastor of Minneapolis, answered the question, Is Birth Control Ethical, with the words, "A rational control of reproduction is one of the conditions of the higher life for society." And here Dr. E. P. Lyon, dean of the Medical School of the University of Minnesota, countered the query, Is Birth Control Eugenic.

THE SURVEY, July 15, 1931

EDITORIAL

Birth control is once more a greatly agitated question before the many religious conventions being held in various parts of the United States this summer. Following the guarded statements of the Federal Council of Churches, three months ago, in favor of birth control, the general council of the Congregational and Christian Churches, meeting in Seattle, has declared its approval of "voluntary parentage." However, this new organization is definitely progressive in its attitude on many social and political issues. Elsewhere, the dicta of ecclesiastical councils are as a rule unfavorable and even alarmist. But the mere strenuous debating of the whole question in the open may be taken as a sign that the battle has already been won. Priests, pastors, and rabbis usually take sides only after new movements have gained an irresistible headway.

NEW REPUBLIC, July 22, 1931

EDITORIAL

I wish to reiterate that all objections to birth control can be met unanswerably except one—that the human race will degenerate if the superior races and the superior classes among civilized races will curtail the number of their offspring while inferior races and the inferior strata in civilized countries will continue their high birthrate. This must be prevented by all means, and it can be if we go about it earnestly and zealously, and if the civilized governments give us their cooperation.

CRISE AND GUIDE, July, 1931

THE CHURCHES AND THE STORK

Charles Stafford Brown surveys the attitude of the church towards birth control and concludes: "The general practice of birth control by some means is already an established fact. Many young people, despairing of getting any help or information from churches chiefly interested in a personal, legalistic salvation, are turning away from the churches and are frankly experimenting. But the opportunity is still here if we will accept it. It is an opportunity to drag the whole question of sex out from under the blanket of taboo and superstition that covers it. It is the opportunity to hold up before our youth the ideals of a Christian home. What will those ideals be? We will have to discover them, we do not fully know them yet. But at least we may be sure a Christian home will not be a home in which sex is thought to be naturally a filthy thing. It will not be a place where shame goes hand in hand with physical love. It will not be a place where the mother must bear child after child,
some of them unfit to live, until her own health is forfeit. Rather it will be a place where children are wanted and where they are eagerly sought when health and finances permit. At other times it will be a place where physical love need not be burdened with the worry of unwanted pregnancies. Surely a Christian home ought to be at least this.

"Will the churches accept this opportunity? I think yes and no. Yes in a few instances. No in the majority of cases. Outstanding leaders will, I think, appear in the churches to seize this opportunity and make much of it. But they will not be very numerous and in many cases their own churches will repudiate them. Then after a century or so the churches will all come around to the point of accepting birth control as a part of normal life. But that will not be until such acceptance has ceased to be dangerous or forward-looking.

—The Survey Graphic, August, 1931

ABORTION AND BIRTH CONTROL

A J Rongy, M.D. discusses the attitude of society toward abortion, historically and at the present time and laments the increase in abortion. He pleads that "the time is now propitious for intelligent medical opinion to become articulate and to assert itself definitely and uncompromisingly in favor of a complete revision of our laws dealing with birth control.

"The medical profession cannot close its eyes to the problem of birth regulation. Criminal abortion is rapidly becoming a national scandal. It is demoralizing society. It is undermining the profession. An honorable profession cannot view with indifference a source of revenue to its members, amounting to approximately one hundred million dollars derived through illegitimate and criminal practice. The physicians must clear themselves of such an indictment. They must help to bring about a modification of our laws, whereby such collusion between patient and doctor will be unnecessary. They must lead the way for a campaign of education on birth regulation, which will be equitable and just both to the state and its citizens."

—American Medicine, July, 1931

THE ONLY CHILD

D. A. Worcester discusses the problem of the only child and shows that he has better health and a better chance in life. "It is probably safe to say that parents who will spoil one child will spoil several if they have them to spoil, but that the parents who have only one child are a little more likely to be the kind of parents who do not spoil their children.

"It would seem fortunate socially if these parents could be persuaded to bring up more of the same kind. In any event, we must be careful not unnecessarily and artificially to handicap an only child by making him believe that he is handicapped when he is not."

—Hygeia, August, 1931

THE PRESENT STATUS OF BIRTH CONTROL IN ENGLAND AND THE UNITED STATES

A full and accurate account of recent developments in the birth control movement, by Dr. S. Adolphus Knopf. This article, which appears in three installments, presents a wealth of data and is recommended for a birds-eye picture of the present situation.

—Medical Journal and Record, Aug. 5, 1931

AUTOCRATS URGE HIGH BIRTH RATES

About two years ago Mussolini started a campaign to exact from the women of Italy a heavy increase in the birth of children. His demand was that the peninsula contain 60,000,000 population in the next twenty years. He declared that such a population would make itself felt in world affairs. That is his incentive. Children must be multiplied to give the state and the political dictator at its head additional political might.

The Kaisers and Mussolini have pressed their demands upon the women in spite of the dense populations which already tax the resources of Germany and Italy for their maintenance. The Pope likewise presses his high-birth-rate campaign in lands overpopulated equally with those of sparse population and in spite of business depressions and the increasing difficulty of maintaining the vast population of the earth on the resources which science and industry are now able to extract from it.

It is limitation of the birth rate, and not the means by which the limitation is accomplished, that the Papacy is fighting. Its demand is for large families and large Roman Catholic voting populations. It is the fact, not the methods, of birth control that angers it.

—The Protestant, August, 1931
Letters from Readers

FROM A SEMINAR ON YOUTH AND THE FAMILY

To the Editor

Enclosed is my check for $2.00 for a year's subscription to your magazine. I had not seen any issues of it until the time of the Congregational National Council in Seattle, when Dr. Harper referred to one or two exceedingly interesting articles in his Seminar on "Youth and the Family"—the Seminar which drew up the resolution on birth control which the entire Council finally adopted. I saw your magazine then, and should be interested in following it through the coming year as a subscriber.

Mrs. Dwight C. Smith
Bellingham, Washington

MINERS' WIVES NEED BIRTH CONTROL

To the Editor

It will probably interest your readers to know that during a recent study I made for the Emergency Committee for Strikers' Relief of the children of the coal miners of the West Virginia Coal Miners' Union, every mother I questioned eagerly asked for birth control information. Their eagerness seemed most significant to me and the results of my investigation is an indication that birth control propaganda is one of the most vital needs of this district.

I examined more than 200 children taken at random from the striking miners' families in the coal camps of the town of Ward and Gallagher. In Ward, where work has been steadily, the coal diggers being employed five-eighths of the working year, I found that the average weight for all the children was 12% below the standard, and that a diet consisting of pinto beans, potatoes and sou-belly (salt pork) had resulted in lowered resistance to all types of infection, colds, middle ear infections, tonsils, etc. In Gallagher, where work was not steady, conditions were far worse. None of the children I examined had been given milk of any sort after they were weaned, nor had they known fresh meat or vegetables except on very rare occasions. Their only change from the diet described above was berries gathered from the woodlands near their camp.

The average family in Gallagher consisted of seven persons, in Ward of nine, due to the fact that the mothers in Gallagher were younger than those in Ward. It is taken for granted that a woman should have a child every year. An entire generation of the children of American citizens engaged in the production of a basic need for power-civilization is being reared among conditions which inevitably lead to feebleness, degeneration, and crime.

Every mother in this district wants birth control information. Meanwhile one of the most direct ways of helping these people in their struggle for decent conditions is to contribute to their relief through the Emergency Committee for Strikers' Relief at 112 East 19th Street, New York City. Forest Bailey, Treasurer.

Ruth Fox, M.D.
Department of Pediatrics, Fift
New York City

BIOLOGIC CONTRACEPTION

To the Editor

In the editorial section of the Journal of the American Medical Association, for Aug. 8, 1931, (p. 394) appears a comment upon a statement by Dr. L. Rosenthal, in the Proceedings of the Society for Experimental Biology and Medicine, for May, 1931, to the effect that certain strains of colon bacilli have the power to agglutinate and paralyze human spermatozoa. This property is not destroyed when the bacteria are killed by heat, nor removed by repeated washings. It resides in the cell bodies of the organisms and is not present in Berkfeld filtrates.

This information may possibly be of interest in connection with biological contraception, which is causing much discussion of late. A very definite possibility of undesired permanence of the sterility which might be produced by these bacteria, lies in the fact that, while infecting human tissues with certain microorganisms is usually not difficult, it often requires strenuous (and then sometimes unsuccessful) efforts to remove an infection which has been established for some time.

George B. Lake, M.D.
Editor, Clinical Medicine and Surgery
Chicago, Illinois
BIRTH CONTROL A FRIEND IN NEED

To the Editor

I am unable to renew my subscription, as my husband works only two days a week at $4.35 a day. That is hard going for a family of six. The poor of our land need help and I will do all I can for birth control, for it sure did help us out in our time of need.

Mrs R G

Kentucky

IS BIRTH CONTROL LEGAL?
(Continued from page 250)

If the medical world refuses to see the desirability of contraception you certainly cannot make them see it by any form of legislation that makes it easy for them to see it. That is another of your problems—the answer to which requires unrelenting patience and appeal to reason, particularly among the doctors themselves. The course is long and devious, but you certainly are not faced with the unsurmountable obstacle that confronts you on the threshold of any legislative action. Teaching the subject in medical schools is a matter of prime importance. Recently the New York Academy of Medicine unqualifiedly recommended the establishment of birth control clinics wherever the service is needed, and the teaching of contraception in medical colleges and in hospital clinics.

We have a much more enlightened world to deal with than ever before, and one less and less limited by tradition, superstition and ignorance. The demand for legitimate contraceptive information should be instilled in every married woman's heart. The legislators may well be left alone until that demand has finally undermined the obstacle that now alone interfered with legislative action. An obstacle that rests on medieval concepts cannot forever resist the searching rays of modern sociology.

Answering directly the question whether birth control is legal, I would say that the practice of birth control is legal. As to instruction in birth control methods, my opinion is that no physician should consider the laws as they stand as interfering with his superior right to impart full information and instruction on the subject to any patient anywhere whose welfare requires it. So far as the lay public is concerned, in a majority of the states private personal information may be given freely. But the law, following the usual course of indirection in such matters, has stepped in in some places and shaken an admonishing finger. Laws and ordinances exist in a few localities expressly forbidding public information on the subject, advertising where devices can be obtained, or the circulation of printed matter—and a few other limitations confined to matters of publicity. In those places and only in the manner prohibited, the dissemination of birth control instruction is legal both for physicians and the lay public. Then there are the Congressional laws, confined only to the use of the mails, express companies in interstate commerce, and the importation of goods, that make illegal the employment of those instrumentalities by all, where birth control is involved. That still leaves you with a free hand. For if the laws of your state or municipality do not make actual mention of contraception, in those places birth control as a subject of practice, instruction, or advertising (except where Congress forbids the use of the agencies over which only it has control) is legal. In my judgment the laws against obscenity generally do not embrace the subject of contraception—and every day we live makes that conclusion more certain.

An invitation for the bootlegging of contraceptive devices is extended by the laws of Colorado, Indiana, Massachusetts, Mississippi, New York, Wyoming and the District of Columbia, which forbid their manufacture and sale, but not their use, and by the laws of Iowa, Kansas, Minnesota, Missouri, New Jersey and Pennsylvania, penalizing their sale, without frowning on their use. Space forbids any attempt to cover all the diversities of these many-sided laws.

All this does not mean that the associations devoted to the cause of birth control may not continue to labor as heretofore to exploit their principles, in the way of explaining the desirability, if not necessity, of an intelligent understanding of what birth control means, what its purpose is, and what it hopes to accomplish—leaving it to the professional world to give the practical instruction where it will do the most good. In these ways, and in these ways alone, can the main interference with legislative reform be eventually uprooted, and the immense work of making the restraining laws more elastic finally be accomplished.

Address delivered at the National Conference of Social Work, Minneapolis, June, 1931.
MARGARET SANGER tells her own story

It is not only her autobiography, but a fascinating narrative and a history of the birth control movement in America. It will be published on September 28th.

FARRAR & RINEHART
9 East 41st Street - New York

MY FIGHT FOR BIRTH CONTROL

PHYSICIANS’ MANUAL OF BIRTH CONTROL

By
Antonette F. Konikow, M.D.
Author of "Voluntary Motherhood"

The Technique, The Merits, and The Demerits of Every Birth Control Method Now Generally Advocated or Practiced

"Exactly what it purports to be -- a practical guide for physicians in contraceptive technique"
   --New England Journal of Medicine

"In a word a better and more practical book cannot be recommended"
   --Medical Review of Reviews

245 pages Illustrated $4.00, express prepaid
Statistical Review of Over 1000 Cases

SOLD TO PHYSICIANS ONLY

BUCHHOLZ PUBLISHING COMPANY
1501 Broadway, New York City

Please use letter head or prescription blank in ordering
Remittance should accompany order
Refund in 10 days if not satisfactory

Is the Birth Control Review In Your Local Library?

Birth Control is so vital a social problem today, that the Review has become a necessity for any library, not only for current reading, but for permanent reference.

Has Your Local Library availed itself of our half price library subscription rate? A gift subscription from you to your library will promote a better understanding of Birth Control in the entire community.

Is the Birth Control Review

In the Library of the Nearest Educational Institution—College, Normal School, Seminary, etc?

If not, introduce it with a gift subscription

SUBSCRIPTION $2.00 per year, $3.50 for two years

Special Rate for Libraries $1.00 per year, $1.75 for two years