New Year and the Annual Meeting is a time for looking forward and back. 1934 has seen the opening of clinics, the organization of state and local groups. The birth control army is no longer a sparse band of earnest reformers, making sporadic attacks on prejudice and ignorance. Its ranks are full and well-armed, its campaign is planned and sustained, its goal is clearly seen.

Today there are 150 clinics in the United States. There are 19 state leagues, and over 430 doctors serve on governing and advisory boards. Twenty-four items of original and reprint literature were issued in 1934, the total number of pieces being 72,500, and the Review goes each month to 8,000 readers. The second edition of Dr. Matsner's Outline, The Technique of Contraception, was issued in September. Eight thousand copies are already in the hands of physicians. This figure includes distribution to medical students through their professors in thirty-four Grade A medical schools.

For the New Year we wish for every family in America not only the proverbial chicken in the pot and car-in-the garage, we wish wanted children, and the knowledge of how to postpone and prevent the coming of children when ill health or poverty would make them unwelcome. Our hope is for a state league in every state, for clinics in every city and town, and for birth control service in farm and mountain districts. And most important, we hope for research and ever further research for simpler, universally applicable methods.

DEAR READERS

The Fourteenth Annual Meeting of the American Birth Control League will be held in Chicago. This year should be the first in which we hold our meeting in the midwest is peculiarly fitting, since our work has become national in fact as well as in name, and since Chicago’s clinics have long been an example to the rest of the country. We hope that Illinois and the surrounding states will be well represented, and that we shall reach a new group of workers and supporters.

In many ways this meeting will be the most significant we have ever held. The horizon is widening in every direction. Religious and other opposing factions are being won over, the press welcomes birth control articles and birth control news, an independent national physicians group has organized, and relief administrators call for our help.

If by any stretch of imagination or carfare you live within reach of Chicago, do please come. Hear the speakers, talk shop with leaders from other states, help unify the movement and plan a national program.

CATHARINE C. BANGS, President
BIRTH CONTROL AND THE PRESENT ECONOMIC CRISIS was discussed at a meeting on December 3rd, sponsored by the Illinois Birth Control League, the Social Hygiene Council and the Birth Control and Social Hygiene Committee of the Chicago Woman’s Club. “It is becoming imperative,” read the call to the meeting, “for those of us who are working in social hygiene and other lines of health and welfare work to face frankly the need of providing birth control information of a scientific nature for the vast numbers of people who are seeking it for economic reasons or for reasons of health and satisfactory family adjustment. It is particularly essential that this information be given to those in our community who are unfortunate enough in the present crisis to be dependent on public aid and support, especially if they are already over burdened with family cares.”

Social workers from the Unemployment Relief Service, the Cook County Bureau of Public Welfare and leading social agencies formed a large part of the audience of several hundred.

As chairman of the meeting I called attention to the fact that we were observing the tenth anniversary of the Illinois Birth Control League, and gave a summary of our work and the major conclusions established by our experience.

1 We have had 21,879 patients from the opening of the League’s clinics in 1924 through November 30, 1934. Most of them came from the poorer and less educated groups of the community.

2 The majority of these women already had families when they came to us.

3 The percentage of success with the method we used was substantially the same as that found in the best of the 150 clinics in the United States, that is, between 93 and 99 per cent in those cases where instructions were carefully and faithfully followed, regardless of the patients’ education or station in life.

4 Modern young people, rich and poor, seek birth control information, and those who are unable to obtain scientific information resort to drug store methods or buy worthless products that are extensively advertised.

Reverend Curtis Reese, Dean of the Abraham Lincoln Center, speaking on Birth Control and the Church listed the church groups that have gradually been won over to the support of the movement. He urged that health and social service departments be charged with the duty of giving full and sound information on birth control and of maintaining clinics easy of access. The public should be educated to regard all information on the subject, whether verbal or written, as it now regards information on dietetics or ethics.

Dr. Fred L. Adair, of the Lying-In Hospital, then spoke on The Rhythm Theory as a Birth Control Method. He presented clearly and concisely the physiological explanation of the theory in relation to what we know about ovulation and fertilization. We need children in certain numbers to maintain human life at a certain level. At present, three and a half children for each family would be the average number required. We are all interested in the various methods of birth control, he pointed out, and he, as an obstetrician, was as much concerned with the time of birth as with the number of births. We have no absolutely fool-proof method as yet. The Rhythm theory points to one method, but we cannot accept it or rely on it in cases where failure would be disastrous. We must be open-minded, and no one should be denied the right to use the method that seems best to him, provided it is harmless and has certain scientific value.

“We must not confuse methods with principles in discussing birth control,” Dr. Adair said in conclusion. “When the principle is once accepted, the method of greatest value will ultimately be discovered.”

The Responsibility of the Community and Social Service Agencies was considered by the next speaker, Joel D. Hunter, director of the United Charities of Chicago. It has not been easy for social workers to tell clients where to go for birth control information, he said. Many people who have never had to ask for relief are now dependent, but they do not want any interference in matters which have no relation to their dependent condition. Public agencies, supported by government funds, have felt that they should not take sides in the matter of birth control, which is still somewhat a controversial subject.

It is, however, the duty of all social workers, whether in public or private agency work, to help the people with whom they come in contact with their problems. And birth control is certainly one of them. The relation between husband and wife and the spacing of children are important factors in family work, and the social worker must be able to send people where they can get the best available information on birth control.

Helen Fisher Hohman, in summing up the meeting, emphasized the need for continued research. She also urged that advocates of civil liberty demand the repeal of all legislation which restricts the sending of scientific birth control information through the mail. Contending that hospitals and welfare agencies should...
operate birth control clinics, she predicted that in the future this would be their policy. Meanwhile birth control organizations must meet this great need and should have the cooperation of all social workers and welfare agencies.

A resolution, drafted by Dr. Louis L. Mann, Rabbi of the Chicago Sinai Congregation, was enthusiastically received and passed almost unanimously. It read:

The Cook County Board and the Unemployment Relief Agencies do not permit their social workers to recommend these duly authorized agencies, falls below social and religious standards of our time and generation.

Even the Catholic Church has felt the need of dealing with this problem by having some of its leaders urge the practice of birth control by means of what they call “nature’s own method,” a method set forth in the book, "The Rhythm of Sterility and Fertility in Women."

All other religious bodies have already gone on record sanctioning birth control through the scientific technique of contraception.

"Be it resolved that we demand that the Cook County Board and the Unemployment Relief Agencies fall in line with an enlightened public opinion founded upon the social, ethical and religious demands of the present crisis."

RACHELLE S. YARROS, M.D.
Medical Director, Illinois Birth Control League.

**Do You Know That—**

2,209 new patients have attended the New York City Mothers Health Centers in 1934?

A total of 5,903 women have received contraceptive advice since these centers opened in 1930?

It takes only $500 to open and maintain for one year a Birth Control Center in a Settlement House?

The New York City Committee is running ten of these centers in New York City?

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**Who Asks for Birth Control?**

*A few letters from the many thousands received by the American Birth Control League*

**She Looks at the Future** "I am twenty-one years old, will be married three years this month and have two children, the youngest three months old. Of course there will be more unless we learn a better method of prevention than we now know. My husband has been earning twenty dollars a week. He makes less now on short time, and has no promise of a better job, promotion or anything.

"I look at my husband’s family and see just what the future will be for us. His father does the same kind of work, makes the same wages and has had nine children. Each one as he gets old enough is put to work, with no training or education. It is just from hand to mouth with them all the time.

"Please send me all the information you can. I’ll be waiting as patiently as possible."

**A Better Mother and Wife** "My husband is an attorney and until last year was doing well in the profession. But for the fact of four pregnancies in five years, and illnesses due to them we would have had our home completely paid for by now.

"We have two lovely daughters, an adopted son and two little graves. Now because of financial and health conditions I should like if possible to avoid new responsibilities and devote my time to the development of my little family.

"Thanks for whatever help you can give me to reach my goal—that of being a better mother and a real companion to my husband."

**Nine Crowded Years** "I am so afraid we will have more children, and as things are right now I don’t know what we would do with them. I have four children born within the last nine years, also have had three miscarriages. It’s all we can do to feed and clothe our children, let alone give them any high education and privileges."

**Youth Asks for Facts** "I am a young man contemplating getting married, and am not in a position to have children. I know there are dozens of preparations on the market, supposed to be alright. I don’t know. The question I am asking you is what is the safest and best way to prevent children from coming into the world before I am able to care for them.

"I asked a doctor about this and he went off in a tirade about the fall of Greece and Rome due to inter
ference with natural processes and gave me a lot of generalities which told me nothing”

She knows what she needs “Reading a piece in the paper I decided to write to see if you could send me the Birth Control. I have a shell shock husband and two girls, four and seven to take care of and in poor health myself and God knows if anyone needs the birth control, I do”

The Safe Period

Four books and many magazine and newspaper articles have recently appeared advocating the “safe period” as a “natural” means of birth control. For the most part they are based upon investigations conducted by Dr Herman Knaus and Dr K Ogno. These specialists on disorders of women, studying all available evidence on the relationship between ovulation and the monthly cycle in women, insist that each woman has a much larger number of sterile days when she cannot possibly become pregnant than has been heretofore believed. One of the books published in the United States carries the Imprimatur of a cardinal, another the Imprimatur of a bishop, and a third is “published with Ecclesiastical Approbation.”

It is significant that some type of safe period has been advocated for centuries. In 1858 Capellmann, a Dutch physician, formulated a theory which was approved by the Church. Researches of many later observers and practical experience have proven that the safe or sterile period of Capellmann coincides largely with the most fertile period as computed by Ogno and Knaus.

That the Catholic Church has become aware of the urgency of the birth control problem has been of incalculable value in furthering the birth control movement. But there is need for much more accurate study and reports from large numbers of women before completely accepting or recommending any measures for very specific or general use. The recently published official figures on the great increase in the number of children born to families on relief compared with the population in general, the tremendous demand upon public and private philanthropies, and widespread use of contraceptives by Catholic communicants, as indicated by their full representation at birth control clinics in proportion to the population, have made it impossible for the Church to ignore birth control. These factors and perhaps, too, an element of wishful thinking accounts for the endorsement of a theory which has as yet not been adequately tested or completely accepted.

There is a tendency to distinguish between so-called natural and artificial methods of controlling conception, but the arguments used for the need of employing some method are identical. Dr Leo M LaTz, in his book The Rhythm which sets forth the Ogno-Knaus theory writes “Burdens that test human endurance to the utmost limit, and to which all too many succumb, will be lightened. I speak of economic burdens, the burdens of poverty, of inadequate income, of unemployment, which make it impossible for parents to give their children and themselves the food, the clothing, the housing, the education and the recreation they are entitled to as children of God.”

The “natural” method demands months of check on the calendar, then careful computation, and then a large measure of restraint. From this last point of view it is doomed to failure when applied to the very women seen at contraceptive clinics, where the cooperation of the husband is wanting. Moreover, its practicality is open to question for large numbers of women who are or may become irregular in their individual cycles.

The American Birth Control League’s primary interest is not in contraceptive methods per se but in the extension of reliable information to all married women, so that they may voluntarily control their reproductive functions. If and when the safe period is proven to be a dependable means of controlling conception for large numbers of women, it will be a valuable adjunct to the present technique of conception control—but obviously not a solution to the entire problem.

Dr Robert L Dickson summarizes the present medical status of the safe period as follows:

1 A “safe period” or sterile part of the cycle is present in every woman, but is a matter for individual tests, and such successful tests are not yet effectively transferable from animals. Nor has any series been studied that is made up of adequate case records of women with known “safe periods.”

2 The premenstrual week constitutes the relatively “safe period,” or “low risk period,” when the average chance of pregnancy is less than one in ten.

3 There is no time in the month at which conception has not occurred in some women

4 The only novelty in the Ogno-Knaus calendar is the claim of immunity in the few days immediately following the period. This is a time of high fertility in some women.

In conclusion, we welcome the extensive discussion of birth control and the relative value of various methods which ecclesiastical endorsement of one method has brought about.

Eric M. Matsner M.D.
THE birth control movement represents an effort to bring the reproduction of the human species under the same sort of guidance and regulation by the distinctly human qualities of intelligence, reason, foresight, and purpose which are the characteristics of civilization in all the other great interests of social life. In other words, it proposes a substitution of human methods for unmodified "natural" methods.

The order of nature places reproduction in a central position. All species of living organisms are equipped with a physiological capacity for increase, motivated by a powerful drive or urge, sufficient to overflow the entire globe in a very few generations. Since the earth is finite, and since there are innumerable species competing for existence upon it, the actual number of any given species which can survive is strictly limited. And in a relatively short period each species reaches this limit and is thereafter compelled to remain stationary over the long stretch of time. This means that a very effective control of population increase is exercised by nature itself. But it is a control through the agency of death.

Nature's practice is to allow myriads of offspring to be born, to throw them ruthlessly into the universal struggle for existence with varying degrees of temporary parental care and protection, and to leave to chance the survival of so many as are required to maintain a stationary population. It is worthy of note that in the bisexual species this means only two for each pair of adults, no matter how prolific they may be. And since the primary limiting factor among plants and animals is food, it follows that only an infinitesimal fraction of the total number of offspring can survive more than a brief period after birth. Nature's basic method of controlling population growth is through infant mortality, which in many species falls short of totality by a minute fraction or one per cent. The aggregate death rate always equals the birth rate.

Man's fundamental equipment for reproduction does not differ materially from that of the higher animals in nature. He has the same equipment for rapid multiplication, and an even more powerful and continuous urge driving it on. There is every reason to believe that under favorable conditions the human species could double once every fifteen years, and if governed by strictly "natural" forces would endeavor to do so. At the rate of doubling even every twenty years the present population of the globe could have been produced in about six hundred years. It is obvious, therefore, that some sort of control of human reproduction must have been exerted ever since the dawn of man's existence.

It is true that by the process of dispersion over the earth's surface and by developing an economic culture man has been able to escape the law of stationary population, and to increase in numbers progressively. But this increase, viewed as a whole, has been exceedingly gradual and slow, and at no time, even at the peak of man's productive efficiency, has he been able to provide means of subsistence adequate to take care of his maximum biological increase.

There always has been, and always must be, some control of human increase. The only question is as to the means of control. There are only two possible agencies of control—through deaths or through births. As has been shown, nature uses the former. Control through births must be a distinctly human achievement. There are five points in the entire gamut of reproductive experience at which control may be exerted. There are celibacy, marital continence or abstinence, contraception, abortion, and infant mortality. The last would be nature's method displayed in the human realm. Abortion is a human method, but it is control through death and requires no argument for its condemnation. There remain three methods of controlling population growth through births—foregoing marriage entirely, participating in marriage but foregoing intercourse except when a child is definitely wanted, and following contraceptive procedure. Arguments in favor of each of these have been advanced. The birth control movement represents a mature conviction that, considered medically, psychologically, and sociologically, human happiness and group welfare will be promoted far more effectively by general reliance on contraceptive procedure than on either of the other two expedients.

Nature's control is always exerted at the margin of starvation. It lies within the power of the human species to exercise control at the level of a reasonably elevated standard of living. This is desirable from the point of view of both individual and family satisfaction and of social welfare. The birth control movement is the only active force in modern life devoted to the achievement of this objective on the basis of rational self-direction, and its development is particularly urgent today in view of the fact that at the present time its limited extension results in the disproportionate increase of those social groups who are least able to support large families in an adequate degree of comfort, and least likely to contribute to the upbuilding and advancement of society by unrestrained increments to the population.

Henry Pratt Fairchild, President
Population Association of America
NEW JERSEY SOCIAL WORKERS FACE THE PROBLEM

BIRTH control received official recognition from New Jersey social workers when the New Jersey Conference of Social Work, meeting in Asbury Park on December 6th, passed the following resolution:

WHEREAS, It is of the utmost importance to all Americans that the population of the Country be vigorous and healthy, both physically and mentally, now, therefore,

BE IT RESOLVED that proper and intelligent use of scientific contraceptive methods, under the direction of a regularly licensed physician, is essential and that appropriate legislation to this end be enacted.

The Resolutions Committee of the Conference in presenting this resolution and one on sterilization printed the following significant paragraph in its report:

"It has been the policy of this Conference for a number of years to avoid official action on controversial questions, but there has been submitted to the Committee two resolutions which, while they may be fairly said to come within this designation, are apparently of such importance and immediate widespread interest, that the Committee feels that the question whether there should be a departure from its traditional policy should be determined by the Conference as a whole, rather than by the Resolutions Committee, and therefore reports the following resolutions, without recommendation for the individual action of the members."

Dr A N Creadick of New Haven, Rabbi Sidney E Goldstein of the Free Synagogue, New York, and Dr Sophu J Kleegman of New York, spoke at the meetings of the New Jersey Birth Control League, held in conjunction with the Social Work Conference. Mr Ralph Lum, Newark attorney, presided. "The hush days of birth control are over," he said, "except for the hush-minded."

Maternity care, the abortion evil, and the growth of the birth control movement were discussed by Dr Creadick. In conclusion he said "I am interested in playgrounds, character building, segregation of the unfit, physical therapy for the crippled, instruction for the blind, better housing and the manifold interests of the social worker and the social agency. But the mounting numbers of those requiring such care and the limitation of those able to provide the funds, prove to me the need of "locking the stable before the horse is stolen."

"I am convinced that what we are doing today," said Rabbi Goldstein, "in establishing small birth control clinics should serve merely as an experiment which should be taken over by the city, the state and the Federal Government. I believe that every relief station run by the Federal Government should have associated with it a birth control clinic for families on relief."

"We are not in the midst of a depression or a panic. We are witnessing the breakdown and collapse of a whole social system. The old order is doomed! And now comes the task of building up a new social system, with less suffering, less misery, less injustice and less wretchedness. Birth control is our greatest instrument. With it we may build the world nearer to our heart's desire."

Dr Kleegman said in part "I would like to have those who are opposed or doubtful about birth control spend one day with me at the municipal hospital, in the clinic, at the operating table, and on ward rounds. I would like to show them the misery, the physical and mental suffering, the unnecessary expenditure of public funds, the preventable operations and the preventable deaths which are directly attributable to ignorance of this important phase of life - ignorance which is due to our indifference and negligence in not giving these poor and deserving mothers that health service which we have to give. And yet every one of these women is in contact with a social service worker."

"I should then like to show them the other side of the picture - my private patients, whom I am free to treat as I think best. They would see the greater chance for health and happiness this more fortunate group has."

This contrast which I am faced with every day makes me acutely conscious of the fact that the spread of birth control education is one of our major duties, and the withholding of this information is one of our greatest crimes.

"It was just off the shores of Asbury Park that that terrible disaster of the Morro Castle took place, causing the loss of 124 lives. The whole nation was horrified, the newspapers carried the headlines and all the gruesome details for weeks on end. Committees were organized, laws were changed, everyone was deeply shocked because 124 human lives were lost, perhaps needlessly lost. No expense nor effort is to be spared in order to prevent the possibility of a similar tragedy."

This public response was right. We would not be human if we had responded in any other way. And yet every year there is a Morro Castle that meets with terrible disaster, causing the deaths of over 4,000 to 5,000 young women, most of them mothers of small children. With our present knowledge of contraception, we could save 90 per cent of these lives, and in addition..."
we could prevent an undeniable amount of sickness and permanent invalidism

"The most important link in preventing this terrible waste of human lives is the social worker. She will always be in direct contact with the greatest need. Her eyes must be open, and her hands must be free."

BOOKS RECEIVED

SEX-HYGIENE by Alfred Worcester. Charles C Thomas, Springfield Ill. 1934 $2.50

PROCEEDINGS OF THE NATIONAL CONFERENCE OF SOCIAL WORK.—SIXTY-FIRST ANNUAL SESSION University of Chicago Press, Chicago 1934 $3.00

NATURE'S WAY—THE FERTILE AND STERILE PERIODS OF MARRIAGE by Victor C Pedersen, M.D. Putnam's New York 1934 $1.00

MARIE STOPE—HER WORK AND PLAY by Aylmer Maude. Peter Davies London 8s 6d

DYNAMICS OF POPULATION by Frank Loomer and Frederick Osborn. Macmillan, New York 1934 $4.00


WHEN a man and woman decide that they will become ancestors, they should, before embarking upon the complicated and responsible profession of parenthood, study its details and technic, as they would expect to prepare themselves for the practice of any other great profession, such as law, medicine or engineering. The surroundings of a child, from the time of its conception onward, are of vital importance, and no one can adjust these in the most effective manner by the light of some heaven-sent inspiration. The details of making these adjustments must be learned, by hard and extensive study.

The phrase, "decide to become ancestors," was not used at random. The accidental child is handicapped, from the start, by that fact. The definitely unwanted child has small chance of coming to a perfect understanding with his universe. In order that the world may be peopled by a race, thoroughly sound psychically, we must learn how to have children when we are ready for them, and only then.

GEORGE B LAKE, M.D.
Clinical Medicine and Surgery, December
HOW THE WORK SPREADS

THE South Dakota Birth Control League had its beginning on shipboard in the summer of 1930. I had, off and on, read articles on the subject of birth control, but knew nothing very definite. So when I was invited on shipboard to attend a lecture given by Mrs F. Robertson Jones, then president of the American Birth Control League, I was very glad to go. I heard enough to be anxious to learn more, and arranged an interview with Mrs Jones to find out something about the work, the organization, its aims and program.

Four years later, during the fall of 1934, I received an invitation from the Minnesota Birth Control League to attend their regional conference. Some correspondence followed, with the result that Mrs. Streetel and Miss Houlton visited Sioux Falls to give impetus to the work, as has already been described in the REVIEW. It was first thought to set up a clinic in the city of Sioux Falls, but it finally seemed wiser to form a state organization and incorporate under the South Dakota laws, with headquarters in Sioux Falls. In this way auxiliary organizations in outlying cities, too far from Sioux Falls to be served by its clinic, could best be organized.

For the time being, with consent of the Mayor, the clinic will be held in the quarters of the city Health Department and the clinic supervisor will be the city nurse. She will be assisted by a registered nurse who will serve as assistant clinic supervisor and historian. The clinic physician will be Dr. Hazel Lamb.

The officers are N. O. Monsrud, president; Mrs. R. D. Springer, vice president; Mrs. J. H. Pier, treasurer; and Miss May Adams, secretary. Membership dues range from $2 to $100.

N. O. Monsrud President
South Dakota Birth Control League

THE GOOD OLD SONG

That frivolous line of a once popular song, "The rich get richer and the poor get children," is a matter of sober truth in Milwaukee county. Insofar as at least as its second phase is concerned, according to a survey conducted here by Dr. Samuel A. Stouffer of the University of Wisconsin.

To 5,520 families on public relief between Oct. 1, 1930, and Dec. 31, 1933, there were 1,222 children born.

To 5,520 families not on public relief in the same period, there were only 904 children born.

There were 35 per cent more confinements among relief families during the period studied than among families still making their own way.

Families that continued on relief up to July 1 of this year had a 60 per cent higher birth rate than couples who had been on relief and been able, because of reemployment or an improved economic condition, to pay their own way again.

"What is the social agency to do," inquired Benjamin Glassberg, superintendent of Milwaukee county out door relief. " Apparently the birth of children forces families to go on relief who might otherwise be able to stay off, it also keeps families on who might otherwise be able to go off.

"At the same time it is steadily increasing the number of those receiving relief. Yet one can't say that families are to be penalized for being poor."

Perhaps the Washington statesmen may some day find an answer. At present, the only one he knows, Glassberg says, is "A job for every man."

—Milwaukee Journal December 12

Come to the Annual Meeting
CHICAGO, JANUARY 16TH AND 17TH, 1935