In the "Cradle of Liberty"
— Caroline Carter Davis

The International Population Conference
— Eric M. Matsner, M.D.

Among the Member Leagues

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This month 16,000 readers will receive the REVIEW — twice as many as two years ago. Among them we are proud to number educators, social workers, clergymen, physicians and other progressive citizens, who are forwarding the cause of voluntary parenthood in every state and in many foreign countries.

Entering its twenty second year of publication, the REVIEW holds today a recognized position among social agencies, libraries and universities as national interpreter for an essential field of community welfare and public health. Today its theme is not merely family limitation, but family planning in a broad and positive sense. We hope to be able to give increasing space to news in the allied fields of eugenics, population problems and marriage counseling. Yet the REVIEW's crusading days are not over, they cannot be until every mother has access to scientific birth control information.

At the recommendation of member leagues, we are adopting with this issue a more convenient and readable format. As the birth control movement enters a new phase of wider opportunity and challenge, we look forward to reflecting its progress in a REVIEW that will be more useful, in formative and stimulating than ever before.

Hospital Clinics

The American Hospital Association at its thirty ninth annual meeting held in Atlantic City September 15th, heard from its committee on public health relations a report which included this significant statement: "The changed attitude of the medical profession and the intelligent public on the need for advice on contraception will compel many hospitals to consider birth control clinics as an avenue of health service."

Thus another professional body with profound influence on the nation's well being follows the American Medical Association in recognizing birth control as a community health problem.
Seventy hospitals throughout the country now have contraceptive clinics. Also under the public health banner are some 39 clinics located in city and county health departments. Hospitals not yet prepared to conduct birth control clinics within their own walls are liberalizing their service so that patients for whom contraceptive advice is indicated are referred to extra mural centers giving such advice.

Only a beginning has been made. But with pressure brought to bear not only by physicians but by the “intelligent public,” this year should see a substantial increase toward the goal of a contraceptive clinic as part of the maternal health service of every hospital.

Rural Birth Rates

From two government bureaus have come facts that turn our attention anew to the ill and destitute mothers of America’s rural districts.

In a statement released to the press September first, Harry L. Hopkins, Works Progress Administrator, listed “excess birth rates in poor land areas” as number one among the causes contributing to the maladjustment of rural families. The depression, Mr. Hopkins said, was only “the last straw” in an accumulation of troubles that had made relief cases of some 2,000,000 families of farmers and farm laborers. He based his statements on a study of 53,000 farm families made by the W. P. A. Division of Social Research, which revealed that farmers on relief were almost invariably those with fewer acres and more children than their neighbors.

Nearly one third of the new babies in the United States each year are born into families living in rural areas and in cities under 10,000, whose annual income, including home produce, is less than $750. These statistics were presented by Miss Kathenne Lenroot, Chief of the Children’s Bureau of the U. S. Department of Labor, to the Child Symposium of the Loyal Order of Moose of the World, meeting September 4th in Cleveland. She declared, according to the New York Times, that rural poverty and, in many places, inaccessibility of medical care, combined to produce dangerous birth situations.

Only recently has medical birth control service begun to reach rural districts, where maternal and infant death rates are particularly high and mothers are in acute need of relief from continuous childbearing. More rural referral services carried on as an extension of state and city league activity, more rural centers—perhaps traveling centers—must be the next step forward. On America’s farms, in mountain shacks, in the “dust bowl” and drought areas, thousands of mothers are waiting for this medical information that will mean to them new health and new hope.

For Human Needs

The President has made a statement in behalf of the coming annual Mobilization for Human Needs. He says, in part, “We need, even during prosperous times, the assistance of all agencies, public and private, to provide large numbers of unfortunates with the necessities and opportunities which are their due. Especially significant is the emphasis these agencies give to the questions of health and social adjustment, as they affect the younger generation—the boys and girls.”

Many workers in the birth control movement will take part in this drive to raise funds for 400 Community Chests. Many will be asked to give generously and to ask others to give. Their efforts should meet with all possible success, for the Community Chest system is sound and economical.

Contributions would go further toward
mitigating human misery, we believe, if every donor specified by letter that her check be allocated to the local agencies which recognize birth control as one of the community services essential to the health and dignity of family life. No sounder investment could be made—no saner proposal offered.

We suggest to state and local leagues that a brief statement be prepared to send to all members and friends as promptly as possible. It is not essential that Community Chests officially recognize birth control, though some do. No move should be made which would cause controversy or embarrassment to campaigners nor should publicity be sought. All that is suggested is the privilege each donor may justly claim to direct her own contribution to agencies which refer the indigent in their care to birth control centers, or which cooperate in other ways.

The radio campaign begins on October 18th. No great imagination is required to foresee what might be accomplished toward the public good if before that date every state member were prepared to take the stand suggested. May we urge your consideration and prompt action?

—M. B.

The Massachusetts Hearings

The clock has been turned back in Massachusetts, where, invoking an "obscenity" law enacted in 1879, police this summer invaded three of the mothers' health offices maintained by the Birth Control League of Massachusetts. This action seems all the more an anachronism in a year when birth control has made tremendous strides as a public health service, and has been accepted as legitimate medical practice by the American Medical Association.

Just what instigated the police interference is not known. If this is an attempt on the part of the opponents of birth control to block clinical progress, history should remind them that such tactics have served only to advance the movement. Nation-wide publicity on the raids has been overwhelmingly favorable to the work of the Massachusetts League.

Mrs. Davis' "brief history" on page six describes events through August 5th, including the appeal to a higher court of the Salem cases. On September 15th the case of Dr. Ilia Galleani was heard in the Brookline District Court. Judge Parker pronounced her guilty, she was fined $400 and the case was appealed. Doubtless the same procedure will be followed on October 6th, when the Boston Municipal Court will return a verdict in the cases of Mrs. Hawkridge, League president, and Mrs. Davis, educational director, heard September 22nd.

At this hearing, Mrs. Hawkridge stated that ninety per cent of the League's patients have been referred directly to the health offices by leading social agencies, hospitals and physicians. Fees accepted from patients have constituted only fourteen per cent of the actual cost of the medical service rendered. Some of Massachusetts' most eminent physicians, educators and social workers direct the League's activities.

While awaiting the decisions, the Massachusetts League has closed all its health offices, publicly affirming, however, its belief in the complete legality of the work. A national fund to aid the court defense has been launched by the American Birth Control League and its member leagues.

Curiously, no attempt has been made to prosecute those who benefit commercially by ignoring the Massachusetts laws which forbid the advertising, sale or exhibiting of contraceptives. Quacks continue to profit from the sales of unreliable and dangerous products for "feminine hygiene."

At both the September 15th and 22nd hearings, the prosecution admitted that physicians of the state might in their private
practice legally prescribe contraceptives for the preservation of the lives and health of married women. But, in the opinion of the municipal judges, the text of the laws for bids the same medical advice to mothers who cannot afford to consult a physician privately. Aside from the question of every mother's right to plan her family, it seems inconceivable that higher courts in a democracy will so interpret the laws as to withhold from the poor an essential health service that is available to the more fortunate.

If necessary, the appeals will be carried to the Supreme Court. The Massachusetts League stands firm, regarding this as an opportunity to clarify the legality of its work and to pave the way for greater progress.

Joseph Lee

In the death of Mr. Joseph Lee of Boston, father of the American playground system, the cause of birth control lost an enthusiastic supporter. That one whose life long interest was the joyful growth of children and the reshaping of our educational system to promote such growth, should also have been interested in extending birth control to all classes of the population may strike some as inconsistent. But, in reality, it was in close keeping with his democratic faith.

Joseph Lee realized that without knowledge of family limitation, thousands of American parents would be unable to give their children the education which citizenship in a democracy demands. That this knowledge should be the exclusive privilege of the well to do was as alien to his in stincts as the idea that only rich boys should be allowed to play ball. To him both were rights, not charities. He believed that birth control is vital to the saving of American democracy.

Margaret Lee Southard

• WORLD NEWS •

With legal sanction, the work of the Puerto Rican Association for Maternal and Child Health is moving forward rapidly. In twelve birth control centers 1,016 mothers had received medical advice up to August 1st, the Association stated in its monthly bulletin.

Hon. Benigno Fernandez Garcia, attorney general, has announced in the press that the laws relating to birth control and eugenic sterilization recently approved by the Puerto Rican legislature are not in conflict with the federal statutes in force on the island. The Association comments, "This opinion destroys the last legal barrier to the practice of scientific birth control in Puerto Rico."

Clinics are located in hospitals of San Juan and Humacao, in Lares and in connection with rural dispensaries.

The Sino Japanese hostilities have interrupted Margaret Sanger's tour of the Orient and she is returning to the United States. Mrs. Sanger visited Japan, but could not go on to China, where she had planned to aid the growing birth control movement.

In a letter made public by the Birth Control Clinical Research Bureau, of which she is director, Mrs. Sanger stated that the most encouraging feature of her trip was the gathering to celebrate the opening in Japan of a modern birth control clinic, established by Baroness Ishimoto.

In South Africa, the birth control movement has received valuable support from the senior officers of the Department of Public Health, reports the Birth Control International Information Centre. There are now clinics in three of the four provincial capitals: Cape Town, Pretoria, and Maritzburg, and in the industrial districts of Johannesburg, Port Elizabeth and Benoni.
In the "cradle of Liberty"

A Brief History of Events in Massachusetts during the Torrid Heat of the Summer, 1937

By Caroline L. Carter Davis

Educational Director, Birth Control League of Massachusetts

June 3, 1937

A session of the North Shore Mothers' Health Office in Salem was interrupted by the police. They brought with them a search warrant and removed all records and contraceptives. The doctor Dr. Lucile Lord Heinstein, the nurse, Mrs. Flora Rand, and the social worker, Mrs. Stewart Gardner, were asked to come to the police station whether they were driven in automobiles and questioned.

Warrants were issued charging offenses against the Massachusetts statutes which forbid "advertising or exhibiting" contraceptives. Counsel for the League appeared promptly and the authorities were rather thoroughly convinced that abortion was not part of the procedure of the Health Office, though one police officer could see no moral difference, even if there were a legal one. The case was called in the Salem District Court on June 22nd. A brief hearing was held, at which counsel for the League asked the return of the medical records of the patients. Judge Sears, presiding, refused the request. The police stated that the records were necessary to the prosecution of their case.

July 13th

The case was tried before Judge Sears. Testimony was given by two "stool pigeons" sent by the vice squad of Lawrence at the request of the City Marshal of Salem. One of these, a young married woman, who admitted lying when she said she had been referred by a nurse, testified to having received a contraceptive and instructions after a thorough medical examination which revealed a very high blood pressure. The unmarried policewoman admitted that she had received no contraceptives or advice, nor had she seen the doctor before she left the office of her own accord. She had given a fictitious married name and case history. Her highly inaccurate testimony on happenings at the Health Office was quietly denied on the witness stand by the social worker who had been in charge that day. This worker happened to be particularly well known at the court and her denial was unquestioned.

Mr. Robert G. Dodge, counsel for the League, presented the argument that the committee had acted in good faith under legal advice. He concluded, after outlining the work of the Health Office, "It would be shocking to prevent this organization from carrying on its worthwhile work." The prosecuting attorney argued that it was not in the province of a lower court to reinterpret a statute, the literal meaning of which was perfectly clear. Judge Sears took the case under advisement and Mr. Dodge filed a brief.

The clinic sessions continued in Salem until Judge Sears rendered his verdict on July 20th. He said, "I think the statutes continue to be law until changed by the legislature or the Supreme Judicial Court. I must find these defendants guilty, but they were acting and operating under legal advice and perhaps they did not believe they were acting contrary to law."

A minimum fine of $100 each was imposed, the Mother's Health Office closed.
and the records remained with the police. The League immediately appealed.

We set busily about our preparations for the appeal, which we hoped would be heard in October. Then

August 2nd

During the evening clinic session the Brookline Mothers' Health Office was raided. There were present two doctors, Dr. Iha Galleani, chief practising physician, Dr. Lucile Lord Heinsteim, assistant physician, the nurse, Mrs. Rand, two social workers, two visitors, and eight patients. The police had a search warrant and removed all contraceptives but not the medical records. After the police left, all records were taken to a private home. At the hearing, Dr. Galleani alone was charged with exhibiting contraceptives and offering them for sale. She was released under $500 ball to appear at a hearing later.

That seemed sufficient unto the day but—

August 4th

In the morning (while court proceedings were being held in Brookline) the police appeared at the South End Mothers' Health Office in Boston. There were present or arrived shortly, Mrs. Walter E. Campbell, chairman of the Mothers' Health Office Committee of Greater Boston, and two other committee members. As the police had no search warrant, the members of the committee refused to answer questions or allow the officers to search the premises. After the police left, the committee removed supplies and records and put up a notice, "Office temporarily closed." In the afternoon the police came again. The landlady admitted them and they had an opportunity to admire the very attractive rooms of the Health Office. The police attempted to arrest the three committee members whom they had found, and Dr. Galleani—because her name was on the door—on charges of advertising contraceptives. At the hearing on
August 5th, Judge Carr dismissed the charges because there was no evidence.

During this day the president of the League, Mrs Leslie Hawkridge, had been busily engaged in conferences with reporters. At five thirty Mrs Hawkridge and I were on the sidewalk having a few fare well words with one of the reporters.

Around the corner came five burly men in plain clothes "Police," said the omniscient reporter. The men went up the stairs at 3 Joy Street, which was locked. The ladies and a growing group of reporters lingered by Mrs Hawkridge's car. Finally the police asked us if we knew anything of a Massachusetts League to Control Birth.

Mrs Hawkridge introduced herself and Mrs Davis. The police expressed a desire to call upon us in our office but admitted that they had no warrant. We decided that it was wiser to receive them then, without a warrant, than to wait for the next day, when they might be better equipped.

With 1200 pounds of the law and a group of photographers, Mrs Hawkridge and I entered 3 Joy Street and climbed on foot to the fifth floor. The officers expressed a desire to see the contents of our file, but were politely refused. The ladies and the officers sat about the table and had a long talk on our activities. We allowed them to take some of our pamphlets, which gave the addresses of our Health Offices, we told them typical case histories.

The lieutenant said, "Don't you think the legal situation ought to be cleared up once for all?" Mrs Hawkridge told them we did, that we had nothing to hide and welcomed investigation. All this was duly recorded by the candid camera. The police left. The reporters tore themselves away remarking that it "wasn't much like most raids." It had been conducted like an afternoon tea, though the hostesses, having been caught unaware, had neglected the tea.

August 5th

Mrs Hawkridge and I were arraigned in the Suffolk County Criminal Court. The warrant included the entire wording of the statute, including the giving of addresses where the abortion of a woman pregnant with child might be procured. Counsel for the League secured the removal of all but the charge of giving the address where advice for the prevention of conception might be secured. The defendants were released on their own recognizance, to be called for a hearing.

On Thursday, August fifth, the Executive Board met and voted to recommend the closing of all Mothers' Health Offices in Massachusetts pending the decision of the Superior Court and asserting our confidence in the legality of our work.

The League office hums. The finance appeal is on its way. Letters of cheer, astrological outbursts, anathemas (but not many), checks pour in. The thermometer rises but nobody stops work. We do not know who or what started all this. It is to date "an act of God."

* * *

"Furthermore, if we may assume accuracy in the official attitude of the American Medical Association, the physicians in Massachusetts should be grateful to the Birth Control League for offering to the underprivileged a purely health service which the private physician admittedly affords his paying patients."

—Editorial, "Massachusetts Physicians and Birth Control," New England Journal of Medicine, August 12

"If it is strange that the Massachusetts police have just now got around to raiding the clinics after most of them have been conserving life and health for five years, their drive will serve the good purpose of clarifying the status of birth control in the Bay State. The Massachusetts raids, whatever their inspiration, will, in the long run, only advance this public health cause."

—St Louis, Mo, Post Dispatch, August 5
The International Population Conference

by Eric M. Matsner, M.D.

Medical Director, American Birth Control League

How the quantity, quality and distribution of the world's people will influence the future of nations and of civilization was discussed at the International Congress on Population Problems, which met in Paris July 30-August 1. Twenty-eight nations were represented. Though 177 different topics were on the program, two major problems confronted the Congress—the decline in mortality in all civilized countries, owing to greater hygiene and the advancement of medical science, the decline in fertility, owing to voluntary restriction up on procreation throughout the Western World.

The interpretation of the declining birth rate was the keynote of the conference. Groups were represented who still believe that birth control is a major cause of this decline. The majority of population experts appeared to agree, however, that contraception is not a cause of the limitation of births, but only one of several means to achieve this end. The causes of the drop in birth rates which were generally mentioned were changes in the social mores of peoples, economic factors, especially the cost today of bringing children into the world and rearing them, the unwillingness of mothers to produce children to be sacrificed in war.

Italy, France and Germany are among the countries that seek to raise their birth rates by outlawing contraception and by offering subsidies for marriages and for births. Italy imposes special taxes on bachelors. But the recent vital statistics from these countries well illustrate that it is impossible to force women to have children and futile to legislate against contraception.

Instead of the rapid rise in the birth rate which was anticipated, there has been a practically continuous decline, which many believe must have been attended by a marked increase in the number of illegal abortions.

In Italy, with one small intermission, the birth rate has steadily declined since 1922. At present it is apparently stationary at only slightly above unity. The birth rate in France has declined since 1920, despite liberal family allowances. Anti-birth control laws are strictly enforced there, but of one contraceptive which may be legally employed as a venereal disease prophylactic, eleven million are said to be sold annually.

Germany's propaganda for larger families, and her dowries to young married couples have been able to raise her birth rate only slightly. Abortions in Germany are reported to have decreased temporarily among women pregnant for the first time, but abortions in subsequent pregnancies have not decreased.

In Sweden, where contraception is legal, the birth rate has also been declining, but there has been an interesting change in the differential birth rates. A marked increase in the number of births among the higher economic classes and a decrease among the lower has resulted in a complete reversal of the usual trends.

An official exhibit of the Swedish Government at the International Exposition in Paris links the higher standard of living among the Swedish people with the voluntary limitation of the number of births. The exhibit gives a graphic exposition of the dietary improvement in Sweden, specific
ly an increase in the consumption of vegetables and of proteins over carbohydrates.

Several speakers from the United States commented on the problem of the piling up of population in poor land areas this country. Large areas are characterized by widespread poverty and prolonged depression, Dr. Frank Lorimer, secretary of the Population Association of America, stated "Overpopulation-onus relation to economic resources appears most seriously in the Southeast," he said "Accumulation of population through rapid natural increase and relatively low proportional frequency of out migrants has been partly responsible, along with various economic and social conditions, for creating this situation."

"Contraceptive History and Current Population Policy" was the topic of Professor Norman E. Himes of Colgate University. The spread of contraceptive knowledge is the result of a deeply rooted, culturally and geographically universal desire, thousands of years old, Professor Himes told the Congress. Thus law and religion have failed and will continue to fail to suppress the practice of birth control. "Selective use rather than suppression of knowledge is required," he stated. "Like any new social adjustment of a revolutionary character, contraceptive will require still other social adjustments. Admittedly there is need for the social control of birth control, but it seems wisest that the controls adopted should take the form of education for increasing responsibility and for ethical maturation rather than the external form of law, compulsive, nationalistic spirit or authoritarian religion."

He pointed out: "The current depopulation scare is no more sound scientifically than the overpopulation scare of a century ago. Both positions are extreme."

Alarmists who paint a tragic picture of the "decadence" of races whose birth rates are declining, should consider carefully the message which Mr. Frederick Osborn, secretary treasurer of the American Eugenics Society, gave to the Congress "Today the student of population is approaching new problems." Mr. Osborn pointed out "His work in the field of quantities enables him to estimate future size of population. His studies on differential fertility have shown that at present in our Western civilization a high birth rate is not a sign of virility, but is the accompaniment of a high proportion of isolated or uneducated or economically marginal people."

As a physician, the writer was particularly interested in those discussions which stressed the quality and the health of the population. It seemed to him that, on the whole, too little emphasis was placed upon eugenics as compared with that given to means of increasing population and of computing its rate of growth or decline. The adequate maintenance of population is entirely compatible with universal access to scientific contraceptives, in his opinion. Further, a planned family should be the basis of a planned population.

Going from the Congress to the International Exposition, the writer was impressed by the emphasis placed upon the improvement of the race in the exhibit of the French Exposition on Hygiene. Large posters urging premartial medical examination state that experience shows these examinations reveal a 15 per cent incidence of contagious infection or hereditary disease.

A huge placard reads, "The problem of the decreasing population, having become the primary concern of political demography, demonstrates the importance of considering the best possible conditions for rearing healthy children. Many children—yes—but especially healthy children."

To which the birth control advocate adds an enthusiastic "Aye!—plus "the best possible conditions for healthy mothers and harmonious family life."
Among the Member Leagues

District of Columbia

In its own small house at 713 E St., S.W., the Mothers’ Health Association of the District of Columbia has opened a clinic for indigent mothers. The Association was fortunate enough to receive the house as a gift, and is now planning a membership drive to raise funds for the year’s expenses. Mrs. Prentiss Willson is chairman of the Association, which has been incorporated and has become a member group of the American Birth Control League.

An attractive guest room on the second floor will be available to members of birth control leagues, who may repay this hospitality with a donation for the clinic’s work. “It is often so difficult to get a place to stay in Washington that we hope they will like the idea,” Mrs. Willson writes.

Indiana

Excellent publicity was secured during the summer for Indiana’s birth control centers. An interview with Mrs. Louis H. Haerle, president of the Maternal Health League of Indiana, published in the Indianapolis Times of September 1st, described at length the League’s accomplishments and plans. Thirty women each week, on the average, are advised at the two centers in Indianapolis. Mrs. Haerle said that Centers have also been established in Fort Wayne, South Bend and Evansville.

The opening of the Fort Wayne center was announced on the front page of the Fort Wayne Journal Gazette of July 14th. The center has a board of directors of fifteen members, and an advisory board of fifteen physicians. A registered nurse takes case histories. Patients are referred by social agencies, physicians and clergymen.

The South Bend Maternal Health League concluded its third year last spring “with renewed conviction of the value of birth control as the most constructive form of charity,” Mrs. Robert H. Swintz, president, stated in her annual report.

Maine

The Bangor Maternal Health League has been organized and filed its certificate of incorporation at the office of the county register on September 2nd. Mrs. E. R. Godfrey is president. Now that its center in Bangor is well established, the League plans to start additional centers in the county. To arouse interest toward this end, October 1st has been set as the date of a meeting, at which Mrs. Thomas Hepburn and Dr. Eric M. Matsner will speak.

Michigan

When newspapers refuse to give them publicity because there is “nothing happening,” other leagues might well take a hint from the Maternal Health League of Michigan and make some news. The League turned its directors’ meeting on September 13th into an educational project—for the education, first, of the reporters who were invited to attend, and, through them, of the general public. Most of the reports were old stories to board members. But, because they were “spoken out in meeting,” they were given good space in the local news columns.

Mrs. Addison P. Cook, president, reviewed the League’s history and aims. A report on clinical progress, presented by Dr. Harold A. Furlong, chairman of the medical advisory board, inspired one reporter to include in his story the addresses of all the clinics in fifteen Michigan cities.
Minnesota

The two community problems which held the spotlight at the Minnesota State Conference of Social Work on September 15th were delinquency and birth control. Mrs Frederick G Atkinson, president of the Minnesota Birth Control League, presided at the session which the League conducted as an associate group of the Conference.

"No normal, well adjusted home is happy without children," said one of the speakers, Rev V O Ward, Dean of the Episcopal Cathedral in Faribault. Miss Marion Sanford of the social service department of Minneapolis General Hospital discussed birth control from the point of view of a medical social worker.

Nebraska

The case history of the one thousandth patient was taken this summer at the Omaha Maternal Health Clinic. "I was thrilled to be in the clinic at the time and to take this history myself," writes Mrs William D McHugh, Jr., president of the Maternal Health League of Nebraska. "To know that a thousand women have had the opportunity for better health and happiness in their homes is a very satisfying reward for our two and one half years' work."

"We want another as soon as we can afford it"

A happy young mother with her "planned baby" at one of the twelve medically directed birth control centers maintained in settlement houses by the New York City Committee of Mothers' Health Centers. These centers have had more than 14,000 new patients since the first one opened in 1930. The Committee's annual theatre benefit, to take place the last week in October, will raise funds to continue this work for the health, happiness and security of New York families.

Photograph by Ruth Rozufy
Recent criticism by the Roman Catholic Bishop seems to have helped the clinic. Mrs McHugh reports Plans for firmer establishment of state work will be carried out this fall.

New Hampshire

A membership drive and educational campaign throughout the state is planned for this fall by the New Hampshire Birth Control League.

The League held its second annual meeting July 14th in the First Congregational Church of Concord. Officers were elected, with Mrs E. Benjamin Armstrong of Peterborough as president. It was reported that the 166 patients advised at the Concord Maternal Health Clinic during the past year had been referred by 23 physicians, six clergymen, and seven social agencies. One hundred and two patients were advised at the clinic maintained at the Deering Community Center.

Last March the League became a member of the New Hampshire Conference of Social Work. Further support is promised through the action last June of the New Hampshire Association of University Women, who voted unanimously that its member groups study the question of birth control and forward its promotion in their communities.

Illinois

Establishment of a birth control information program to serve the 150,000 members of the Illinois Congress of Parent Teacher Associations was approved by the executive council of the Congress, meeting in Chicago September 22nd. The program was drafted by a special committee headed by Mrs. William F. Krahl, state chairman of Humane Education, and it was formally accepted by Mrs. Arthur Williams, president of the Congress. It includes publication of a list of medically directed birth control centers in the state, and a series of articles in the Congress bulletin.

The Illinois Birth Control League will have representation at the State Conference of Social Work in Rockford the last week in October, and will hold a luncheon for Conference delegates on October 27th. Mrs. Effie Jeanne Lyon, the League's executive director, and several board members will be present to distribute literature and to consult with interested social workers.

New York

The News Letter of the New York State Birth Control Federation has just made its bow. In the first issue, the Federation points out that one of the most important tasks confronting local centers is "realization of the responsibility placed on us through the acceptance of birth control by American medicine, and anticipation of legal licensure if and when necessary."

Referral services have been started in Oneonta and Columbia County this summer. The Maternal Health Service of Columbia County has representatives from seven towns, who include prominent social workers.

New Jersey

As one of the health services of the county, the Morris County Committee of the New Jersey Birth Control League had an exhibit at the County Grange Fair, September 8th through 11th. Such exhibits have proved most successful in reaching rural mothers who want to know of birth control clinics.

North Dakota

Encouraging response has been received from physicians throughout the state as a result of a letter sent out by Dr. G. Wilson Hunter, medical director, asking cooperation in the program of the Maternal Health
League of North Dakota Mrs Charles Vogel, president, has been asked to represent the League as a member of the Council of Social Agencies of Fargo.

A mother of nine children was the first patient at the center started in Jamestown last June. The Jamestown Maternal Health League was aided in establishing this center by a grant from the Evelyn Seligmann Fund of the American Birth Control League. It is reported that from one-half to one third of the rural population in the district surrounding the center has been on relief for two years.

Oklahoma

Oklahoma City’s first maternal health center opened on June 11th, occupying three well-equipped rooms in an office building. During the first month, 77 patients were advised. A two hour session is held each morning from Monday through Friday. The medical director, Dr. Gertrude Nielsen, is assisted by four staff physicians. Mrs. Virgil Browne is chairman of the sponsoring committee.

South Dakota

The new president of the South Dakota Maternal Health League, Mrs. Mary Bryan of Huron, brings to the League broad experience in social service and public health work. She recently retired as secretary of the State Child Welfare Commission.

Contraceptive centers are now functioning in Mitchell, Rapid City, and in the City Health Department of Sioux Falls.

Texas

The state’s fifth clinic opened this summer in Austin, and has been certified by the American Birth Control League. Mrs. Roy Bedichek is chairman of the committee.

The county health department of Harris County has been referring to birth control clinics rural mothers who are suffering from venereal diseases.

• IN THE MAGAZINES •


CURRENT HISTORY, August: “Birth Control’s Big Year,” by Mabel Travis Wood.

A few copies of this issue available from the American Birth Control League, price 20 cents each.

JOURNAL OF HEREDITY, June and July: “Headed for the Last Census?” by Guy Irving Burch.

Two articles on population trends in the United States, refuting alarmists’ predictions of a “dying nation.” Article I: “Overpopulation or Underpopulation.” Article II: “The Differential Birthrate.” League members may have, without charge, a reprint containing both articles, as long as the limited supply lasts. Address the American Genetic Association, Victor Budding, Washington, D.C.

GOOD HOUSEKEEPING, began in September a series of articles on preparation for marriage. The September article, on choosing a mate, was by Dr. Ernest R. Groves, who started the first college course on marriage and the family at the University of North Carolina fourteen years ago. In the October issue, Dr. J. S. McConaughy, president of Wesleyan University, discusses the problems of the engagement period. An article by Dr. Ellsworth Huntington, president of the American Eugenics Society, will follow in November.

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Deeds and Dollars

When we heard of the death of Mr. Joseph Lee, a staunch friend of the League since its organization in 1921, we were moved to study our records and review the list of those who, like him, have stood by us over a long period of years.

We found that one hundred and fifty men and women have contributed continuously for at least ten years. Their gifts range in amounts from modest memberships to annual donations of more than a thousand dollars. Numbered among them are doctors, lawyers, business men, college professors, society and club women, nurses and social workers. Sixteen states, Hawaii, Labrador, Canada and England are represented.

As we pondered upon the faith and vision that have gone into these gifts and the victories that have been won by the League throughout the years, it seemed to us that the most fitting tribute we could pay to our friends of long standing would be our pledge that we shall press on until birth control information is available to every mother in the nation.

We are therefore suggesting that our more recent supporters, whose belief in the movement has been strengthened because of the efforts of these old friends, honor them by making an extra contribution for more clinics this fall. If you are a member of a local league, why not make an additional gift toward this national effort? Whatever you give, you may be sure, will be used to spread knowledge and medical advice to those who need it most.

And thousands of mothers will say, "Thank you", from the bottom of their hearts.

Please make checks payable to the
AMERICAN BIRTH CONTROL LEAGUE, INC
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(or send to us through your own state league)