America's First Birth Control Clinic
By MARGARET SANGER

Marriage a la Mode
By V. F. Calverton

What Blocks Birth Control Legislation?

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Editorial

THE OUTSTANDING and almost incredible fact about the spirited story which Mrs Sanger tells in her new book, of the first American Birth Control Clinic—its establishment, its short and spectacular existence and its turbulent extinction—is that these events happened only fifteen years ago. It was in October, 1916, that Mrs Sanger, with Miss Fama Mindell and Mrs Ethel Byrne, bravely took the step which they knew would probably lead to jail. At that time the birth control movement was not new. Malthus had published his revolutionary book on population over a century before Margaret Sanger entered the lists with a practical solution for the problems that Malthus had enunciated. Information concerning means of preventing conception, some of it crude and unreliable, had been seeping out both in Europe and America in pamphlets which were persistently suppressed by the police. Miss Annie Besant, in England, in 1877, was indicted along with Charles Bradlaugh for circulating “indecent literature,” after she had distributed nearly 200,000 copies of the American pamphlet *Fruits of Philosophy*, written by Dr Knowlton in 1833 and first published in Boston. At that trial the court refused to convict, and from that time birth control information was under no legal ban in Great Britain. There were many advocates of birth control who suffered contumely and imprisonment before Margaret Sanger came on the scene, yet it is just and right to consider that the American movement was originated and led by Mrs Sanger.

The difference between Mrs Sanger and other advocates of birth control was one of degree, of singleness of purpose, of perseverance and whole-heartedness. Emma Goldman, in her autobiography, to be issued this month, tells of her fight for birth control and of prosecutions directed against her and Ben Reitman for distributing information. But in the case of Emma Goldman, as also in that of Mrs Annie Besant, birth control activity was merely incidental to a career chiefly devoted to other aims. Mrs Besant and Charles Bradlaugh were vindicating the right of free speech and a free press in England, and the illegality of trying to suppress these fundamental rights, at a time when the cause for which free speech was demanded was highly unpopular. It was the same with Emma Goldman and Ben Reitman. Their first objective was the spread of their anarchistic doctrines. But Margaret Sanger’s whole heart and soul were absorbed in the task of bringing relief to suffering womanhood and she gathered around her a group of like-minded women. There could be no dropping of birth control for some other cause, for birth control was the main objective towards which the newly formed groups worked. The result is manifest. Instead of one little clinic, led merely by a trained nurse, there are now seventy and more clinics, legally operating in the United States, under the care of trained physicians, and properly equipped with all that is necessary for scientific work.

Nor must it be forgotten that without Mrs Sanger’s fight, these clinics would not have been possible. The decision in the Court of Appeals on Mrs Sanger’s conviction, while it did not free her from restrictive legislation, gave liberty to the physicians of New York State to advise contraception “for the cure or prevention of disease.” This permission in section 1145 of the New York statutes, had been construed very narrowly, as affecting only venereal disease. The broader interpretation given by Judge Crane was utilized by Mrs Sanger and the American Birth Control League when the second clinic was established in New York in 1923. Emboldened by this example clinics were founded not only in New York but in other States, and it would be a rash and foolish publicist, who would now label any one of the seventy odd birth control clinics, which have sprung from the seed of Judge Crane’s decision in 1918, as “A Public Nuisance.”
As we go to press, the fiftieth convention of the Episcopal Church is still in session. An antagonistic note on the birth control issue was struck at the formal opening on September 16th, by Bishop Michael Bolton Furse of St Albans, England, who delivered the convention sermon. Bishop Furse, it will be remembered, led the unsuccessful opposition to the resolution giving “guarded” approval of birth control, passed by the Lambeth Conference in England last year. It is generally understood that the Commission on Marriage and Divorce, appointed by the General Convention of 1928, originally considered birth control in the report prepared for the current convention, but that this was deleted before the report was presented. The convention has its ultra-conservative as well as its liberal element and a division of opinion, if not a rift, seems likely if the subject of birth control is brought to the fore. Doubtless fearing this, it has been relegated to discussion by the House of Bishops in secret session. It is hoped that the Episcopal Church of America will not show itself less aware of modern problems than its sister churches both here and abroad.

Bishop Furse’s attack on birth control was based largely on the contention that this practice is one of the main causes of our high divorce rate. Coupled with this statement is his philippic against Russia, the land which has destroyed the sanctity of marriage, etc., etc. It is interesting in this connection to quote a United Press report of September 27th from Moscow to the effect that the Russian divorce rate has fallen sharply during the last six months, and to note that in Russia the dissemination of birth control information is a government function, and is a well-recognized part of the health program of the five-year plan. Whether or not we approve of the Soviet experiment as a whole, we must applaud its method of grappling with the problems of birth control, maternal care and abortion. The results are beginning to justify the Russian solution and invite imitation.

Birth control, blamed for causing divorce, is also blamed for not being the cure-all of the divorce evil. Dr. Henry Neumann, leader of the Brooklyn Society for Ethical Culture, and good friend of the birth control movement, recently took issue with Judge Ben B. Lindsey on whether birth control is the way out of the present marriage labyrinth. This is indeed putting up the proverbial straw man, and it is an attitude often fostered, as in the present instance, by birth control’s ardent advocates. To call birth control a solution of all social ills from prostitution to maternal mortality is obviously as wide of the mark as to hold it responsible for divorce, crime, and the depression. Those who claim the former potency for birth control do it almost as great a dis-service as those who blacklist it altogether.

What is needed is a reasoned understanding of what it is, and what it can do. Birth control is a part of medical knowledge. It is, according to Dr. Robert L. Dickinson, Secretary of the National Committee on Maternal Health, needed by one-fourth of our adult population at short intervals during half a lifetime. It is needed by all mothers to properly space their children, it is needed by women to whom another pregnancy would be physically disastrous, it is needed by parents who have as many children as they can support. It is needed to help solve such problems as overpopulation, dependency, maternal and infant mortality, feeble-mindedness, etc. It is no devil incarnate, nor yet an omnipotent angel, but a necessary part of modern life. When all who are concerned with bettering life—doctors, judges, clergymen, social workers—see birth control simply and clearly, they will know how to use it for the good of the race.
THE selection of a place for the first birth control clinic was of the greatest importance. No one could actually tell how it would be received in any neighborhood. I thought of all the possible difficulties—the indifference of women's organizations, the ignorance of the workers themselves, the resentment of social agencies, the opposition of the medical profession. Then there was the law—the law of New York State.

Section 1142 was definite. It stated that no one could give information to prevent conception to anyone for any reason. There was, however, Section 1145, which distinctly stated that physicians (only) could give advice to prevent conception for the cure or prevention of disease. I inquired about the section, and was told by two attorneys and several physicians that this clause was an exception to 1142 referring only to venereal disease. But anyway, as I was not a physician, it could not protect me. Dared I risk it?

I began to think of the doctors I knew. Several who had previously promised now refused. I wrote, telephoned, asked friends to ask other friends to help me find a woman doctor to help me demonstrate the need of a birth control clinic in New York. None could be found. No one wanted to go to jail. No one cared to test out the law. Perhaps it would have to be done without a doctor. But it had to be done, that I knew.

Finally at 46 Amboy Street, in the Brownsville section of Brooklyn, we found a friendly landlord with a good place vacant at fifty dollars a month rental, and Brownsville was settled. It was one of the most thickly populated sections. It had a large population of working class Jews, always interested in health measures, always tolerant of new ideas, willing to listen and to accept advice whenever the health of mother and children was involved. I knew that here there would at least be no breaking of windows, no hurling of insults into our teeth, but I was scarcely prepared for the popular support, the sympathy and friendly help given us in that neighborhood from that day to this.

We determined to open a birth control clinic at 46 Amboy Street to disseminate information where it was poignantly required by human beings. Our inspiration was the mothers of the poor, our object, to help them.

With a small bundle of handbills and a large amount of zeal we fared forth each morning in a house-to-house canvass of the district in which the clinic was located. Every family in that great district received a "dodger" printed in English, Yiddish and Italian.

Would the people come? Did they come? Nothing, not even the ghost of Anthony Comstock, could have stopped them from coming. All day long and far into the evening, in ever-increasing numbers they came. A hundred women and a score of men sought our help on that opening day.

It was on October 16, 1916, that the three of us—Fama Mindell, Ethel Byrne and myself—opened the doors of the first birth control clinic in America. I believed then and do today, that the opening of those doors to the mothers of Brownsville was an event of social significance in the lives of American womanhood.

News of our work spread like wildfire. Within a few days there was not a darkened tenement, hovel or flat but was brightened by the knowledge that motherhood could be voluntary, that children need not be born into the world unless they are wanted and have a place provided for them. For the first time, women talked openly of this terror of unwanted pregnancy which had haunted their lives since time immemorial. The newspapers, in glaring headlines, used the words "birth control" and carried the message that somewhere in Brooklyn there was a place where contraceptive information could be obtained by all overburdened mothers who wanted it.

Ethel Byrne, who is my sister and a trained nurse, assisted me in advising, explaining, and demonstrating to the women how to prevent conception. As all of our 488 records were confiscated.
by the detectives, who later arrested us for violation of the New York State law, it is difficult to tell exactly how many more women came in those few days to seek advice, but we estimated that it was far more than five hundred. As in any new enterprise, false reports were maliciously spread about the clinic, wild stories without the slightest foundation of truth. We talked plain talk and gave plain facts to the women who came there. We kept a record of every applicant. All were mothers, most of them had large families.

It was whispered about that the police were to raid the place for abortions. We had no fear of that accusation. We were trying to spare mothers the necessity of that ordeal by giving them proper contraceptive information. It was well that so many of the women in the neighborhood knew the truth of our doings. Hundreds of them who had witnessed the facts came to the court room afterwards, eager to testify in our behalf.

One day a woman by the name of Margaret Whitehurst came to us. She said that she was the mother of two children and that she had no money to support more. Her story was a pitiful one—all lies, of course, but the government acts that way. She asked for our literature and preventives, and received both. Then she triumphantly went to the District Attorney's office and secured a warrant for the arrest of my sister, Mrs. Ethel Byrne, our interpreter, Miss Fama Mindell, and myself.

The crusade was actually under way! It is no exaggeration to call this period in the birth control movement the most stirring period up to that time, perhaps the most stirring of all times, for it was the only period during which we had experienced jail terms, hunger strikes, and intervention of the Chief Executive of the state. It was the first time that there was any number of widespread, popular demonstrations in our behalf.

I refused to close down the clinic, hoping that a court decision would allow us to continue such necessary work. I was to be disappointed. Pressure was brought upon the landlord, and we were dispossessed by the law as a "public nuisance." In Holland the clinics were called "public utilities".

When the police-woman entered the clinic with her squad of plain clothes men and announced the arrest of Miss Mindell and myself (Mrs. Byrne was not present at the time and her arrest followed later), the room was crowded to suffocation with women waiting in the outer room. The police began bullying these mothers, asking them questions, writing down their names in order to subpoena them to testify against us at the trial. These women, always afraid of trouble which the very presence of a policeman signifies, screamed and cried aloud. The children on their laps screamed too. It was like a panic for a few minutes until I walked into the room where they were stampeding and begged them to be quiet and not to get excited. I assured them that nothing could happen to them, that I was under arrest but they would be allowed to return home in a few minutes. That quelled them.
The men were blocking the door to prevent anyone from leaving, but I finally persuaded them to allow these women to return to their homes, unmolested, though terribly frightened by it all.

Crowds began to gather outside. A long line of women with baby carriages and children had been waiting to get into the clinic. Now the streets were filled, and police had to see that traffic was not blocked. The patrol wagon came rattling through the streets to our door, and at length Miss Mindell and I took our seats within and were taken to the police station.

As I sat in the rear of the car and looked out on that seething mob of humans, I wondered, and asked myself what had gone out of the race. Something had gone from them which silenced them, made them impotent to defend their rights. I thought of the suffragists in England, and pictured the results of a similar arrest there. But as I sat in this mood, the car started to go. I looked out at the mass and heard a scream. It came from a woman wheeling a baby carriage, who had just come around the corner preparing to visit the clinic. She saw the patrol wagon, realized what had happened, left the baby carriage on the walk, rushed through the crowd to the wagon and cried to me, "Come back! Come back and save me!" The woman looked wild. She ran after the car for a dozen yards or so, when some friends caught her weeping form in their arms and led her back to the sidewalk. That was the last thing I saw as the Black Maria dashed off to the station.

THE TRIAL

Arrested at the same time as my sister, and like her charged with the dissemination of birth control information, I continued my activity as soon as I was released on bail. My first act had been to reopen the clinic in Brownsville. I was promptly rearrested and then charged with "maintaining a public nuisance." By the time my case came up for trial, I was becoming more and more familiar with legal procedure and courtroom conventions. I must say that I was also more and more puzzled by the stilted language, the circumlocutions, the respect for precedent. I saw the realities, the suffering. All of these statutes were being defended while over the whole country women were suffering and sacrificing their lives. I must confess that these legal battles, fought in a curiously unreal world, intensified my defiance to the breaking point. I longed for a battle in the open, in simple, honest terms, without hypocrisy, above board and on real merits.

My trial was as different from my sister's as day is from night. Although little more than three weeks had elapsed between them, public opinion had changed in a very short time.

The courtroom was packed. Smartly dressed women were present as well as the poor women of Brownsville. Reporters turned out in large numbers. Hundreds of photographs were taken. I went to the courtroom accompanied by a group of prominent women who had entertained me at breakfast. Officially, I had the backing of several organizations: The International Child Welfare League, the Women's City Club, the Committee of One Hundred, the various State Leagues for Birth Control.

The Court of Special Sessions was seething with a crowded assortment of humanity. About fifty of the poor mothers of the Brownsville section crowded into the courtroom with their children, their nursing babies, their fruit, their bread, their pacifiers and their extra diapers. No less than thirty of these mothers had been subpoenaed by the District Attorney. Their testimony was to be offered in evidence against me, but they, dear things, smiled reassuringly at me, certain that they were going to help free me. Most of them had been in the Amboy Street clinic the day the raid had taken place.

I admitted the charge of giving birth control advice to the poor mothers of Brownsville. The prosecutor had little to prove. I knew I had violated the letter of the law, I was fighting that law; I thought there would be no argument at all. But once again an untrue charge was made. Police Sergeant John Mooney said I had told him that our whole clinic was "a bluff," run to see if we could "get away with something, to do away with the Jewish people." As that accusation fell flat, he then tried to make it appear that the clinic was a money-making affair. Our ten-cent fee for the registration of patients did not begin to cover the regular expenses, of course, this was merely one of the stories our opponents had concocted to discredit us, if possible. We were faced with vindictive lies on every hand.

Justices Freschi, Herman, and O'Keefe sat as a tribunal. My brilliant young attorney strongly advised me to accept a suspended sentence, if it were proffered. Owing to my ill health, he wanted me to avoid the prison term. The case was a big
one, and to his legal mind, freedom alone meant victory.

I sat listening impatiently to what seemed an interminable discussion between my lawyer, Mr Goldstein (now Magistrate) and Judge Freschi on the bench. Finally, the decisive question was put to me.

"All we are concerned about is this statute, and as long as it remains the law will this woman promise here and now unqualifiedly to respect it and obey it? Now, is it yes or no? What is your answer, Mrs Sanger?"

"I cannot respect that law as it stands today," I answered. Then I was sentenced.

"Margaret Sanger, with the additional evidence submitted by the learned District Attorney after your case reopened last Friday to meet the claim that the proof was insufficient, there is now additional evidence that makes out a strong case that you established and maintained a birth control clinic where you exhibited to various women articles which purported to be for the prevention of conception, and that there you made a determined effort to disseminate birth control information and advice.

We are not here to applaud nor to condemn your beliefs, but your declarations and public utterances reflect an absolute disregard for law and order. You have challenged the constitutionality of the law under consideration and the jurisdiction of this Court. When this is done in an orderly way, no one can find fault. It is your right as a citizen. Refusal to obey the law becomes an open defiance of the rule of the majority as expressed in this statute. I can see no good reason for all this excitement by some people. They have a perfect right to argue freely about amending the law, but not to advise how to prevent conception.

"While the law is in its present form, defiance provokes anything but reasonable consideration. It is wholesome that we have discussion by citizens on matters that affect the welfare of the citizens. "People have the right to free speech, but they should not allow it to degenerate into license and defiance of the law. The judgment of the Court is that you be confined to the house for the period of thirty days."

After the sentence had been pronounced by the presiding judge, there was a moment's silence, and then a murmur of protest and resentment spread throughout the crowded room.

Birth Control in Earlier Days

By Norman E. Himes

The remote history of birth control is not only unknown, but it is difficult to conceive of its ever becoming known. None the less we are aware that many primitive peoples, especially in Africa and Austral-Asia, have exercised some means of contraception, though they were for the most part ineffectual, magical procedures. Abortion and infanticide were more frequently resorted to.

The remote pioneers were Greek and Roman physicians and natural scientists. The Egyptians, also, some 1850 years before the birth of Christ understood, and evidently practiced, quasi-rational methods. What is still more strange, in view of the slowness (but certainty) with which the medical profession in America is coming to adopt birth control as an individual and public health measure, is the fact that in Greek and Roman antiquity, atokla—the Greek name for devices to prevent conception—were not only known and used by the medical profession, but their employment was considered a legitimate phase of the healing art. No doubt the recipes were handed on by word of mouth, we are certain that writers copied the recipes of predecessors. In the teaching of contraception, therefore, some of the physicians of antiquity held a more advanced viewpoint than some of our medical schools.

Since the Arabians learned most of their medical science from the Greeks, we find them discussing contraception. One thirteenth century writer whose works, translated into French, I have thoroughly searched, detailed no less than twenty recipes for the prevention of conception. Unfort-
Fortunately they were largely, but not exclusively magical

Works written during the Middle Ages frequently mention in all seriousness the most absurd methods. Often they are hardly more than charms based sometimes upon symbolic magic. Not a few of these "prescriptions" have been traced in recent years in isolated portions of Europe—an interesting example of cultural persistence. Some of the recipes designed to cure sterility were actually workable contraceptives.

The present Dark Age in medicine (so far as contraception is concerned) is a hang-over from the Middle Ages, when the technique developed by the Greek and Roman physicians was lost. During the Middle Ages science was on the defensive, the forces of rationalism were as weak as those of obscurantism were strong. Curiously enough, since other problems forged into prominence, we know hardly more of contraception in the period 1500-1800 than we do of its history in the first few centuries of our era.

Though Francis Place (1771-1854) had many predecessors so far as the dissemination of medical information was concerned, he was the first writer in history, so far as our present knowledge goes, to give more than passing attention to the economic, social, health and political implications of birth control. The remarks to be found in his Illustrations and Proofs of the Principle of Population, were a mere beginning. For, the articles from his pen, usually anonymous, in the working-class press were even more daring and complete. His handbills told the populace what it really wanted to know—the actual methods. Supported by John Stuart Mill, he carried on a debate with a prominent socialist in a radical periodical Place's training of disciples—of Richard Carlile and of the Newgate Neo-Malthusians—is also noteworthy. His international influence is definitely traceable. He was, in part, the guiding inspiration of Robert Dale Owen and Dr Charles Knowlton, the two American pioneers.

In fact all the nineteenth century English Neo-Malthusians were more or less directly the disciples of Place in the sense that they shared, amplified and diffused a growing body of intellectual heritage on this subject. Conspicuous among these were Charles Bradlaugh and Annie Besant (the proper pronunciation rhymes with pleasant)—the latter the subject of the biography here reviewed. Bradlaugh and Besant will be recalled as the leading figures in perhaps the most famous birth control trial in history. Their great service was in clarifying the legal atmosphere. Besant's connection with the birth control workers of the past was through Bradlaugh, who had been befriended in early years by Carlyle, and through Dr Charles Drysdale, another pioneer.

Mrs Annie Besant, who is still living, has experienced one of the most extraordinary careers of any woman living. Her eighty years of high adventure and public service will leave an indelible record on the pages of history. She moved rapidly from one sphere of action to another. Hers was one of those glorious maladjusted lives, which regardless of what she took up, never left her emotionally and intellectually satisfied. Her curiosity was insatiable, her energy enough to exhaust the resources of several. The wife of a north-of-England curate, she came to embrace atheism and worked with Bradlaugh in defending the decency of the Knowlton pamphlet. Then she gave up atheism and birth control for theosophy. Throughout this period she was a lecturer, editor and voluminous writer. As a Fabian, and when British socialism was just beginning to take practical root, she led the famous match-girls' strike. She helped to "make" George Bernard Shaw by publishing in one of her periodicals his unreadable first novel—at least the first published—Love Among the Artists. Shaw, at the time, could find no other publisher. In later years Mrs Besant's part in awakening the rising nationalism of India has been prominent.

Mrs Williams describes Mrs Besant's variegated career with imagination, vividness and skill, with a facility for literary finish that is charming and absorbing. Though we have here a fictionalized biography rather than an original, painstaking (and usually dull) research product, the result seems remarkably accurate and informative. Occasionally the account rises to a form of description that is distinctly beautiful (p. 136)

What, briefly, is Mrs Besant's significance in the history of the birth-control movement? As Place initiated the process of socialization, Mrs

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1 Recently reissued, with some of Place's letters on birth control. Houghton, Mifflin Co., Boston and New York

$3.50
Besant helped in legalization. More than that, her Law of Population, written after the Knowlton trial, and prior to her rejection of Neo-Malthusianism to become a Theosophist, disseminated medical information. Mrs. Williams' conclusion may not be original, but it is at least true that "it was a revolutionary victory that these two outcasts won for the society which spurned them. Perhaps in establishing the right to circulate birth control information, Anne Besant came nearer to the secret for which she has searched all her life than she has ever come since. [For] this was the greatest achievement of all Annie Besant's many years of life."

**Marriage a la Mode**

*By V F Calverton*

The author makes a provocative case for the promiscuous impulses of women as well as men, and criticizes some current books for ignoring this factor in marriage. A prominent psychiatrist will present the case for monogamy in the next issue.

A nice commentary on civilization, this three books* on marriage, all determined to tell the truth about an institution that is thousands, nay tens of thousands, of years old. And these three books are but a small part of the total number of books published in the last ten years on the same theme.

Just as man in the eighteenth century began to wake up to the fact that religion was founded upon superstition—after having been religious for tens of thousands of years—so today man (and woman too, don't forget) is suddenly waking up to realize that marriage as an institution was rooted in a goodly number of superstitions also. These three books are presumably part of that awakening. On the whole, they are not much better nor much worse than most of the other books which have been written on this topic in recent years. None of them is original, challenging, or courageous. The Van de Velde book is easily the best of the three. Its survey of the field is certainly more comprehensive than that of the other two books, and while it is sentimental in places, it is never silly. Bjerre's book is silly, and Isabella Hastie Smith's is sillier. If Van de Velde's ideas of ideal marriage seem a little old-fogeyish and anachronistic, Bjerre's are old-womanish, and Smith's are simply childish. In a few words, Bjerre's rhapsodic advice to young people and his comments upon the philosophy and psychology of sex relationships are streaked with that kind of sentimentality which may still have its place in the movies but certainly deserves no place within the covers of a book. Miss Smith's book, which is "based upon lectures delivered before the Central Branch of the Y W C A of Philadelphia" is a nice catechetical exercise for adult people who have never grown up or for young people who will never grow up. Its sweet words about spiritual preparation for marriage, and its nice, nice comment about social life with men before marriage, impregnated as they all are with the Christian concept of sweetness and light, are just about enough to make the book into a successful religious tract but not into a scientific study.

It is amusing if not amazing to note how innocently all three of these authors glide over the main crux of the sexual problem. While most writers in this field have considered the difficulties which the male experiences in trying to adjust his polygamous impulses to the regulations of monogamous marriage practically none has considered the difficulties that confront woman in this same respect. Woman, they take it for granted, is infinitely monogamous—which means that by adopting this fallacy they are able to escape the most important issues in question.

What these authors fail to observe through ignorance or refuse to observe through cultural blindness is the real truth about the sexual nature of both men and women. The realization of the fact that the natural propensities of homo sapens are promiscuous instead of monogamous means...
that we must understand at the very beginning that our present marital organization, with its economic motivations and legal coercions, is in conflict with biological impulses and not in harmony with them. The primary source of sexual difficulty and distress in our civilization is inherent in that conflict. "Monogamic patriarchal societies" Briiffault has pointed out, "are particularly abnormal and monstrous in a biological sense." While this does not mean that we should live as primitives in order to be in harmony with our natural urges, it does mean that we must appreciate the conflict that exists between biological impulses and cultural ethic, and apply ourselves to the complicated and delicate task of resolving that contradiction.

In a fundamental sense this conflict is just as important in the case of women as in that of men. In the eighteenth and nineteenth centuries when women were taught that sex was a sin this conflict exercised little influence over feminine behavior. In the twentieth century, however, and especially since the last war, when women have rediscovered sex, as it were, and become sex-conscious, this conflict has begun to play a more and more important role in her life. With the development of woman's sex consciousness in recent years a host of sex problems have been created which had little existence in the last century. It is these problems which are most important to consider in connection with "ideal marriage," the "remaking of marriage" and the question as to whether persons "are ready for marriage"—but it is just these questions which the authors of these books fail to consider. While they are willing to talk about sex with more frankness in reference to its physical details, they still labor under the illusion of 19th century theories of sexual behavior. In other words, they shut their eyes to the biological difficulties of monogamy and write as if everyone had only to accept their psychological wisdom in order to find marital felicity. Nothing could be more absurd. And not until we develop a new school of sex writers who consider sex in terms of its biological background and discuss the nature of sexual life in terms of the conflict between cultural tradition and biologic urge, will we be able to produce intelligent and significant books on the problem of marriage in particular or sex in general.

Let us consider again for a moment the common fallacy which permeates almost all sex writing today—the fallacy of innate feminine monogamy. In the main, this fallacy can be traced back to the erroneous teachings of Westermarck. But not only was Westermarck wrong in his assumption, as Briiffault and others have conclusively shown, but what is worse is that all the writers who have followed him have duplicated his same errors in an even more flagrant fashion.

Whatever brief some may hold for woman's inclination toward monogamy, it certainly cannot be on the basis of her previous behavior. As we shall see from our discussion of her status and conduct in earlier societies, she certainly is not innately or biologically monogamous. If she is monogamous, it is because of the prevailing customs, and not because of anything inherent in her sex. When the prevailing customs are in a condition of decay, she is no more likely to be monogamous than man—and no one has ever dared argue that man is genuinely monogamous by nature. On the contrary, many will admit that he is naturally polygamous. But woman? Never!

Now what I wish to prove is that women are by nature no more monogamous than men, and no less polygamous. Those who have contended in recent years that although men may have displayed polygamous tendencies throughout history, women have always preferred the monogamous relation, have merely tried to build up a rationalization for their own morality. There is not a single consecutive historical argument that can be scientifically submitted in defense of this thesis. On the other hand, there is abundant evidence that woman's sexual tendencies are biologically no less variable than those of man.

The best historical proof of this is to be found in those primitive communities where the conditions of life do not hamper the sex expression of women any more than of men. Among the natives of Victoria the women have so many lovers that "it is almost impossible to tell the true paternity of the children." Brazilian historians tell us that among the Guayaurus and the Guanas, "the women, more especially the nobler ones, have one or two lovers who are day and night at their side." In Arabia and Madagascar, women of rank despise a marital connection with only one man, and are open in their possession of many lovers. In Sierra Leone it is considered ill-bred of a married woman to refuse the addresses of a lover.

Thus it is obvious that, whenever conditions have allowed it, woman has rejected the monogamous relationship as frequently as man. Nor does this mean that she is inherently more polygamous.
than he. It simply means that, granted equal freedom, she tends to be equally variational and multiple in her sex expression.

From our analysis so far we can conclude that woman, when endowed with sexual freedom equal to that of man, has a tendency toward multitudinous loves instead of monogamous ones.

One of the main arguments in the logic of the "inherent monogamist" is resolved in the one word—pregnancy. Pregnancy is the final force that holds woman to monogamy. This she cannot escape. Pregnancy undoubtedly requires a degree of protection which man, economically at least, can supply better than the child-bearing woman. But this does not mean that the man must be her monogamous lover. She can derive protection from three lovers as well as one, and be none the worse for it. There remains, it must not be denied, the problem of paternity, which under the conditions of our culture would be too important to persist unsolved. Under a new society, however, where, as John B. Watson urges, children will be cared for by many mothers instead of one, this problem would largely disappear.

But there is a revolution occurring in moral life which does not even necessitate such a profound change in culture that woman will be free of the handicap of pregnancy—and that is the development of the science of birth control. Even the economic independence of modern woman would have been inadequate fortification for her recent revolt if the danger of pregnancy were always imminent. Her plunge into the economic world has rapidly made her individually independent, but it has seldom equipped her sufficiently to combat all the costs of pregnancy, childbirth, and child-rearing. It was only the coming of birth control that was able to remove this fear and shift the emphasis in sex life from its procreational aspects to the recreational. In the sex world as well as the economic or political, women have become the equals of men. The threat of pregnancy, which has terrified so many women in the past into a submission to our culture, is no longer a Damocles' sword hanging constantly over their heads.

The statistics collected by Dr. G. V. Hamilton in his study of one hundred married men and one hundred married women are important in connection with this problem. Forty-one of these married women had outside love affairs, while only twenty-nine of the husbands had such affairs. What we have here is a definite testimony to woman's new behavior. Here are married women, still living with their husbands, who are at the same time having love affairs with other men to complement their emotional experience. There was a time when this Madame Bovary reaction was singular. Today it has become common. Women are increasingly discontent with their husbands. Divorces demanded by women represent one revolt of the female sex against the old, lifelong monogamy. Their extramarital affairs represent an even more recent and more definitely antimonogamous tendency.

Anyone who is intimately acquainted with other studies in this field, in particular with the work of Judge Ben Lindsey and the revolt of modern youth, and who is at the same time aware of the actual behavior of men and women as reported by their own words, by newspapers, and by courts, realizes that the statistics given above are but a mild indication of what is already a deep-rooted trend. The monogamy of women is dependent upon the success of the family and the home, but both institutions, as even the conservative critic admits, are today in a state of disorganization and decay. The rigid regulations which once held women in check have lost their old power.

As Alyse Gregory has pointed out ("The Changing Morality of Women," Current History), the girl now sows her wild oats as well as the boy, for "her employer asks no questions as to her life outside the office. She has her own salary at the end of the month, and asks no other recompense from her lover but his love and companionship." She is no longer dependent upon her family for her livelihood—nor, in many instances, when she is married, is she dependent upon her husband.

It is a new woman, then, who has come upon the contemporary scene, a new woman with new potentialities, new desires, and new demands, and it is this new woman as well as a new man who has to be considered in the moral and marital problems of today and tomorrow. Not only do these authors, Van de Velde, Bjerre and Smith give no consideration to this new woman and new man, and the conflicts which have arisen with their coming, but, what is even more tragic, very few other authors in this field have given sufficient consideration to this fact. And, I repeat, until we do we shall be guilty of the criminal contradiction of studying the sexual problem of the 20th century men and women in terms of the 19th century approach which was shot through with error.
France Under Anti-Birth Control Law

By JESSE QUITMAN

A n exhaustive study of the effect of anti-birth control laws upon the habits and character of a people would have to consider every other factor that likewise had an influence upon social life. Theoretically desirable as such a thoroughgoing study would be, none has ever been made by a sociologist. This reservation must be kept in mind in evaluating the effect of the present prohibitive law upon the French character. Another difficulty is that the most significant social facts are those we apprehend emotionally. It is only the statistically expressible that has scientific value, but this order of facts, unfortunately, plays but a minor role in the formation of personality traits.

A number of factors caused France to pass her anti-birth control law in 1920. Before the war, France had been politically anti-clerical. During the war, the church reconquered many of the privileges and much of the power that had been taken away from her. These she tenaciously held, after peace was declared. By the war and the ensuing treaties, the French people gained valuable rights that they tremble to think of losing. To keep these, in their opinion, requires man power. Logically, they turned away from their traditional liberalism, and with the approval of the church, passed the anti-birth control law that runs so counter to the French concept of individual liberty. But, just as liquor has not been suppressed in America, so the French population has not been increased.

In France as elsewhere, the distribution of information, like that of commodities, is subject to definite laws. An industrialist would not expect the most splendid piece of merchandise unadvertised to have a very wide sale, nor would he expect this merchandise, even if advertised, to be widely distributed unless there were conveniently located stores or centers at which it could be obtained, or, if distributed by mail, an adequate parcel post. Many an article of lesser worth is purchased in preference to a better one because of the greater ease with which the inferior one can be obtained.

It was this principle that came to my mind as I read Mr. George Packard’s article on “Is Birth Control Legal?” in the September issue of the Review. For the past two years I have lived in France. Birth control, even in the sense of its mere advocacy, is now illegal there. The punishment for violating the prohibitory birth control law is severe. There are no clinics for the spread of information about birth control technique, and physicians (to whom the average Frenchman rarely resorts, even in the ordinary illnesses of life) are not centres from whom this information radiates. Yet the incontrovertible fact is that birth control is practiced more generally in France than elsewhere in the world. The French population is practically stationary.

What connection is there between the illegality of birth control and the methods employed by French women in its practice? Bootleg birth control information, like bootleg alcohol, may produce the results desired, but generally at the expense of health and sometimes of life. The death rate in France is among the highest of all of the advanced nations. Many factors contribute to this, but undoubtedly the crude lore of peasant birth control methods, and abortions by mid-wives are important contributing factors. It may be added, parenthetically, that even adequate birth control information available to the French, the utter absence of modern plumbing in the majority of French habitations might make its use difficult. It would be interesting to summarize the methods most generally in use among the majority of the French, who are either peasants or but a generation or so removed from them.

The question arises, why do the French, above all other people, desire to limit the size of their family? The explanation begins with a warrior. Napoleon changed the laws of inheritance so that all children inherit equally. No parent can by his will disinherit his children. The land of France is cut into more small holdings than any other in the world, and she has the largest number of landowners in proportion to population. A small plot of ground divided among too numerous offspring would make it impossible for any of them to gain a livelihood from the soil. French prudence in the matter of offspring has, clearly, a solid economic basis. France, unless she becomes industrialized,
cannot adequately support a larger population than she now has. It may definitely be stated that the oppressive French laws against birth control have not prevented its practice, but have unfavorably influenced the way in which it is practiced.

The connection between the restrictive law and the psychology that results from the practice of inadequate birth control methods merits attention. One need not be a student of pathological psychology to be aware that there is an intimate connection between certain traits of character, and types of sex practices. The French desire to limit the size of the family is often achieved by doubtful sex practices, instead of by actual birth control technique. There is, of course, no statistical approach to the prevalence of undesirable sex practices, but I think it may be safely ventured that they are quite widespread among all classes in France.

They have, I believe, contributed to the unpleasant traits I find in the present-day French character. There is undoubtedly a connection between unsatisfactory birth control methods and general disagreeableness. I was recently in Germany and Italy as well as in France. I also lived in France for some period before the war. At that time the French had a charm which is but too rarely met with among them today. They concede this and explain it on the basis of their suffering and losses during the war. But the Germans suffered as well, and yet, in general, they do not exhibit the disagreeable and often unfriendly characteristics.

The connection between France's birth control law passed in 1920, unsatisfactory sex relations and charm are not long compatible. Inadequate technique results in exacerbated nerves. And it might not perhaps be extravagant to trace a connection between France's isolation at this moment and the world's impatience with her and those characteristics which are the result of the Frenchman's present day personal practices—an impatience that cannot be fully explained by economic competition between nations.

Nullification of laws, to refer again to Mr. Packard's article, even though so often the only way out, exacts a heavy price in the deplorable changes it produces in the character of those who practice it. Margaret Sanger is quite right. Even though the task of changing the laws were hopeless, its attempt would be imposed by self-respect. But far from being hopeless, their change is a quite near prospect. What inner conflicts may arise in deeds that are at variance with legal prescriptions! The emotions have their own inexorable code of laws. Man's constant effort is to harmonize his profession of faith with his deeds. Rarely, if ever, has this been fully accomplished, but insofar as it fails may be found the measure of man's unhappiness. As long as there is a law upon the statute book casting the slightest reflections upon birth control, there can be no real peace in the soul of one who advocates or practices it.

The Mothet's Health Clinic of Alameda County, California

By MABEL GREGG BOYDEN

An Analysis of the First Five Hundred Cases

The clinic of the Alameda County Birth Control League of California had been running for a year in March of 1930, during that time not quite five hundred cases had been dealt with. This report concerns data obtained from the first five hundred cases. Through the courtesy of Dr. Ann Martin of the Alameda County Birth Control League access to the records was given, and permission to report the findings. It is a pleasure to acknowledge my indebtedness to her and to Mrs. Anna Gerlach for their interest and aid in the investigation, and to Mrs. Harold Kirby for help in recording data.

Cases at this clinic are classified according to the system used by social service agencies. Cases designated A are distinctly charity cases whose fees were paid by someone else, usually some social service agency. B cases are those who could barely pay the cost of supplies. C cases could pay a little more. D cases could almost but not quite pay the services of a private physician. E cases could afford the private physician but preferred to be instructed at the clinic. The first five hundred cases are distributed as follows: 107 cases in Class A,
228 in B, 58 in C, 49 in D, and 53 in E. Five cases were unrecorded as to class. The classifications were made after proper investigation, by a trained medical social worker who is the executive secretary of the clinic.

Certain points were brought out by this classification which would not otherwise be discernible. This was particularly true in the data on fecundity, best shown by the following table:

I—COMPARATIVE FECUNDITY OF CLASS GROUPS

<table>
<thead>
<tr>
<th>Class of case</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average pregnancies per mother</td>
<td>578</td>
<td>422</td>
<td>40</td>
<td>25</td>
<td>247</td>
</tr>
<tr>
<td>Miscarriages per mother</td>
<td>79</td>
<td>76</td>
<td>11</td>
<td>9</td>
<td>7</td>
</tr>
<tr>
<td>Living children per mother</td>
<td>455</td>
<td>323</td>
<td>23</td>
<td>19 3</td>
<td>18</td>
</tr>
<tr>
<td>Dead children per mother</td>
<td>41</td>
<td>10</td>
<td>29</td>
<td>23 7</td>
<td>11</td>
</tr>
<tr>
<td>Stillbirths per mother</td>
<td>087</td>
<td>026</td>
<td>19</td>
<td>13 15</td>
<td>15</td>
</tr>
</tbody>
</table>

It will be seen that the differential birth rate is clearly shown both as to the actual number of pregnancies and the number of living children. It would be hard to say how much the limitation of pregnancies per woman was due to the more or less successful use of contraceptives in the various groups. A comparison might be made with this table and the one showing the prevalence of the use of contraceptives by patients before coming to the clinic (Table IV). The number of dead children per mother is much higher in classes A and E. One would perhaps expect to find a larger number of dead children per mother in class A because the number of children per mother is larger and living conditions are more strained. But the situation is serious when one finds a large proportion of dead children in class E where the birth rate is low and the economic conditions good. Some of the effect might be due to the relatively much smaller number of mothers in class E as compared to the number in class A.

Mothers of all age groups from fifteen to forty-six years are represented.

II—COMPARATIVE AGES OF CLASS GROUPS

<table>
<thead>
<tr>
<th>Class of case</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average age of mother</td>
<td>30 3</td>
<td>28 7</td>
<td>28 6</td>
<td>28 4</td>
<td>29 4</td>
</tr>
<tr>
<td>Average age of father</td>
<td>34 3</td>
<td>34 5</td>
<td>33 1</td>
<td>32 2</td>
<td>33 9</td>
</tr>
<tr>
<td>Average number of yrs. married</td>
<td>9 9</td>
<td>7 7</td>
<td>7 5</td>
<td>6 0</td>
<td>7 2</td>
</tr>
</tbody>
</table>

It will be seen that the average ages of mothers is about the same for each class. The same is true for the fathers. The fathers are usually from four to six years older than the mothers. It will also be noted that class A fathers and mothers have been married slightly longer than mothers and fathers of other classes and that those of class D have been married somewhat less than have the others.

Thirty-one nationalities are represented and also a number of cases where the nationality is unrecorded. As would be expected, Americans lead with the greatest number of cases. Rather unexpectedly, Mexican, Portuguese, and English in order come next. After these come one or more of the patients of Negro, Irish, Scotch, German, Danish, Swedish, Italian, Spanish, French, Finnish, Swiss, Norwegian, Chinese, Austrian, Serbian, Porto Rican, Filipino, Jewish, Greek, Indian, Hungarian, Bohemian, Croatian, Dutch, Peruvian, Russian, and Hindu families. The place of the Mexican and the Portuguese is interesting in view of the organized opposition of the Catholic church to birth control. Together they represent sixteen per cent of the total number of cases. Add to these patients from other highly Catholic nationalities and the percentage of the total rises to well over twenty-five. It is to be noted that all but one of the Mexican cases are of A or B classes and that all but seven of the Portuguese cases are in the A or B class, either charity cases or definitely on the border line. It should be noted too that most of the husbands of the Mexican patients are laborers of the Southern Pacific and do not get enough money to support their families even at their low standards of living. The cheap labor for the railroad to be sure, but one wonders how cheap, after all, to society.

Nearly all occupations are represented. After a certain amount of classification, the following table most clearly shows the groups.

III—OCCUPATIONS

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Number of cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Laborers</td>
<td>117</td>
</tr>
<tr>
<td>Factory workers</td>
<td>46</td>
</tr>
<tr>
<td>Clerks, skilled artisans, salesmen</td>
<td>150</td>
</tr>
<tr>
<td>Professional</td>
<td>8</td>
</tr>
<tr>
<td>Automobile drivers (bus, taxi, truck)</td>
<td>22</td>
</tr>
<tr>
<td>Students</td>
<td>9</td>
</tr>
<tr>
<td>Miscellaneous</td>
<td>83</td>
</tr>
<tr>
<td>Unrecorded</td>
<td>65</td>
</tr>
</tbody>
</table>

(Occupation is often not recorded if family entirely supported by charity)

It will be seen that about a third of the total number of cases come from the least skilled trades, i.e., factory workers and laborers. The next slightly smaller group comprise the clerks and skilled artisans. Data from the histories show a very large amount of unemployment. More than twenty-five
per cent of the five hundred cases show unemployment for periods of three months or more.

The sources of the patients as regards recommendation to the clinic are interesting. They varied from police officers to the vague “heard about it” or “read about it.” Social agencies of one kind or another sent 57.8% of the cases, private physicians sent about 7% Hospitals, health centers, teachers, drug stores, patients, nurses, newspapers, and others have sent patients to the clinic. With such individuals and agencies recommending its work, it seems reasonable that the clinic holds an established place in the social service work of the San Francisco Bay communities.

In most reports of the work of clinics such as this some space is given to the reasons of the patient for seeking the information dispensed. In these case histories no question was asked as to the reason for wanting such information. An attempt was made, however, to discover such a reason, if possible. Medical and mental reasons were readily established from the medical history and record at the time of examination. Such reasons accounted for about ten per cent of the cases. An economic reason was often readily discernible on considering the earnings of the family and the number of individuals such earnings must support either wholly or in part. This seemed by far the most important single possible reason for coming to the clinic. In a number of cases almost entirely in the D and E classes no reason was evident. The reason here might be a desire for a proper spacing of the children of the family to prevent overstrain of the mother.

One of the most striking things shown by the investigation was the very high percentage of patients who had used, more or less successfully, some kind of contraceptive, most of them undesirable and many of them dangerous.

IV—THE USE OF CONTRACEPTIVES

<table>
<thead>
<tr>
<th>Class of case</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contraceptives not used</td>
<td>46</td>
<td>63</td>
<td>9</td>
<td>4</td>
<td>11</td>
</tr>
<tr>
<td>Contraceptives used</td>
<td>51</td>
<td>149</td>
<td>45</td>
<td>45</td>
<td>34</td>
</tr>
<tr>
<td>Not recorded</td>
<td>10</td>
<td>16</td>
<td>3</td>
<td>0</td>
<td>8</td>
</tr>
</tbody>
</table>

From the above figures it is readily seen that birth control even in the form of conception control is not new and is already here in spite of what may be said to the contrary. Miscarriages as reported were divided into those which were spontaneous and those which were induced. The objection will be raised that these figures do not represent the actual state of affairs. They may not, but whatever “padding” is done will be on the side of the spontaneous rather than the induced.

V—MISCARRIAGES CLASSIFIED AS TO KIND AND CLASS OF CASE

<table>
<thead>
<tr>
<th>Class of case</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
</tr>
</thead>
<tbody>
<tr>
<td>Induced miscarriage</td>
<td>16</td>
<td>46</td>
<td>51</td>
<td>14-24</td>
<td></td>
</tr>
<tr>
<td>Spontaneous miscarriage</td>
<td>54</td>
<td>104</td>
<td>15</td>
<td>26</td>
<td>10</td>
</tr>
<tr>
<td>Unclassified as to kind</td>
<td>1</td>
<td>24-8</td>
<td>4-4</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The plus indicates that there were an unknown number of miscarriages in the group above the actual figures due to the fact that some patients answered the question by saying “a few” or “plenty.”

Although the practice of abortion is illegal, everyone knows that it occurs. The figures for classes C and D are interesting in this respect. The acknowledged induced miscarriage rate is very high and it may actually be higher than these figures indicate. Classes C and D are those whose economic condition just permits their paying the cost of an abortion. At least the cost of abortion is less than the cost of another mouth to feed. They may be a group, too, whose sensibilities are not particularly touched by such destruction of life or who do not realize that they are destroying life. They wish to be financially independent and realize that that is impossible if their families are unlimited in any way. When the figures for miscarriage are checked against those of the total number of living children, the enormous child loss from miscarriage is evident. It amounts to more than 25% in the cases of this clinic.

From the above data it would seem that the lower class families are eager and anxious to help themselves by having families of a size more commensurate with their economic means if only they have the opportunity. It seems reasonable that if reliable information from properly controlled sources were available to such people, they would use it gladly and that this would tend to eliminate the differential birth rate.
Four Factors Retard Human Progress

By SIR ARTHUR THOMSON

I THINK that the first great difficulty which hinders progress from coming more quickly is that the world is becoming too full. The total increase of the world’s population is not less than twelve millions every year, and probably fourteen millions. If that continues it will soon become necessary to put up notices saying “Standing room only.” Some calculators have estimated that in the time of the great-great-grandchildren of Americans now living America will be absolutely full, and will be on the verge of a debacle too horrible to think of.

A great deal of the present misery and depression is due to the fact that in particular areas there are too many of us. The second dark cloud before us is that of differential fertility. The different levels in the community are not multiplying at an equal rate, and the most desirable are multiplying most slowly. If we take a thousand married men of fifty-five in the upper and upper-middle classes, the rate is represented by 119 per 1,000, while for skilled workmen it is 153, and for unskilled workmen it is 213. Those who contribute best to the race are contributing least towards it as regards offspring.

Thirdly, natural selection is gone, and we have not succeeded in finding any good substitute for it. Because man has formed a society and is a creature of reason he has evaded natural selection, but what he should have done was to press forward methods of rational social selection so that the superior would get the benefits of their superiority and the inferior would be taxed for their inferiority. Arrangements which tend to make it as well to be inferior as to be superior—and there are plenty of them just now—are working against progress. We have to think out methods of social and rational selection which will always give preference to those who deserve it.

Finally, there is the low standard of positive health. There is not in this country much warrant for optimism as to the attainment of positive health, and the old enthusiasm for physical fitness has not quite been maintained in this generation.

I cannot go into the question of how the increase in world population is to be prevented, though birth control is obviously one of the ways by which we shall check it. Historically, so many wars have been due to overpressure of population, and there will be another war unless we check this increase of population. We should inculcate in our children and in ourselves the habit of not being too other-worldly, of not thinking too much about a possible golden age to come. While there is something to be said for other-worldliness, it is apt to be a deterrent of progress. I notice in children the fallacy of thinking always of something that is coming. I call it the Thursday habit. They say, “Tomorrow will be Friday and then we shall have reached Saturday.” Always thinking of the future instead of the present is apt to become a very continual habit, and it does not conduce to happiness.

Is our civilization to perish like others? There are two great chances of survival. We are in a re-
A remarkable way moving towards a discernment of the world interdependence to an extent that our fathers even had no idea of. We are also getting into the habit of putting science at the service of every effort. We are now going to have an epoch in which science is to be brought to bear on all the problems of life. The more we can chart the seas of the future scientifically the more chance we have of surviving, and that is our hope for the future.

From Address to the British Social Hygiene Council at Oxford, England, August, 1931

THE WORLD'S POPULATION PROBLEMS AND A WHITE AUSTRALIA, by H L Wilkinson P S King and Son, Ltd., London 1930 18s

In this book the author attempts to bring out the following points: (1) that unless there is an immediate extension of the practice of birth control, the world population will increase at an almost overwhelmingly rapid rate, (2) that there will ensue intense pressure of population, much unemployment and great shortage of food in certain countries, (3) that peaceful migration is no longer a solution of over-population, (4) that the provision of food for great numbers of people must depend on more intense cultivation, on the development of unused land and on the conservation of rainfall, all of which call for the investment of capital and the maintenance of sound credit, and (5) that while peace and progress in international trade are essential to the world, war for the purpose of relieving over-population in certain countries cannot be regarded as improbable in some cases no other means seem to be available" (p vi)

The book is divided into two parts, consisting of ten chapters each. Part I is devoted to a discussion of population problems of the world, Part II to Australia. The author estimates that there are now 2000 million people in the world and, at the present rate of increase, there will be 8000 million in the year of 2070 and 78,000,000 million in 3000 A.D. According to Dr. O. E. Baker, there are only about 10,000,000 square miles or one-fifth of the earth's surface physically suitable for crops, only about 4,000,000 square miles are cropped at present. Professor Penck thinks the world can support only 8,000,000,000 people. Professor Wilkinson is not concerned with population problems beyond 150 years from now, and thinks it is indeed fortunate that none of us will be living in 3000 A.D.

The author does not stress birth control as a remedy for population pressure. Since immigration laws no longer permit population movements to relieve pressure, nations will have to utilize all their resources to absorb their own increases. As would be expected, he justifies the "White Australia" policy. He does not feel that nations should be expected to open their doors to people of other nations. He realizes, however, Australia's difficulties in justifying her policy, and thinks that tensions could be relieved if Australia would establish certain commercial preferential relations with Japan and Italy, which would really extend the "White Australia" policy.

H. G. DUNCAN


The present essay was awarded first prize in the W. P. Draper Contest for essays on the "Relative Birth-Rates of Nordic and Non-Nordic Peoples." The author, who is Professor of Hygiene at the University of Amsterdam, has calculated the crude birth-rate, the fecundity rate (births per 1000 females 15 to 45 years of age, and the "vital index" (or 

<table>
<thead>
<tr>
<th>Period</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>1850-1897</td>
<td>35</td>
</tr>
<tr>
<td>1900-1927</td>
<td>30</td>
</tr>
<tr>
<td>1928-1930</td>
<td>25</td>
</tr>
</tbody>
</table>

The movement of the crude birth-rate in the Nordic countries differs from that in the non-Nordic countries. Four types of birth-rates are observed in the former countries: (a) a regular decrease throughout the period studied (e.g., Scandinavia, North Ireland, and Mecklenburg), (b) increase from 1850-1880 followed by a regular decline (e.g., England and Wales, Scotland, and Netherlands), (c) slight increase to 1875-79, no change until 1900 when rapid decline begins (e.g., Hanover, Schleswig-Holstein, (d) increase till 1880, then
a decline and a peak again in 1900-04, falling rapidly after that (e.g. Westphalia). Of the non-Nordic countries only France falls in class (a) the others in class (d) Italy and Spain are not classifiable. The course of the birth-rate and of fecundity has generally been greater in the Nordic than in the non-Nordic countries. However, differences in the respective movements of Nordic and non-Nordic birth-rates, fecundity, and vital indices are disappearing.

The war did not affect the general trend of the birth-rates, though the close of the war was followed by the customary increase. In this connection Professor Sanders fails to observe that, contrary to 19th century experience, the postwar rate was not as high as the prewar rate. The decline has generally been greater in the countries with the highest rates in 1870-74. The greatest decline in the birth-rate and fecundity rate since 1910 is found in the belligerent countries. In some instances fecundity has declined more than the birth rate, in other instances, less.

The vital index has risen not at all, or only slightly in the Nordic countries. Only in two Nordic countries (Westphalia, Netherlands) and in the non-Nordic countries (with the exception of Bavaria) has the vital index risen considerably. Incidentally, why calculate a general vital index when it obscures as much as it reveals?

The author does not attempt to analyze the causes of the varying movements in the birth rates. He is content to give the figures.

Joseph J. Spengler

Essays on Population, by James A. Field
Edited by Helen Fisher Hohman
University of Chicago Press, Chicago 1931 $3.50

During 1927 Professor James A. Field, a staunch and sober friend of birth control passed prematurely away. Since he was a meticulously accurate student of the history of population thought, especially of the history of birth control as it relates to economics, he published less than might have been expected from one of his rare gifts. Now one of his students, Mrs. Helen Fisher Hohman, has performed the useful service of gathering together his articles and unpublished manuscripts. Gaps have been filled by the use of lecture notes taken by students.

To the foreword by that great Malthusian scholar, Dr. James Bonar, the editor has added her preface, a short but illuminating biography of the author, as well as notes throughout the text.

On the economic side Field was the greatest scholar the subject of birth control has ever had in any country. He had forgotten more about the subject than most scholars knew. He surpassed in originality any European investigator and for his pains he has been overlooked on the Continent. Always cautious, he never went beyond the evidence—a rather rare gift among social scientists. Yet he appreciated to the full the implications of birth control. He equaled Bonar in investigative skill and in the literary finish of his presentation. It is well, therefore, that these papers have been gathered together.

Part I consists of eleven papers on birth control and eugenics, the most notable (No. 3) being the reprint of "The Early Propagandist Movement in English Population Theory." Readers of the Review will find this paper and Nos. 6, 7 and 12 perhaps the most interesting and informative.

The three Chapters in Part II show the author's interests in the standard of living and in economic theory and statistics. Chapter XIII on "The Place of Economic Theory in Graduate Work" could be read by many American economists with substantial profit, if they would take its lessons to heart.

Part II is a catalogue of the books and pamphlets on population, many rare, in the author's library—a collection carefully selected, but not as large as one might anticipate.

The work is so well edited on the whole that it would seem ungracious to venture upon a detailed criticism. However, it needs to be said that some historical errors of Field, since amended in the published literature, have not been drawn upon by the editor. Much of what is said about John Stuart Mill and Robert Owen should have been edited in the light of more recent research. The Black Dwarf contributor, "H. M." (a misprint in the original for "A. M.", as can be seen by surveying the signatures of other articles) was none other than John Stuart Mill himself. As I have shown in an Economic Journal article (Hist. Supp. Jan. 1929, see pp. 476-7), and as I hope to show in greater detail in a forthcoming book on John Stuart Mill and the Beginnings of the Birth Control Controversy, in this book Mill's letters on birth control will be published.

Norman E. Himes
What Blocks Birth Control Legislation?

A Suggested Way Out

By GEORGE HALLETT

WHY IS IT that attempts to bring birth control legislation into harmony with modern enlightenment on the subject rebound regularly as from the proverbial stone wall? Is it because legislators are less enlightened than the general population? Assuredly not. It would be hard to find a legislature a majority of whose members do not believe in birth control, both for their own families and for others. Is it, then, because most legislators would be displeasing a majority of their constituents if they supported birth control? Of course not. There are comparatively few constituencies in which a majority would not welcome sensible birth control legislation.

Why then, should legislators hesitate? Most of us know the answer, and I repeat it in the following story only to show that it need not be accepted as final.

THE FEAR OF THE SCALE-TURNING VOTE

Mr X, a legislator of influence in one of our most populous states, introduced a birth control bill a few years ago. The bill was not passed, and Mr X now says that he wouldn’t touch it again with a ten-foot pole. He hasn’t changed his mind about birth control but he has about the political wisdom of making his mind known. For when he came up for re-nomination in the primary of the dominant party, the Catholic minority in his district became very active on behalf of his opponent. The members of that minority were about the only ones who cast their votes on the issue of birth control, and the withdrawal of their support nearly turned the balance against him.

There are such minorities in nearly every district, and because they are ready to translate their opposition to birth control into votes while the favorable majority is politically indifferent, they have most of the legislators enslaved.

WHAT CAN BE DONE ABOUT IT?

Must we wait, then, till the majority of voters become fanatical on the subject, till side-stepping the birth control issue becomes accepted as a major reason for turning a candidate down? Fortunately not. A change that is greatly needed for other reasons would solve the difficulty with much less trouble.

What I have been saying about birth control applies with almost equal force to other issues as well. The Catholics themselves are among the chief sufferers from the tyranny of scale-turning minorities. There are many places in which no Catholic can be elected to public office, not because most of the voters pay any attention to candidates’ religion, but because enough of them to hold the balance of power make that a reason for deciding their vote.

Political machines operate on the same principle. If 40 voters out of 100 are already arrayed on one side and 40 on the other side the remaining 20 will decide who gets the majority, and for a high price if they take advantage of their opportunities.

The birth control difficulty is the best illustration I know of the general truth that our “majority” methods of election do not result in majority rule.

Nearly everyone has a personal as well as a theoretical reason for wanting majority rule. As soon as it becomes generally known that the majority rule can be secured, the necessary steps will be taken. For majority rule can be secured. There is no reason but the imperfections of an outworn method of election do determine why Mr X’s open support of birth control should not have proved a political asset.

PROPORTIONAL REPRESENTATION

If the legislature to which Mr X belongs were elected like the city council of Cleveland and Cincinnati, he would not have to worry about the opinions of voters who disagreed with him on birth control. Those voters could elect their own representatives in an enlarged district and Mr X would only have to appeal to that part of the voters who agreed with his point of view.

The councils of Cleveland and Cincinnati are elected by the modern method called proportional representation, which means that not only ma-
Birth Control Lessens Crime

By MONTGOMERY MULFORD

We hear much these days of the youthful crimes. Statistics reveal the apparent increase of youthful criminals in the last several years, figures from Brooklyn, for example, have it that in 1930 half the felonies were committed by boys under twenty-one.

The theory of birth control makes no extravagant claims, but I am of the belief that the acceptance of birth control by society, and its frank teaching, can help to diminish criminal activity.

One writer has declared in a syndicated article that "mothers are at the bottom of half the nation’s crimes." Rather it is society itself which is at the bottom. We possess baby clinics and our daily newspapers dispense some welcome knowledge on the care of children, but what avail all these sources if we cannot control the production of unnecessary children?

Another writer has spoken of the value of food in relationship to young children “feed the baby wrongly,” he says, “and he may turn out a gangster.” While diet is important, among other things, it will be found that many correctly-fed children, many rightfully educated youngsters still turn criminal. Why? That is the great question.

I believe that birth control will go far toward solving our present social problem. Why should we burden mothers with excessive children and families too large to care for properly?

The adoption of birth control as a recognized practice in civilized society would not alone solve many of our population problems but would prevent the growth of over-large families. There is no debating the fact that no matter how perfect the diet, how thorough the schooling, there is neglect in the home when families increase too rapidly. It is this neglect that cannot generally be rectified, which produces many young criminals. Large families like large school-rooms or very large nations, are difficult to manage, and in the management there is little personal instruction. If then, mothers were familiar with the methods of controlling births, we should cut down the “unwieldy” family, lessen crimes, and spare our other children from possible lack of instruction and care. And the family income, which must always be considered, would be proportionately larger so that the existing children would not be forced to live sacrificing lives.
**Book Reviews**


THE FAMILY IN THE MAKING, by Mary B Messer, *G P Putnam's Sons, New York* $3 50


The problems of the family and of birth control are inextricably bound up with each other. No discussion of either can proceed far without involving the other. Students of birth control will be interested, accordingly, in this trilogy of books. Moreover, they present an approach, in content, and in general conclusion, one is written by a theologian, one by a social worker, one by a professor of education.

Dr Fiske is professor of religious education in the Graduate School of Theology at Oberlin College. His book concerns itself with the changing family, particularly in its social and religious aspects. While his discussion is factual in part, he is interested chiefly in an interpretation and evaluation of these changes. His standards of judgment are in the main those which time has winnowed, and on the basis of these, he looks rather askance at many recent developments. To the extent that he regards the future, it is in ethical terms, seeking to safeguard the earlier values and confidence in family religion as the best insurance against broken homes.

While Miss Messer, too, deals with the family in the light of history and sees it against a background of change, her eyes are turned nevertheless toward the future. She sees the family “moving definitely though somewhat unsteadily toward the realization of a finer and more plastic form.” While her book is concerned ostensibly with the evolution of the family, it does “resolve itself unduly (but not unpardonably) into the story of womanhood.” Briefly, the insistence of this book is that the solution of the family life of today and tomorrow must be in new terms, for “a return to old positions is no longer feasible.” If Fiske’s book is a lament for the passing of old values, that of Miss Messer, who was formerly a social worker in New York City, is a confession of faith in the emergence of new ones.

The book by Dr Goodsell, who is professor of education at Teacher’s College, Columbia University, is concerned neither with laments nor prophecy but primarily with an understanding of the forces which are changing the form and functioning of the modern family. This book consists of four parts: the first deals with the historical evolution of the family; the second, with certain social conditions reacting upon the family, such as modern industry, employment of women, immigration, prostitution, illegitimacy, and the care of dependent children; the third, with certain so-called individualistic movements of contemporary life, such as the woman movement, birth control, and divorce; and part four, with a brief look into the future, with particular reference to the child.

The treatment of each subject is concrete, factual, objective and frank in a manner that does credit to intelligent persons. The purpose is essentially that of the understanding of phenomena, rather than their praise or blame—and this is the spirit of modern science. Problems of the Family should be in every well-selected personal library.

James H S Bossard

HUMAN BIOLOGY AND RACIAL WELFARE, edited by Edmund V Cowdry *Paul B Hoeber, Inc., New York* 1931 $6 00

BIOLOGY IN HUMAN AFFAIRS, edited by Edward M East *Whittlesey House, New York*, 1931 $3 50

These two important symposia between them cover a vast field of vital importance to every thinking person. The book edited by Professor Cowdry of Washington University addresses itself primarily to the problems of evolution, heredity, and genetics, that edited by Professor East of Harvard to sociology, education, and psychology as well. Both have contributors who are foremost in their respective fields of science—twenty-eight of them in Human Biology and Racial Welfare, twelve in Biology in Human Affairs. Between them they read like the index of Who’s Who or American Men of Science, and they include such well-known names, besides the editors’, as Carrel, Conklin, Davenport, Dewey, W K Gregory, Healy, Hrdlicka, Huntington, McCollum (the only one to contribute to both works), Millikan, Overstreet,
Pearl, H N Russell, Sherrington, W M Wheeler, Wissler, Yerkes, Zinsser, Fishbein, F H Hankins, Parshley, and Terman. From this partial catalog, it may be seen that both books are indispensable in the library of any real student of human affairs.

To review such works in brief compass is, of course, a hopeless task. All that can be done in the present instance is to indicate what each has to say on the subject of primary interest to readers of this magazine—the control of population.

Clark Wissler, of Columbia, writing in Human Biology and Racial Welfare of "The Integration of the Sexes—Marriage," investigates the relation of the child to the marriage system in various primitive peoples, and says truly, "The community that does not maintain a well-ordered system of marriage is in danger of extinction." But Raymond Pearl, of Johns Hopkins, one of the greatest living authorities on population, in the same volume has words of hope for the gloomy who predict race suicide for civilized nations.

From a purely numerical viewpoint, what matters a falling birth rate if the death rate falls even more rapidly, so that the net survivorship at any instant of time is constantly getting higher? Nowadays the "best" people are said not to produce their due share of progeny, while the "worse" people are alleged to overproduce. In the American population, however, the element perhaps least effectively integrated socially with the rest of the population, the Negro, has the lowest survival value as a group. Measured by this same test the population, as a whole, of England and Wales is today more vigorous than it was in 1838.

And on another vexed, related problem, the sterilization of defectives, Edwin Grant Conklin, of Princeton, while disapproving extravagances in the extension of the practice, states that "all modern geneticists approve the segregation or sterilization of persons who are known to have serious hereditary defects, such as hereditary feeblemindedness, insanity, etc." This is in line with the latest researches of Popenoe and Gosney in sterilization in California.

As to birth control proper, several contributors to Biology in Human Affairs are outspoken in their belief. Dr. East himself says:

"Birth control can lay the Malthusian spectre of overpopulation and keep the census figures at somewhere near the optimum for effective effort. Our mediaeval laws regarding contraception should be modified. At present they fail to safeguard mothers against unwanted pregnancies when, through certain diseases of the heart, lungs, and kidneys, pregnancy means probable death, and they fail adequately to guarantee the child that reasonably healthy start in life which would be guaranteed by the proper spacing of children."

Professor Parshley, of Smith College, writing on "Zoology and Human Welfare," says:

"Contraception is already well-nigh universal in spite of the imperfection of the commonly known methods, and endocrine zoology promises to make it safe and certain. If and when this happens, the dwindling forces of opposition may as well abandon the struggle and contribute their enthusiasm and altruism to the important task of seeing that reproduction is reduced and regulated in such manner as to benefit all concerned.

It is doubtful if the Roman Catholic Church, for example, will ever consent to take so advanced a view, but other opposing agencies may very well do so. As Dr. Parshley also remarks, "the problem of birth control can be capably attacked and understood only through the application of biological knowledge as well as sociological and humanitarian concepts."

Even from so very partial a glimpse into these sound and excellent symposia, an idea may be gained of their immense value in other departments of the extensive territory they both cover so ably. Maynard Shipley.

BACKGROUNDS FOR SOCIOLOGY, by Hamblin Gerald Duncan, Ph.D. Marshall Jones Co. Boston. $4.00.

FOR THIS magazine the only portions of this book relevant for review are those dealing with population problems (Chapters V-VIII) and with the family (Chapter XXI). On the former topic Professor Duncan has published a separate volume, of which this part of the present book is apparently a condensed selection of points, and suffers from that fact. So far as birth control is concerned, he rather assumes it than advocates it. Indeed he advocates very little as direct program. One gets his attitudes on various conditions, practices and movements from casual comments or biased phrases scattered in the mass of factual material.

The ground covered includes the increase and
distribution of the population of the world and of the United States, a historical survey of population theories and policies, a critique of Malthus, a classification of population checks, and a description and analysis of the declining birth rate, here and elsewhere, origins and types of marriage and family life, and laws and other factors affecting marriage, divorce, and illegitimacy.

It is unfortunate, in such an informing, useful compilation of data as is here presented, to find what seem to the reviewer errors in the details of fact and theory.

On the fact side, may be cited such statements as the following: “Because there is very little prejudice toward the Indians in the United States, they constitute no very serious problem.”

“It is often charged that from 95 to 98 per cent of the expenditures of the national government go to pay for past, present, or future wars, while one per cent goes for education.”

“The laws are nominally against obscene literature but are interpreted by the courts to apply to birth control literature.”

“The furnishing of contraceptive knowledge is prohibited in the United States.”

“Recently a large university announced that it would no longer employ married men as instructors because the low salaries would not enable them to support families.”

There is a “New York committee of Unmarried Parents.”

On the theory side, it is apparently assumed that the population of the United States would have been markedly different in quantity if immigration had been excluded. There is a minimum of critical discussion of current population theories. He states as a universal categoric proposition that “the greatest tragedy that can happen to a baby is to be not wanted.” He does not distinguish sharply between matrarchal and matrilineal, and ignores the control by the brother-uncle in metronymic groups. He says it is fortunate that man does not know the secret of determining sex. He considers the important distinctions between the definitions of marriage and of the family as merely a difference in point of view. Compamatorie marriage is discussed on the basis of an undecided definition. On Hertzler’s authority he thinks stern social needs forced upon preliterate peoples an institution (the family) quite fixed and relatively binding. One misses certain major anthropologists in the citations of this chapter (By the way, what may “very preliterate” mean and why a new barbaric hybrid like “biarchy,” for dual control of the family?) He implies that those who reject the religious sanction upon marriage believe that coition is necessary for health.

The word divorce is used in one place to describe the social disintegration of the family, as distinct from legal separation. Divorce should be compared to a major amputation rather than to a symptom. Domestic relations judges are described as trying “to decide where the fault lies” possibly true, but fundamentally unsound technique and philosophy. He mentions other “expert” family advice services available but does not specify them. The handicap of the divorced as a result of loss of youth is not noted. A passage implying ignorance of college students in matters of sex is a bit naive. The child born out of wedlock is called illegitimate and “that child can never overcome the stigma.” (How about adopted children?) One misses the age and sex distribution pyramid-graphs which are so useful in Ross’ texts, as well as the interpretation thereof in newly or long settled lands. Indeed, there is a minimum of interpretation buttressed between the solid masses of population statistics.

Many of Duncan’s picturesque facts are not sourced, and many of his data are attributed to “some writers” and “others.” When he rests so heavily upon other introductory texts and current secondary sources in dealing with the family, one could wish for a little heavier documentation throughout.

The field of sociology is now so tremendous that no one writer can safely attempt a general textbook without submitting many portions for outside criticism or collaboration in advance. Dr. Duncan’s advisers might well have called his attention to some of the points above noted.

Despite such remediable flaws as these, the book as a whole makes a favorable impression upon the reviewer as a comprehensive text for a five hour or two semester course in beginning sociology.

Thomas D. Eliot
News Notes

UNITED STATES

The New England States Conference on Birth Control will be held at the Biltmore Hotel, Providence, Rhode Island on Wednesday, October 14th. Mrs. Henry Salomon, President of the Rhode Island Birth Control League, is Chairman of the conference. Rabbi Samuel M. Gup, of Temple Beth El, Providence, will preside at the luncheon. Among the speakers are Professor F. H. Hankins of Smith College, and Mrs. Cornelia James Cannon, author and lecturer. Mrs. F. Robertson Jones, Dr. Eric M. Matsner, and Miss Alice C. Boughton will lead the discussion group.

The American Birth Control League announces the appointment of Alice C. Boughton, Ph.D., as its Executive Director. For the past two years Miss Boughton has been in Cincinnati, serving as Executive Secretary for the Committee on Maternal Health of the Academy of Medicine of Cincinnati (See September issue of the Review for a report of her work) Previous to her work in Cincinnati, Miss Boughton has had a wide range of experience in health and social work. She has made a study of school feeding in England and on the continent of Europe, has traveled extensively in Japan, Korea, China, and India, was special investigator, Bureau of Educational Experiments, N.Y.C., special expert, division of Planning and Statistics, War Industries Board, etc.

Connecticut The Board of Directors of the Connecticut Birth Control League will meet on September 24th to make plans for the winter’s work.

The Naugatuck Birth Control League held its first meeting of the season at St. Michael’s parish house on September 16th and heard Dr. Albert P. Van Dusen speak on “The Pros and Cons of Birth Control.”

Massachusetts An award of $500 has been offered by the Massachusetts Society for Social Hygiene for the best manuscript for a pamphlet on sex hygiene for adolescents submitted before October 1, 1931. The society feels that “such a pamphlet should contain quite definite statements about the physiology and psychology of sex, including the various aspects of the sexual instincts.” The pamphlet is to refer to the temptations and dangers of sex, to auto-erotic activity, to the more common abnormalities and to the venereal diseases.” The award will be made January 1, 1932, unless none of the manuscripts submitted meets the required standards.

New York A series of four radio talks over station WCVV were arranged by the American Birth Control League during September, as follows:

Sept 3rd Mrs. Robertson Jones, The Birth Control Movement in America
Sept 10th Dr. George Bedborough, England Points the Way
Sept 17th Dr. Dorothy Bocker, The Doctor’s Viewpoint
Sept 24th Reverend Dr. Minot Simons, Religious and Moral Aspects of Birth Control

The League will maintain a booth at the Exposition of Women’s Art and Industries, to be held at the Hotel Astor from September 30th to October 6th. Books, pamphlets and the Review will be sold and distributed.

Dr. Isabel Beck, addressing the Far Rockaway Chapter of the Hadassah on September 4th, pointed out that the prohibitions against the free distribution of birth control information brought economic as well as social evils, and was largely responsible for our high divorce rate.

Mrs. Alfred Holmes, field secretary for the National Committee on Federal Legislation for Birth Control, organized local committees in Corning and Elmira in early September to support the proposed amendment to the federal law.

The Buffalo Woman’s City Club, meeting on September 1st, discussed the signing of individual petitions seeking the amendment of the New York state birth control laws. It voted to endorse birth control.

Rhode Island The City Solicitor reported to the Board of Aldermen of the City of Providence that there is no statute in Rhode Island limiting or denying the right to hold a Birth...
Control Clinic. The Attorney General reported, also through the City Solicitor, that any action to close the Birth Control Clinic must be initiated by the Board of Public Safety and that his department would act only if the matter came up on appeal from the District Court.

Following this report, the Board of Aldermen unanimously voted to table the resolution directing the City Solicitor to prosecute the operators of the Birth Control Clinic at 163 North Main Street, Providence.

Alderman Rush Sturges introduced a resolution requesting the joint standing committee on ordinances to grant a public hearing to the representatives of the Rhode Island Birth Control League, Inc so that they might have an opportunity to present their side of the case. This measure was referred to the Ordinance Committee. Alderman Sturges' reasons for proposing a hearing are worth quoting at length.

It is inconceivable that the citizens of experience and standing in the community who have sponsored this movement should have done so without first being entirely clear of their lawful rights so to do. As a matter of fact they have been and are now being advised by a reputable firm of local counsel.

Doctors of national reputation, several of our foremost anthropologists, some of our leading philanthropists, the president of Brown University, of Pembroke College, of our oldest trust company, the rector of the largest Episcopal and Congregational churches in the city, a leading Jewish rabbi, social service workers who for years have had experience with these problems, people whose name, rank and standing is above question either here or elsewhere, all are numbered in this organization which the board has condemned without a hearing.

To accuse such persons of promoting a movement which the resolution says is morally wrong and may seriously affect the morals of the people of the city of Providence is to condemn personally every one who has joined this movement.

I do not believe the Aldermen here present have or had any such intention. The fair name of the city of Providence is the fair name of its citizens, and you cannot attack the latter without injury to the former.

There can be nothing immoral in a doctor giving a patient information which may later save a mother's valuable life. Welfare workers all over the country have been struggling for years against disease and for the prevention of unnecessary suffering.

The ladies and gentlemen who are behind this movement earnestly believe that this is a step in the same direction. The Board of Aldermen properly has the interests of the city at heart. They properly watch every movement which furthers its prosperity or threatens its welfare.

Admitting and agreeing with all this, repressive, prohibitory legislation has reached a point in America hitherto unparalleled in this country and seldom reached in any other.

Intolerance, bigotry, fanatical frenzy are ugly spectres in a nation dedicated from its birth to personal freedom.

I am confident that you will join me in giving the ordnance committee the opportunity to hear both sides of this matter by favorably reporting this resolution to this honorable body.

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**Books Received**

MORE ESSAYS OF LOVE AND VIRTUE, by Havelock Ellis Doubleday Doran and Company, Inc., N Y $2 00

ORDER OF BIRTH, PARENT AGE AND INTELLIGENCE, by L. L. Thurstone and Richard L. Jenkins The University of Chicago Press, Chicago, Ill. $3 00

UP FROM THE APE? by Ernest A. Hooton, Ph. D. Macmillan, N Y $5 00

THE CASE AGAINST BIRTH CONTROL, by E. Roberts Moore The Century Co New York $2 50

MAN'S OWN SHOW CIVILIZATION, by George A. Dorsey Harper and Brothers New York $5 00

AMERICA'S PRIMER, by Morris L. Ernst G P. Putnam's Sons New York $2 00

THEORIES OF POPULATION FROM RALEIGH TO ARTHUR YOUNG, by James Bonar George Allen and Unwin, Ltd London 10s 6d

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Life is always a discipline, even for the lower animals, as well as for men, it is so dangerous that only by submitting to some sort of discipline can we become equipped to live in any true sense at all. The disappearance of the discipline of the old external taboos thus imposes upon us, inescapably, the creation of a new self-discipline, of internal and personal taboos.

Havelock Ellis
An Outline for the Study of Birth Control

_The New Jersey League of Women Voters, through its Social Hygiene Committee, will take up the study of birth control this winter, using the Outline of Study given below._

**INTRODUCTION**

*Brief Outline—History of the Birth Control Movement*

Reference

**Leaflet** One Hundred Years of Birth Control
(1798 to Sept 3, 1927)

**Booklet** International Aspects of Birth Control
(Report of the Sixth International Neo-Malthusian and Birth Control Conference, 1925, page 33 to 173)
Both published by The American Birth Control League, 152 Madison Ave, New York

**Legal Status of Birth Control in the United States**

Reference

**Pamphlets** Laws Concerning Birth Control in the United States
Federal Interference with the Administration of State Laws
Both published by The Committee on Federal Legislation for Birth Control, 17 West 16th Street, New York City

**MAIN STUDY**

The need for birth control as a means of decreasing the number of dependents and public health cases, lessening the amount of destitution, and effecting a reduction in the expenditure of public funds

1 *Health and Economic Reasons*

(a) Favorable Reference

**Pamphlets** Various Aspects of Birth Control, by S Adolphus Knopf, M D (see pages 11-20)
Lord Buckmaster on Birth Control

**Leaflets** Medical Opinions on Birth Control,
Poverty and Birth Control, by Alice Hamilton, M D
Some Reasons for the Popularity of the Birth Control Movement, by James F Cooper, M D
The Church and Birth Control

All published by The American Birth Control League

**Leaflets** Some Pennsylvania Physicians on Birth Control
Do the Working Classes Need Birth Control?
Social Welfare in Terms of Dollars
All published by The Pennsylvania Birth Control Federation, 1700 Walnut Street, Philadelphia, Pa

When is Advice Concerning the Prevention of Conception Justifiable? by J Whitridge Williams, M D, published by the Committee on Federal Legislation for Birth Control

Report of The Committee on Birth Control (Universalist General Convention), obtained from American Birth Control League

(b) Unfavorable Reference

**Pamphlets** Birth Control, by John M Cooper, Ph D (see Chap VII, begin sec B Poverty, page 56 to end of Chap page 64 Chap VIII, pages 65-74) Published by The National Catholic Welfare Conference, 1312 Massachusetts Avenue, N W, Washington, D C

Family Limitation, by Rev John A Ryan, S T D (see pages 12 to 17, 22, 23)

Birth Control, by Bertrand L Conway, C S P (see pages 7-8)

Both pamphlets published by The Paulist Press, 401 West 59th St, New York City

Eugenics, by William J Lonergan, S J (see pages 14, 15, 16) Published by The American Press, 461 Eighth Avenue, New York City

**Leaflets** The Question of Birth Control and the Labor Movement No 4
The Medical Officer of Health of an English City on Birth Control, No 10
Both leaflets in series entitled “The Question of Birth Control,” published by the National Catholic Welfare Conference
II Methods of Control—Contraceptives vs Continence

(a) Contraceptives Reference

Pamphlets  The Control of Conception Present and Future, by Robert L Dickenson, M D (see sections, Dangers and Objections, also Summary and Conclusions), published by The Committee on Maternal Health, 2 East 103 Street, New York City

Various Aspects of Birth Control, by S Adolphus Knopf, M D (See pages 26, 27 )
The Dilemma of the Family Physician Regarding Contraception and Sterilization for Race Betterment, by S Adolphus Knopf, M D (See page 5, Ist of Colleges and Universities in U S Courses in Contraception )

Leaflets  Is Birth Control Effective? etc Answers by Experts

Is Birth Control Moral? (See statement by Rev John A MacCallum )
Both published by the Pennsylvania Birth Control Federation

The Church and Birth Control, by Rt Rev Charles Fiske (See sec II re action Lambeth Conference ) Above pamphlets and leaflets secured from The American Birth Control League

The Facts About Birth Control, by Prof Henry Pratt Fairchild (See par 1 & 2, page 7 ) Published by Committee on Federal Legislation for Birth Control

(b) Continence Reference

Pamphlet  Marriage (English Text of the Encyclical Letter of Pope Pius XI, Dec 31, 1930

Pamphlet  Birth Control, by John M Cooper, Ph D (See Chap I, sec Limitation of Offspring, pages 7-9, Chap III, Chap V, sec B Continence, pages 45-46, Chap VIII, The Individual Case, page 74, also sec Marital Continence, pages 74, 75, 76 )

Leaflets  The Testimony of Some of the World’s Greatest Doctors No 9
Eminent American Doctor on the Inefficiency of Birth Control Devices No 12
An Anglican Divine and the Evils of Conception Control No 7

A Distinguished French Sociologist on the Error of Neo-Malthusianism No 8
These leaflets in series entitled “The Question of Birth Control ”
The above pamphlets and the leaflet series published by National Catholic Welfare Conference

Pamphlets  Family Limitation, by Rev John A Ryan, S T D (See pages 4 to 12 )
Race Suicide and Birth Control (See article Conscious Birth Restriction, by Paul L Blakely, S J ) Published by The America Press

QUESTIONS ON STUDY OUTLINE

LESSON I

History of the Birth Control Movement

How was the Birth Control Movement initiated, and what have been the principal events in its development, both in this country and abroad?

Note References used only record developments up to Sept 3, 1927, later ones being contained in books and other publications

LESSON II

Legal Status of Birth Control in the United States

What are the Federal laws pertaining to contraceptive information and materials?
Do all the states have laws pertaining to contraceptive information and materials?
Are the state laws similar or do they differ from one another?

LESSON III

Health and Economic Reasons

What are the health and economic conditions advanced as reasons for Birth Control?
What are the opposing views regarding the solution of health and economic conditions?

LESSON IV

Methods of Control—Contraceptives vs Continence

What is the difference in the methods of control between contraceptives and continence?
What are the advantages of contraceptives and continence as set forth by their respective advocates?
What are the disadvantages of each method as set forth by their respective opponents?
In the Magazines

Reducing the Maternal Mortality Rate By Lydia Allen De Valbiss, M.D Woman's Medical Journal, August

A proposal to reduce the maternal mortality rate by the elimination of the poor maternity risk through the application of therapeutic contraception

The Beginnings of the Chinese Family By Harry Paxton Howard The China Critic, August 20th

Traces the Chinese family from its matrilineal beginnings to its present patriarchal status


Birth control versus abortion, and the value of contraception “The solution of the vital, universal problem of propagation by the unfit and the morally and physically diseased and incompetent, and the compulsion by the ‘submerged tenth’ to a rabbit-like multiplication, irrespective of inability to secure sufficient and proper prenatal nourishment and care, is a matter of common sense—of rational birth control—and not a subject for vapid theorizing and supernal abstractions”

Sex Laws of New York Introduction by Mary Ware Dennett, Summary by William Floyd The Arbiterator, September

A valuable summary, taking up divorce, illegitimacy, birth control, etc

Why American Mothers Die Editorial The Survey, September 15th

“From the White House Conference comes an analysis of the high death rate of American women in childbirth

Despite the growing number of birth-control clinics under responsible auspices in states where they are permitted, such as California, Michigan, Illinois, New York, and so on, there is still this obstruction in making available even to the medical profession information which they need to protect the health and lives of their patients. When the next sessions of Congress and the legislatures bring the annual attempts to liberalize state and federal laws to make legal, under responsible auspices, knowledge of methods of preventing pregnancy, it will be pertinent to remember that the largest loss of life among American mothers comes from the attempt to end pregnancies which were not prevented

Editorial, American Medicine, September

The United States Children's Bureau in a study of approximately 28,000 live births between 1911 and 1916 in eight American cities analyzed the infant mortality according to the father's income. It found an infant mortality rate of 59.1 for those whose fathers earned $1,250 and over, as compared with 82.2 for those earning between $850 and $1,049, 125.6 for those with annual earnings between $450 and $649, and 166.9 for those whose fathers earned less than $450 a year.

The Prevention of Abortion, Editorial, The Chinese Recorder, September

“Dr. Magnus Hirschfeld, known the world over as one of the leading authorities on sex problems, spoke before the Shanghai Birth Control League in one of its recent general meetings on the very subject for which the League was instituted. One of his arguments had to do with artificial abortion. Dr. Hirschfeld is of the opinion that induced abortion, however neatly performed, is always risky and leaves the woman operated upon more or less of a physical wreck. His long experience has so told him. Now since contraception would make artificial abortion unnecessary, it should even for that reason alone commend itself to any community which is at all concerned with the welfare and the alleviation of suffering of its members. It is our belief that in devoting ourselves to any worthy social task, there is really no need for us to make appeals on the basis of high-sounding principles, such as the prevention of over-population or the betterment of racial qualities, in the present case of birth control. But if we are willing to come down to simple facts, and turn our eyes to a few sample families in which repeated pregnancies and miscarriages, natural or induced, have made physical wrecks of the women, we are on surer ground and can inscribe a humble measure of success. It is our sincere wish that the leaders of the birth control movement in China shall so direct their effort as to be in line with what Dr. Hirschfeld suggested in his lecture.”
Letters from Readers

SOME QUESTIONS FOR MR. PACKARD

TO THE EDITOR

Mr. Packard's article on the legality of birth control in the September issue of the Review brings up a question I have had in mind for some time. He starts the article by saying that "The laws on birth control are in most instances bungled, illogical and absurd" and goes on to say that the real cause of contraception "confined as it should be to medical supervision" etc., etc. Now it has long seemed to me that the emphasis placed on this "medical supervision" is illogical and absurd. Mr. Packard later speaks of "irresponsible people" who "take advantage of an opportunity to obtain such devices to prevent the natural consequences of their illegal acts"—by which he means that only married people ought to enjoy freedom in their sexual lives. The only logical conclusion is, of course, that the proper way to avoid babies is to get married! I think this is absurd. And Mr. Packard seems to believe that the medical men are in some way capable of being policemen of our private affairs. Is it not just as bungled, illogical and absurd for one to assume that contraceptive techniques can, or ought to be, restricted to married people as it is to oppose all ideas of birth control? And in either case why should medical men be the only distributors of the information? Having studied not only your literature, but much besides, having observed that the so-called "drugstore misinformation" really does work rather successfully (we live in a college town!) I feel myself, able to give information to those whom I think entitled to my consideration. Of course, we advise the ________________, and we send people to the doctor for it, but the point is that the advice need not originate at the doctor's office. What do you think about this?

Mr. Packard says, "a law that is not or cannot be enforced is a stench in the nostrils of human progress" and he then goes on to argue against reform of legislation and in favor of nullification. What kind of logic is this? Is the stench to be mystically metamorphosed into a perfume? I sympathize immensely with nullification. All liberals must practice much nullification of many laws. But it is extremely narrow, I suggest, to preach the virtue of nullification. It is a present necessity, perhaps as bad in its consequences as the very law it nullifies. The only hope for "progress" is that the nullification shall be temporary, that eventually only laws that can be obeyed will exist in our codes.

One thing more. Section 317 of the Penal Code of California reads as follows: "Every person who willfully writes, composes, or publishes any notice or advertisement of any medicine or means for producing or facilitating a miscarriage or abortion, or for the prevention of conception, or who offers his services by any notice, advertisement, or otherwise, to assist in the accomplishment of any such purpose, is guilty of a felony." The Attorney General informs me that this is all of the legislation which has been enacted in California relative to this subject. It would not seem to me, from the above, that it is illegal to perform an abortion or to distribute contraceptive information (other than by mail). Do you think I am correct in this? Again, if a Catholic priest "writes, composes, or publishes" advising abstinence, is he not guilty of preventing conception and therefore of a felony?

GORDON MCWHIRTER

Berkeley, California

TO THE EDITOR

The easiest way out

I am married going on nine years. Have had five children, buried two—one the day after birth, and the other two weeks after birth. Last July a year ago my husband lost his work and he didn't work all winter until this August. We had a baby born while he was out of work and you will understand when I say we were hungry and cold many a time.

While my husband has been working we have been trying to pay our bills, but we have to eat and $20 doesn't go far. This week finishes his work, and it seems you can't buy a job here.

I have started carrying another baby, two months already. What am I to do? I can't have any more babies that will live they tell me. When carrying my babies I am terribly sick all the time. My doctor isn't home, he will be away until the middle of October, and anyway I am supposed to be a Catholic.

I am so discouraged that sometimes I think if I could go to sleep forever how much better off I
October, 1931

would be I live in Hell all the time Please help me You will excuse me for telling my troubles but when I saw birth control in the paper it was just like being out in mid-ocean at night alone and then seeing a light in the distance I don't wonder that some mothers snuff out the lives of their little ones along with their own In the end it is the easiest way out Massachusetts K L

ELECTRIC REFRIGERATORS BUT NO BIRTH CONTROL

To the Editor

There is urgent need for more liberal distribution of contraceptive information to women in my walk of life I know hundreds of women who enjoy the modern conveniences of electric refrigerators, washers, drive their own cars, etc., but are as much in the dark regarding birth control as their mothers were thirty years ago—still worrying along from month to month with haphazard methods, and failing to get any pleasure whatever out of their love life because of the constant fear of pregnancy.

A case in point your League has advised me that they have no doctor in Toledo on record who is willing to have women referred for advice. Toledo is a city of 300,000, my own obstetrician refuses to give advice on the subject, you can see why so many women remain in ignorance.

I hope that the next few years will bring a broader viewpoint from the great majority on this subject, and that the doctors will change their attitude about giving information to women who seek it.

Nora L Knoop

TO THE EDITOR

Accept my profound thanks for the League's gift to my departmental library of Seventy Birth Control Clinics I can predict an abundant use of the book by my students virtually all of whom are believers in voluntary parenthood. I have long been a subscriber to The Birth Control Review which is conspicuous among the periodicals in my departmental library.

Dr. Abraham Cronbach

The Hebrew Union College
Cincinnati, Ohio

American Edition uniform with the New and Enlarged Edition with much additional matter

CONTRACEPTION

Birth Control

Its Theory, History and Practice

By Marie Carmichael Stopes, DSc

Fellow of University College, London

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