BIRTH CONTROL REVIEW

PERCENTAGE OF POPULATION ON PUBLIC UNEMPLOYMENT RELIEF
OCTOBER, 1933

BIRTH CONTROL
AND THE CONTINUING DEPRESSION

Excerpt from address at the annual meeting of the Pennsylvania Birth Control Federation

Studies in widely scattered areas of the United States show that the birth rate among families who have been on relief for more than a year is about sixty per cent higher than among families of similar social strata who are not on relief.

Such a situation constitutes a triple threat to the well being of the American people. There is, to begin with, the financial threat. Each year, since 1929, our relief expenditures have been about twice those of the preceding year. This has been going on in the face of a continuously serious financial situation, and obviously the time is not far distant when public budgets will compel a more searching analysis of our relief policies.

However unbounded our sympathies, there are limits to our financial capacity. Second, there is the effect upon the character of millions of families who are not only living but also propagating at public expense. No so-called "socially minded" person will begrudge relief to those in need, but every clear thinking person on or off relief, must appreciate the disintegrating consequences of an abnormally high rate of reproduction at public expense. Finally, there is the continuing threat to the quality of our population of this more rapid rate of growth at the lower socio-economic levels. Manifestly, no nation can look forward with confidence to its future when one-sixth of the next generation is recruited from the one-sixth of its population which is on public relief.

Certainly a policy of keeping from millions of families now on public relief the opportunity of acquiring information about family limitation from reputable and informed medical sources, whether practised in the name of sentiment, tradition or religion, is both shortsighted and anti-social. To carry on relief four million families, and to fail to provide them with every opportunity and facility which will permit them sanely to control
their reproduction in the light of their present circumstances, is both bad business and bad social statesmanship.

If there is one right which every family should have, it is that of self determination in the function of bringing new life into the world, for self respecting families struggling under the present economic distress, that right and its exercise becomes doubly important.

James H S Bossard
University of Pennsylvania

CHILDREN ON RELIEF

The first factual problem that confronted the Federal Emergency Relief Administration after its creation in May, 1933, was to find out how many families and persons were receiving unemployment relief throughout the United States. By early summer it was definitely determined that more than one seventh of the families in this country were receiving relief from public funds. This information was obtained through the detailed reporting system inaugurated during June, which reached out from Washington to all State Emergency Relief Administrations, and through them to some three thousand local relief offices.

The first and most significant fact presented by the Relief Census was that more than twelve and a half million persons were dependent on unemployment relief in October, 1933—a population equal to that of the whole United States one hundred years earlier, and constituting one tenth of the present population.

Florida had a fourth, and South Carolina and West Virginia had more than a fifth of their populations on relief.

Important facts relating to the age and the sex of relief persons were shown by the Relief census. More than 5,250,000 children under 16 years of age were counted. One seventh of all the children from 6 to 13 years of age in the United States were found sharing in unemployment relief, an experience which is probably comparable to their school life in affecting their outlook on the world in which they live. Almost a quarter of a million infants were starting life on relief. Children under 16 comprised 42 per cent of the relief population although they represent only 31 per cent of the general population. This unusually high proportion of children was more marked in urban than in rural areas, but otherwise it was shown quite consistently throughout the United States.

Corrington Gill
Assistant Administrator, FERA

—The Annals, November, 1934

LET'S GO TO JAIL

The reverend gentlemen who has just spoken has humorously wondered whether you* expected him to explain those bishops who voted unsuccessfully against birth control when it was endorsed by the Episcopal House of Bishops. I suppose I am expected to explain why I am not now in jail in Pennsylvania. I helped found the first clinic there and am chairman of the fifteenth, whereas our law says that if anyone as much as tells her own daughter how to avoid having her tenth child, she is liable to a year in jail and $1000 fine.

The fact is that this Pennsylvania law is obsolete, like so many in this unfortunate country where 1,000,000 new laws are passed each year (So is your law obsolete in Connecticut, only you also are too obsolete to know it!). But when in 1929 we first decided to test our law we took our precautions, we located our clinic where there were no Irish judges, we had bail ready so that our physician would not have to stay in jail over night if he were arrested, we had on our Board the wives of eminent physicians and professors, Mrs Mudd whose family has helped run the University of Pennsylvania Hospital for just one hundred years, also Mary Winsor who had been to jail for Suffrage, God bless her, and I who was dying to go to jail! I was younger, then, and longed to strike one blow for progress and for freedom 'eer I died!

Younger and more ignorant. We did not realize that all this was mere comic opera. The concluding battle for this cause had already been fought three months before in New York City, the decisive battle fifteen years before when Margaret Sanger went to jail. You will recollect the concluding battle. They raided the New York clinic and arrested Dr Stone and her staff, at the instigation of perhaps the highest paid Catholic woman in city employ. But in the finale that woman lost her job and Dr Stone was restored in glory. Lost her job! There's the proof of pudding and politics. Our chief enemies haven't peeped since, anywhere in the United States, except at innocuous legislative hearings.

France, Italy, Pennsylvania and Connecticut have as repressive laws as any in the world. In France they submit, in Italy also, in Pennsylvania we do not, for once in every hundred years we Quakers get up on our hind legs and see about things. In Connecticut, Heaven help you! you submit, though your fine is only $50 against our $1000. As for going to jail, don't you know that no well-to-do lady in the United States ever goes to jail, short of having stolen $50,000 from somebody who gets real resentful? As for the $50 fine, surely some

*Address at Greenwich Committee Luncheon
one listening to me in this lordly Greenwich Club house can afford to risk that?

This 1934 is no year of battle but a year of rap prochment with our Catholic friends Catholics are everywhere urging the safe period as a means of birth control—as some of us urge birth control upon our daughters They have only one further tiny step to take to admit that in cases where this method fails or is otherwise undesirable a physician may prescribe other means, acceptable to the Catholic Church and on consultation with her confessor in the cases where the woman is a Catholic.

The Catholic Church has been the only organization in the history of the world to make any real, age-long fight (through its Confessional and otherwise) on infanticide and abortion From the 7th Century on, as each Nordic tribe was converted, the first thing the Church did was to wean them from their accepted means of population control—infanticide With abortion, no such success has yet been had, although the Church has never given up the struggle. It is often estimated that abortions in a modern country almost equal the births. It will not be long now, however, before Catholics and Protestants are going to be able, working together, to grapple finally with this evil and substitute for it some sort of discipline over conception.

CAROLINE H. ROBINSON Swarthmore Pa

SWEET POTATOES FOR BIRTH CONTROL

Our birth control clinic here is now actually functioning. It seemed best to call it Motherhood Advice Bureau, to keep it from being confused with the Health Department (County) only a few doors down the street. After long consultation with the sponsors, medical and lay, we decided that the need here was so keen we must start ahead, without waiting for financial security. Rather unbusinesslike, in a way, but also rather necessary. In this section the work will have to prove itself before much of a contribution will be forthcoming. But in the past week we received contributions of fifteen dollars (ten dollars from a prominent women's club) and a ten dollar loan, which helps a lot. A business man gave us two rooms, rent free. The two graduate nurses and I are giving our time, and I borrowed on my account to get a secondhand examining table and the necessary supplies.

It is our policy to give no patient the service for nothing. One brought me sweet potatoes the other day, which we sold, another is doing our laundry, etc.; but all do something. There will be a very few who can pay the full rate, and we feel that they should. Eventually our workers should be paid, and of course some time we shall want larger quarters, so we must get on our feet financially.

Our rule also is to admit no patient who is not certified by her private physician, or if she comes from the country and has had only midwives we have her looked up and certified by the minister who has had charge of relief work and knows the people of the county."

MARGARET R WENDELL M.D.
Greenville Tennessee

ANNUAL MEETING IN CHICAGO

With the Illinois Birth Control League acting as hostess, the American Birth Control League will hold its fourteenth annual meeting in Chicago on January 16th and 17th. A luncheon will open the two day session, followed by a meeting on state league expansion, and visits to Chicago clinics. Specialized Round Tables will fill the second day, with a dinner as the finale. All meetings are, of course, open to the public.

The complete program will appear in the January issue. Meanwhile we urge our readers to plan for that Chicago trip. Come by air, train, car or hitching, but come.

FOR 1935

A drive for funds to carry on the work of the League in 1935 will be launched at the Chicago meeting and carried through in New York. With demands greater than ever before, the League sets $46,000 as its goal. Every penny of this is needed. A luncheon meeting in New York on January 24th will be one of the features of the drive, and street-floor Headquarters in the shopping district will carry our message to a wide public.

Volunteers are needed to put this drive over. If you have time or money for the cause of birth control, get in touch with Marguerite Benson, our executive director, Mrs. Francis N. Bangs, president of the American Birth Control League, Mrs. Dexter Blagdon, treasurer, Mrs. Frederick Cromwell, assistant treasurer, and Mrs. Louis de B. Moore, president of the New York State Federation, are serving on the Drive Committee.

CHRISTMAS, 1934

GIVE YOUR FRIENDS THE PRIVILEGE OF HELPING US MAKE BIRTH CONTROL AVAILABLE TO EVERY WOMAN ON PUBLIC RELIEF GIVE MEMBERSHIPS IN STATE ORGANIZATIONS OR IN THE NATIONAL LEAGUE. THUS YOU WILL BRING HEALTH AND HAPPINESS TO COUNTLESS THOUSANDS.
A Program for Family Health
Excerpt from paper presented at the Third Pan Pacific Women's Conference, Honolulu
August, 1934

The health of the family depends on several factors

1. The prevention of venereal disease. This can only be accomplished by early marriage which will prevent promiscuity and its resultant prostitution, and traffic in women.

2. The complete elimination of abortion as a means of regulating the family. Present scientific knowledge of birth control has reached such a stage that abortion is entirely unnecessary and the abortion rate is mute evidence of the neglect of society to care for its mothers. Knowledge of contraception takes from a woman her greatest fear in marriage, and replaces it with the desire to have children when she is ready and able.

3. A high standard of prenatal and obstetrical care is necessary to reduce the maternal mortality and to decrease the morbidity after childbirth.

4. Education along sex lines should be such that from infancy through childhood, adolescence and to maturity, the individuals will be able to avoid mental and emotional conflict on this subject.

5. Early marriage should be encouraged not only because marriage is the normal setting for the sex impulse, but even more important is the higher emotional and spiritual development which is made possible when the physical sex life is happily adjusted. Another advantage is that it is better to start raising a family when the mother and father are still young and better able to adapt themselves to the change which is necessitated by having a third and fourth member in the family.

6. Birth control has already been mentioned in connection with the prevention of abortion, but it has other influences which make it an essential part of any Family Health Program. The prevention of conception in the women who are tubercular, who have heart or kidney conditions, or who are exhausted by previous childbearing will mean a tremendous saving of human life. The knowledge that they will not need to have the responsibility of children immediately will be an incentive to early marriage, for then the man and woman may each continue studying or working and will not feel that marriage hampers their respective careers.

7. Sterilization of the insane and feeble-minded has become necessary in modern society. Its value in the prevention of the birth of people unable to care for themselves or their offspring and of people who have even no value to themselves is obvious.

8. A last factor in the essentials of a happy, healthy family is the sexual adjustment between husband and wife. It must be one which takes the reaction of both partners into consideration. The male pattern based on promiscuous sex experience with the prostitute is just as far from normal as the woman's pattern of inhibitions and constant conflict which is so typical of some of our countries. There is a happy, normal range of patterns in between these extremes.

Abortions as a means of limiting the family must be recognized as an extreme danger to the life and to the health of your women. Check the death rate from this cause in your own country and visit your hospitals to see the number of women who are fighting for their lives against hemorrhage, fever and infection. Talk with the physicians in your cities who are specializing in women's diseases and learn of the many, many cases they have that are suffering for long years from inflammatory processes in the tubes and ovaries, learn of the cases of sterility where the woman would give anything to have a child, and learn of the women who undergo a painful and more dangerous confinement due to the previous infection, then you will realize with me the tremendous damage done by abortions. There is hardly a country today where the death rate from this cause is not going up. Even when the operation is legalized and done in hospitals with well-trained physicians, it is still a terribly destructive experience.

The application of our present knowledge of birth control methods can practically eliminate abortions. The technique is so simple that it can be applied anywhere as long as thorough instruction is first given.

In conclusion, let me review the things which we must strive for to have a healthier, happy family in the future. First, there are the practical aids just mentioned, such as sterilization, the elimination of abortion by birth control, and the economic adjustment of educational training in order to foster early marriage. Second, there is the whole educational and environmental background, from infancy on, which should teach our mothers to teach their children a true and honest concept of sex and reproduction so that their sexual adjustment in later years will be satisfactory. And last, there is that most difficult problem of developing a social and as an individual attitude, which will enable our youth to meet their work, their problems and their marriages without fear or laziness, and with courage, energy, honesty and fair play. Then the family of the future will have a solid foundation in the partnership, happiness and mutual respect of its mothers and fathers.

NADINA R. KAVINOKY M.D.
—Journal of the Pan-Pacific Research Institution
Stepping Stones in Iowa

In November, 1933, a small group of women in Cedar Falls, Iowa, met together to discuss the birth control movement, and after months of reading and study decided to try to organize a center. We wrote to the American Birth Control League and received from them the advice and information that encouraged us to proceed. The literature they sent, particularly the Birth Control Review, convinced us of the practicality of service of this kind for underprivileged women in small town and rural areas. The Minnesota Birth Control League also gave us helpful suggestions and literature.

On May 24th, Mrs. Atkinson, president of the Minnesota League, and Mrs. Laurence Steevel, publicity chairman, came to Cedar Falls at our invitation. Mrs. Atkinson gave a very fine presentation of the subject before seventy interested people.

On June 5th the original small group met to form a temporary organization and voted to sponsor a lecture on birth control. Dr. E. D. Plass, head of obstetrics at the State University Hospital, was secured for a public lecture, which was given at the Women's Club House on July 10. About 200 people attended.

Our permanent organization was completed at a meeting held on July 18.

Because of the keen interest in sterilization and in the improvement of sterilization laws, we asked Dr. Paul White of Davenport, Iowa, to give a lecture on this subject, and he addressed an audience in the High School Building on the evening of October 20 on "Sterilization for Human Betterment." Our President and Vice-president attended the Regional Conference at Minneapolis, October 26th and gave a report of it at our quarterly meeting held October 29th. The case committee reported at this meeting that they had found opportunity to help a number of families and could have helped others had the funds in the treasury been adequate.

We feel that a clinic is not necessary in a small town, and are doing our work in the way that many leaders in the birth control movement think is, after all, the natural and obvious way—that of sending patients to a physician's office.

Our sixty-four members have been secured without a membership campaign of any kind, but it is our plan to have a series of teas, given by members in their homes, to which guests are to be invited after they are asked if they are interested in hearing about the League and its work. Two such teas have been given and resulted in new memberships.

If we wondered whether there is a need for a Birth Control League in a small town, we have certainly convinced ourselves that no other need is so fundamental. We should be proud and happy if some other small towns should feel encouraged by our success to organize Leagues.

Mrs. W. F. Fagan, President
Birth Control League of Cedar Falls

Rhode Island Sees It Through

Dr. Eric Stone, newly elected president of the Rhode Island Birth Control League, expressed gratification at having the opportunity of serving an organization whose object is "to raise the dignity of motherhood.

"Not only is the service of the League of inestimable value to those healthy mothers whose families during the depression would be thrust below the subsistence level, should unlimited reproduction occur, but also to those women whose health would be irreparably damaged or whose life would be endangered by the bearing of further children. That these groups, and these alone, are reached by the clinic is assured by its acceptance only of such married applicants as are referred by physicians, hospitals or social agencies.

Dr. Stone was elected at the annual meeting of the League held on November 1st at the home of Mrs. Henry Solomon, former president and now honorary president. Mrs. Solomon, in her annual report, announced the completion of the state organization in all five counties. Committees are now being formed, she said, to carry on educational and clinical activity in each county. Through these state wide contacts the work is spreading rapidly.

Among the most unique and worthwhile of the League's activities is the work of the Committee for Professional Contacts. Last spring this committee combined with the Education and Publicity committees in writing letters to be sent to different groups in the community as follows:

1. To chairmen of Welfare Committees, Hospital Superintendents, Social Workers, etc.
2. To officers of Women's Clubs.
3. To Protestant clergymen of various denominations throughout the state.
4. To physicians who have already endorsed the work of the League.
5. To physicians who have not endorsed the work of the League.
6. To members of the Rhode Island League.

These letters were based on letters sent out recently by the Massachusetts League giving information about...
the publication with Ecclesastic Approbation of the R C church of The Rhythm, which approves a so called natural method or safe period to prevent conception. It was considered important that such a development in the field of birth control, which was brought out by Margaret Sanger in the recent hearing in Washington, be made known to these groups.

These letters also outlined work being done by the League and urged cooperation from these different groups. Welfare Chairmen were asked to bring the letter to the attention of their boards. The Women's Clubs were asked if they desired speakers on Birth Control for their fall programs. Slips were enclosed in the clergymen's letters, asking for their endorsement of the work, and this is important as few ministers have been approached until now. Slips were also enclosed with doctors' letters to be checked and returned to the clinic stating interest in the work and willingness to refer patients. Over 1,000 letters were sent out, including 475 to members and contributors.

Of the 85 ministers who received letters, 18 have returned endorsement slips and many have shown interest in the work. Some of them have referred patients although they did not feel free to give public endorsement. Three clergymen have recently written to the Honoray Committee, and at present 35 ministers are represented on the Board. Honoray Committee or as endorsers 27 physicians have endorsed the work and indicated their willingness to refer patients. The total of medical sponsors has been brought up to 147. There has been an encouraging response from Women's Clubs, and in several instances they have asked for speakers.

FOR one would like to see a morality and, if possible, even a religion, consistent with our new psychological knowledge and the established facts of science, scientific and constructive measures of eugenics and birth control, scientific research in agriculture and industry, sufficient at least to defeat the gloomy prophecies of Malthus and enable ever larger populations to live in comfort and contentment on the same limited area of land.

In such ways we may hope to restrain the pressure of population and the urge for expansion which, to my mind, are far more likely to drive the people of a nation to war than the knowledge that they—and also the enemies they will have to fight—are armed with the deadliest weapon which science can devise.

SIR JAMES JEANS,
President, British Association for the Advancement of Science

BOOK REVIEW

THE SINGLE WOMAN—A MEDICAL STUDY IN SEX EDUCATION by Robert Latou Dickinson, M.D., and Lura Beam Baltimore Williams and Wilkins Company, 1934 $5.00

THE culmination of Dr. Dickinson's long and varied professional experience and wide research in the series of works now being published in The Medical Aspects of Human Fertility Series places the entire world in his debt. One is quite within the bounds of accuracy in saying that no other collection of case material equals that of these volumes in extent and variety. In The Single Woman we have a study of 1078 women, largely of the educated classes, for 350 of whom case histories of sex experience were available.

In view of the paucity of antecedent material and the presence in the American population of about five million single women, ages 20-44, great significance attaches to this extensive and realistic incursion into a mysterious and hitherto tabooed realm of scientific and public interest. The material is analyzed from numerous angles, including health, treatment, virginity, type of sexuality (homo, auto, hetero), imaginative experiences, family, religion, and work.

These and many other statistical data do not, however, convey a very accurate representation of the findings. One must read the case records. While these cases are obviously selected, one may be certain that they give many typical patterns of behavior and experience. Sex was for many of this group a source of trouble, youthful idealizations were often shattered, and disillusionment was followed by negativism or an acceptance of sex as a necessary evil. We have here once more an indication that sex adjustment is for vast numbers of modern women (and men) the most important of all personal problems. Marriage was for the vast majority of these women a persistent desire, the mores did not permit many to find, even temporarily, complete emotional satisfaction in a heterosexual relationship outside of marriage. Nevertheless, sex persisted after the hope of marriage had waned, hence a tendency to accept sex even in the absence of love.

Space does not permit discussion of many interesting questions raised by reading this volume. Suffice it to say that while the style is often execrable and the organization loose and lacking in logical development, the materials are priceless and will make this book a work of eager reference for years to come.

F H HANKINS,
Smith College Mass.
NEWS FROM THE STATES

Connecticut  The Connecticut Birth Control League now has an office in the St John's Church Parish House, Hartford, and a paid secretary. In response to an appeal for funds $400 has been received for legislative work, and the state is being organized along county and town lines. All new legislators will be interviewed. The executive secretary of the American Eugenics Society, Mr. Andrews, is serving the League as a professional speaker.

New Jersey  The New Jersey Birth Control League, as an associate group, will hold a luncheon and a noon meeting at the New Jersey Conference of Social Work in Asbury Park on December 6. Medical aspects, social and economic standpoints, and the importance of the social service worker in birth control will be discussed. Among the speakers are Dr. A. N. Creadick, Rabbi Sydney F. Goldstein, Dr. Sophia J. Kleegman, Dr. Lovett Dewees and Mrs. Edith McComb Cressman.

The Morristown Council of the New Jersey Birth Control League held its first annual meeting on October 31 in the home of Mrs. Forrest F. Dryden in Bernardsville. In addition to the Council, about eighty guests heard reports on the formation, growth and management of the clinic, which is held every Thursday afternoon following the business meeting and before Mrs. Dryden's delightful tea. Mrs. Thomas W. Hepburn gave an address, courageous in its facing of facts, reasonable in its logic and common sense, an inspiration to all who heard her.

New York  The annual luncheon of the Monroe County Birth Control League was held on October 31 in Rochester, with an attendance of over three hundred. Mrs. Stafford L. Warren, County Chairman, presided and presented very briefly the program of the League. The first public report of the contraceptive center, sponsored by the League, was given by Mrs. Ruth Bachus, the social worker. The center has been open for eight months. 159 women have been advised and 51 have been referred to private physicians. The center has the support and cooperation of practically all the social and health agencies of the city.

The chief speaker was Dr. Sophia Kleegman, assistant professor of gynecology at Bellevue Hospital Medical School. The article Birth Control and the Depression, reprinted from Harpers magazine, was given to all the guests.

The Monroe County Birth Control League feels
much gratified over the success of its first public meeting since the opening of the Welfare Center, and is encouraged that so large a group of representative citizens are interested in this problem.

New York City Committee  Philip Barry's new play "Bright Star" has been chosen for the benefit performance of the New York City Committee this year. The date is not yet fixed, but it will be the second night after the opening, about mid December. Tickets are $10, $7.50 and $5 and should be ordered from Mrs. F. Wendell Stone, 126 E. 35th Street (Tel. Cal. 5 9314).

All money received will be used for maintaining and opening Mothers Health Centers in New York City.

A new center at 241 Thompson Street will open in December, making the tenth serving underprivileged mothers in Manhattan and the Bronx.

FROM THE FIELD

West Virginia Birth control made the front page of the Charleston Daily Mail on November 24th, when that paper reported Dr. Matsner's address before the joint sessions of the State Health Officers Conference and the West Virginia Public Health Association. Dr. Matsner spoke on "Some Neglected Phases of Maternal Health" and showed that scientific birth control instruction was an essential part of maternity care. He stressed particularly the need for birth control in the present relief crisis "The average number of children per family on West Virginia relief rolls is five," he said, "a figure well above the normal." In addition, Dr. Matsner addressed the Charleston Women's Club, the Women's Auxiliary of the Charleston Medical Society and district and public health nurses of the Virginia Public Health Association Representatives from the Junior League, the West Side Women's Club, the Business and Professional Women's Club, the Quota Club, the Y.W.C.A. and the Women's University Club attended the meetings In Clarksburg he spoke to lay and medical groups and conferred with individual physicians about birth control problems.

To the Editor

May I call your attention to one point of misinformation in the book review section of the November Review?

The Encyclopaedia of Sexual Knowledge, edited by Norman Haire is not the first encyclopedia on sex Handwerterbuch der Sexualwissenschaft Encyklopaedie der naturwissenschaftlichen Sexualkunde des Menschen by Dr. Max Marzouc has been published in the second edition by A. Markus and E. Webers Verlag Bonn 1926. It is a more comprehensive piece of work, with 808 pages of text and a large number of illustrations, plus a very extensive bibliography.

Marie E. Kopp

BIRTH CONTROL
ITS USE AND MISUSE

By Dorothy Dunbar Bromley
Introduction by Dr. Robert L. Dickenson
AN ACCURATE READABLE AND AUTHENTIC BOOK FOR THE LAYMAN

Dr. Alice Hamilton It is by far the best book on the subject that has come my way, free from sentimentality on the one hand and from over realism on the other. It is not propaganda, but a reasoned and factual discussion of all phases of the subject of controlled child bearing.

Order from the American Birth Control League
$2.50 including postage

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What has been the most important social change in our time? Not I think the War, nor the growth of Socialism, but the fall in the birth rate. This change has gone on almost everywhere the only important exceptions are Russia Japan Egypt and Palestine. The restriction is mainly voluntary. Married people now have as many children as they want and not more.

—Dean Inge