Now came a period in my life when I reached a height from which I could survey, as it were, the international landscape, from which I could discern the harvest of the seeds I had sown. Not only in my own country, but in the Far East and in Europe, the tide of public opinion and of religious thought was inevitably turning so that eventually it would sweep away prejudice and opposition.

From its inception in 1914, when those significant words birth control threw a completely new light upon the whole question of sociology as well as upon what used to be known academically as Neo-Malthusianism, this movement had progressed by a series of battles. It was truly a series of battles and victories—victories, I must admit, not always clearly defined, and battles that often had to be fought over with new tactics and new armies, as I think the record of these pages sufficiently indicates.

A new turn in the battle took place when on August 15, 1930, the Anglican Bishops, at the Lambeth Conference in
London, by a vote of 193 to 67, passed a resolution that was to reverberate throughout the Christian world. Shortly afterward there followed, as if precipitated by this resolution, the publication of the Pope's Encyclical condemning in round terms the practice of contraception, thus unequivocally defining the Catholic sexual dogma, and which was inevitably to lead the way toward the crystallization of a universal Protestant acceptance of the moral necessity of birth control.

These Anglican Bishops, assembling in London from all parts of the world, and thus representing the most influential body of Protestant Episcopal churchmen, put their sanction upon the practice of birth control in the following statement:

Where there is a clearly felt moral obligation to limit or avoid parenthood, the method must be decided on Christian principles. The primary and obvious method is complete abstinence from intercourse so far as may be necessary in a life of discipline and self-control.

Nevertheless, in those cases where there is such a clearly felt moral obligation to limit or avoid parenthood and where there is morally sound reason for avoiding complete abstinence, the conference agrees that other methods may be used, provided this is done in the light of the same Christian principles.

Certainly a conservative statement from a conservative body, but its weighty significance was not lost upon the British and American press. The New York World pointed out that the House of Bishops had been urged to take this action by our old friend and defender Lord Dawson of Penn, who pleaded with the clerics not to condemn a method widely practiced by intelligent and conscientious members of the Church. It was ironical, though illuminating, that the 67 opposing votes were cast by colonial and missionary bishops from distant quarters of the Empire where no educational propaganda had been carried on. Of the ethical vindication, Dean Inge, whose approval of this work and whose cordial letters to me had always been a source of gratification, wrote: Now it is admitted for the first time that the morality of an act depends...
on the motive, and men and women must judge for them
selves whether the motive for wishing to limit their families
is of purely Christian standards or not. Birth control has
come to stay. The only course open to the Church is that
which the Bishops have now taken—to bring the practice
before the tribunal of sensitive and enlightened conscience.

Of course there were those, like the irrepressible Bernard
Shaw, who saw the whole thing as just an attempt to see
whether the Church could be brought into some relation with
modern views, a belated attempt to catch up with the twentieth
century.

I realized however, that it was the beginning of the move-
ment of age long obstacles. It had required years of tireless
efforts to remove the boulders in the pathway into the future.
But once we had begun to move them, the heaviest of them
would gain in momentum and carry lesser impedimenta with
them. This feeling was fortified almost immediately by the
news that the British Ministry of Health gave permission for
the dissemination of contraceptive instruction in maternity
and child welfare centers. Things were beginning to move
indeed. I saw again new evidence of the power of an idea
turning in our favor, and the predictions I ventured to English
friends at that time (we were in Zurich for our Seventh
International Birth Control Conference, in September) have
almost become realities.

As I write, comes from England the news that Mr. Green
wood, Labour Minister of Health, has at last approved the
establishment of independent birth control clinics conducted
under government auspices and sharply differentiated from
the maternity and child welfare centers. This sanction carries
the provision that the clinics will be available only for women
who are in need of medical advice and treatment for gyn-
ecological conditions, and that advice on contraceptive
methods will be given only to married women who attend
the clinics for such medical advice or treatment and in whose
cases pregnancy would be detrimental to health.

Here again was occasion for rejoicing. I knew that despite
the restrictions, the disappointing qualification, this plan was an entering wedge. Establishment of clinics means the opportunity for concrete demonstration of their value to society at large. It means the opportunity for the collection of invaluable data, and provides the basis for coordinated effort, for the correlation of findings. It sets a precedent for other governments to study and eventually to follow.

The British Medical Association, almost immediately upon the statement of the Anglican Bishops at Lambeth, issued an independent statement to the effect that they would not be influenced by the prejudices of either side.

A Bureau of International Information has recently been established, with headquarters in London, under the directorship of Mrs. Edith How Martyn, pioneer worker for birth control as well as a suffrage and Malthusian veteran who had fought with Mrs. Pankhurst and Dr. Alice Vickery. We have branch centers located in various cities with special correspondents to keep headquarters informed of the events and progress in each country. This bureau has a definite function of popularizing the theories of population among the common people. It will doubtless have a permanent place in world progress in birth control.

England, let us confess, has taken the lead in the dissemination of Malthusian doctrines. It is taking the lead in birth control today. It first recognized the significance of the fight I was making, it hailed me in my darkest hours with words of friendship, of understanding, of cheer.

Meanwhile, in America there were other events that were counterbalancing the indignation caused by the raid of the birth control clinic in New York the year previous. The Central Conference of American Rabbis had urged the recognition of the importance of birth control and had recommended its study. The Eastern Conference of the Methodist Episcopal Church had endorsed birth control in its April conference. A special commission appointed by the Presbyterian General Assembly to study the problems of divorce and remarriage had admitted the desirability of restricting
births under medical advice by the use of contraceptive methods. The American Unitarian Association had adopted resolutions endorsing birth control.

From distant Japan my friend Baroness Shidzue Ishimoto wrote these encouraging words. It is eight years since you visited Japan and called Japan's attention to the importance of birth control. Many serious efforts are being made by far sighted and progressive people to bring this gospel to suffering families. Finally, Mr. U. Shirakami announced a new social policy of taking up birth control as a weapon against poverty. The health department of the city of Tokyo decided to set up birth control clinics in the municipal Health Advice Stations, established in the congested slum districts of the city. Baroness Ishimoto added, as the city of Tokyo has fairly well equipped medical facilities, the clinics will be run by competent experts, and safe, correct contraceptive methods will be developed in Japan. At the same time the group of social parasites who are selling ineffective medicines or injurious instruments to mothers will vanish. Fortunately, we in Japan have no religious conflict on the subject of birth control.

From the still farther East came more news. My former coworker Agnes Smedley, now in China, wrote that the Kuomintang Government was seriously considering birth control in the solution of China's complex problems. In Shanghai two leading hospitals volunteered quarters, staffs and equipment to educate physicians and nurses in contraceptive technique and in the direction of clinics. In Peiping, Sherwood Eddy tells me, in the thoroughly modern Union Medical College, he discovered the first completely up-to-date practice and equipment that he had discovered in the whole mainland of China.

Depressing enough, I know, is the outlook for China where millions of children are brought into existence without a ghost of a chance. But when we consider that the revolution there has created a new society, we need not be surprised at the rapidity with which China, once she grasps the
significance of this comparatively new instrument of civilization, will apply it to her needs.

The same thing is true, perhaps to a lesser extent, in India, where, despite the negative opposition of Mahatma Gandhi, birth control leagues have been organized in many cities and birth control clinics have been operating for some time. With the national congress of Indian women meeting recently, and the beginning at least of a feministic movement aiming toward the abolition of the traditional slavery of Indian women, we may hope for a recognition of the new instrument in their liberation.

While a quiet underground system of birth control education had gone on in Spain since my visit to that delightfully unspoiled country in 1915, it was not until 1928 that the first open public discussion on contraception took place, at the Medical University of San Carlos in Madrid. The ecclesiastical enemies of birth control protested, but now that the republic has been declared we may hope that the power of that hierarchy will be banished with the rest of the enemies to progress and that a new era of emancipation, hoped for by Lorenzo Portet and also by Francisco Ferrer, so tragically executed by the forces of reaction at Montjuich, will gradually be set up, and that the women of Spain will be the beneficiaries of the new republicanism.

As everywhere else, the law of supply and demand has been operative in this movement. The need for reliable methods has been far greater and more extended than the ability on the part of the medical profession or science to supply them. Not only in this country but in England and Germany and the other continental countries—with the possible exception of Russia—medical supplies have been inadequate to meet the popular demand. With this in mind, I called a conference of the professional and clinical workers of all countries in Zurich in September, 1930.

The Seventh International Birth Control Conference in Zurich marked a new stage in our work. It demonstrated that our work had emerged from the period of propaganda to that
of concrete service. For five days some one hundred and thirty physicians and directors of clinics from all parts of the world gathered to report on their work, to discuss problems of organization and technique, and to correlate their findings. It was a satisfaction to know that from the single clinic I had established in New York in 1916 and the few isolated attempts in this field in scattered European cities, there are now no less than fifty in the United States and practically the same number in Europe, exclusive of those uncertain ones in Holland, to be reminded, moreover, that hospitals are establishing contraceptive services, and that various governments and states are actually promoting birth control education through official agencies. Recalling the opposition of the Imperial Japanese Government which sought to exclude me only eight years before, it was in the nature of a triumph to be informed that Dr. K. Majima, organizer of a birth control center in Japan, had been sent to the Zurich conference as an official representative of that country.

It was also a satisfaction to hear from Dr. Martha Ruben Wolf, a pioneer of the committee on birth control organized during my brief visit in Berlin in 1927, that the clinical work there is growing steadily and that over eighteen centers had been established for information.

It was encouraging to learn from Frau Stutzin that following the Zurich Conference several German and Swiss universities inaugurated plans to teach contraceptive technique in the medical curricula.

The spirit of earnestness with which all the delegates attended the sessions, the spirit of harmony and of international cooperation that prevailed throughout, were most gratifying. These men and women had gathered from the most strikingly contrasting social backgrounds. Their social and political ideals were in not a few cases diametrically opposed. Yet with rare tact they abstained from injecting these into the problems confronting them. They were subservient to the larger truth. And so, Malthusians or Marxians, conservatives or radicals, Catholics or Atheists, advocates of Capitalism or
Bolshevism, all were agreed on the necessity of concrete, practical work in contraception. For humanity's progress we marched onward. One left the conference convinced that here was the beginning of a new era in human progress, a technique of racial health inaugurated without fanfare of trumpets, without consideration of remote political ideals, but aiming to place the weapons of freedom in the hands of the individual himself, whatever his environment, whatever the condition of his previous servitude.

The resolutions passed indicate the nature of our deliberations and the present status of international opinion and aims.

The Conference closed with a recognition of all present of the need for special study and research. Results tested through the medium of clinical cases are more necessary today than ever. As I sat listening to the animated discussions, again and again the thought came to my mind that this program of experiment and research would never have been possible had not the pioneers in this movement, scoffed at as propagandists, fought the way through the jungle of courts and jails, through the prejudice and ignorance which had to be cleared away before science could enter this new realm of endeavor.

At that conference a new concept of the needs for medical and laboratory research was formulated. As a result, representatives in Oxford, Cambridge, and Edinburgh Universities are now at work seeking a solution for the problems that retard the real success of the movement. A young, enthusiastic new group of biologists and bio-chemists are now at work perfecting the science of contraception. They are developing new instruments to elevate this process from old fashioned, almost archaic methods of the past. Since the days of Men-singa, some sixty years ago, the taboos surrounding the whole subject have to an almost incalculable extent impeded development in research. Doubtless the greatest achievement of the

The Proceedings and Resolutions have been published by Williams and Wilkins Baltimore Md.
year was to stimulate scientific research in contraception. Encouraging new possibilities are becoming realities.

As I bring this record to a close, three outstanding and long fought for victories remain to be noted. The first is the very excellent report favoring birth control made public by the Committee on Marriage and the Home of the Federal Council of the Churches of Christ in America,* the second is the publication of the Pope's Encyclical—a victory in that it focalizes the center of the opposition to birth control in the Roman Catholic Church (No one can any longer deny its aggressive enmity), and the third, the statement of the New York Academy of Medicine acknowledging the demonstrated medical and social service of our clinical service and studies.*

Watching the trend of events from my point of vantage, I note especially the gradual yet persistent independence on the part of Catholic women in this country. I suspect that the demand for a clear statement (encyclical) came from this country as the most drastic tactics to control—these—women I was informed that the Anglican statement had been the means of upsetting the apple-cart Tactics aiming to bring about a reconciliation between Rome and the Church of England—which I was told in England had been going on for half a century—were rendered impossible by the stand of the Anglican Bishops. Protestant churches are making a call to universal intelligence.

Catholic men and women are bound to be affected by that call. We are all in the same current of evolution. Economic forces may vie for a time with religious influence, but eventually it wins out and determines the way the race shall go.

See Appendix