

March, 1928

Twenty Cents

BIRTH CONTROL REVIEW

Fewer but Fitter Children

Sterilization

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TEN GOOD REASONS *for* BIRTH CONTROL



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are two valid reasons for

Birth Control

The Use of Harmless and Effective Mechanical or Chemical
Methods of Prevention, called Contraceptives

This month we give a more poignant personal reason

Reason III—THE HEALTH OF MOTHER AND CHILD

(According to figures of the Federal Children's Bureau approximately 25,000 mothers die in childbirth every year and 200,000 infants die at birth or before the end of their first year. Some women are too ill to bear children, others, weakened by too many pregnancies, are unable to bring healthy children into the world)

Here is what a few experts say —

TO create a race of well-born children it is essential that the function of motherhood should be elevated to a position of dignity and this is impossible as long as conception remains a matter of chance

Declaration of
Principles of
American Birth
Control League

"It is women that bear the penalties, in injury, disease and death and mental torture, that are involved in unlimited Childbirth. They have a right to know how they can intelligently—not crudely and dangerously—control their sexual lives"

W A PUSEY, M D

"In 1909 I made a study of the birth rate and death rate under one year of age in 1,600 poor families in Chicago. I compared the large families—eight children and over—with the small families—four children and under. The rate of deaths per thousand births was far higher in the large family group than in the small. For all the 1,600 families, when divided into those with six children and more and those with four children and less, the rates were 267 deaths per thousand births for the former, 118 deaths for the latter"

ALICE HAMILTON, M D

"The woman should be instructed how to avoid pregnancy in the future. Something must be done until the woman is cured of her tuberculosis, so that she may safely go through a confinement, because every accoucheur recoils with horror from the task of repeatedly doing abortions on these tuberculous women"

JOS B DeLEE, M D

"Childbearing should be avoided within two or three years after the birth of the last child. Common sense and science unite in pointing out that the mother requires at least this much time to regain her strength and replenish her system in order to give another baby proper nourishment after its birth. Authorities are insistent upon their warnings that too frequent childbearing wrecks the woman's health. Weakness of the reproductive organs and pelvic ailments almost certainly result if a woman bears children too frequently"

MARGARET SANGER

BIRTH CONTROL REVIEW

Four Steps to Our Goal — Agitation, Education, Organization, Legislation

VOL XII

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No 3

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EDITORIAL

STERILIZATION as well as Birth Control has its place as an aim of the American Birth Control League. We do not agree with those Eugenists who would prefer compulsory laws for the unfit, while denying to women generally the right to control their own reproduction. But we recognize the value of sterilization in cases where Birth Control is likely to fail, and we are deeply interested in the work that is being done in this field. Men of high authority in science, medicine, psychiatry and social science differ widely in regard to various aspects of the question, but in the symposium we publish this month there is general agreement that sterilization in such cases would relieve many social and personal problems. Nor is there much difference of opinion as to the right of anyone who desires it to be sterilized. The difference of opinion centers about such questions as compulsory legislation, the unsettled state of our knowledge of the relative importance of heredity, accidents at birth, and environmental conditions as causes of feeble-mindedness and insanity, and the need of segregation in many cases, even if sterilized. Our contributors generally agree also that sterilization should not be used as a punishment for crime and the majority believe that education—of the relatives in those cases where the patient is incapable of judgment—rather than compulsion should be the method of the future. Among the unexpected and important arguments which those who support sterilization have brought out in this debate are the excellent direct effects in many cases of the sterilization operation on mental and physical health, and the indirect effect of the operation on women in bringing to light bad abdominal conditions which should be corrected.

California, where a law compulsory in form is being administered, in most cases, as a voluntary law, furnishes us the largest experience of sterilization in practice. Perhaps the most valuable contribu-

tion from this state is the evidence it furnishes that education is spreading so successfully that patients often come to state institutions for the express purpose of having the operation performed. From Sonoma State Home for the feeble-minded comes another important contribution, for Dr. Butler, the medical superintendent, includes among his reasons for advising sterilization the fact that handicapped parents are incapable of furnishing an adequate living and proper environment to a large family of children. This is quite as important an argument as any based on heredity, and it is one that readily appeals to the patients or their responsible relatives.

RATHER over half of the States have sterilization laws on their statute books. But very few of these laws reach the standard that we should like to see attained. However there is much encouragement in the fact that the laws have, in general, been administered in an enlightened manner, and the further fact that amending bills, correcting some of the earlier defects, have been introduced in the legislatures of many of these States. In 1927 Indiana, which was the first State to pass a sterilization law, after 20 years experience, passed an amending act, which greatly improves its former legislation. North Dakota also made of its law a much more eugenic statute, and provided for full records to be kept of effects of operations. No mention is made in this law of the right of individuals to demand the operation, but there is no prohibition, as there is in the earlier Iowa law, of operations on request. The situation with regard to the sterilization of persons who do not come within the categories mentioned in the various statutes is still ambiguous. In some states the only way in which parents or guardians of feeble-minded individuals, or such individuals themselves when sufficiently intelligent to appreciate its value can secure an operation is by entering temporarily an institution designated under

the law of their state. The idea of compulsion has been and is too prominent in the law, and the legislation will be more satisfactory when this feature becomes subordinate to a fuller comprehension of the value of voluntary choice. This can only come as a result of better education and a finer public opinion concerning the right of every child to be born with proper heritage and into fit conditions—which include, of course, parents properly qualified to bring up their children to be social assets.



RECENTLY, Miss Grace Abbott, its chief, has for the second time emphatically denied, in answer to a charge brought by members of the American Association of University Women, that the Children's Bureau has any part in Birth Control activities. Operating under a federal government whose law forbids the dissemination of this information, and under constant attack by enemies in Congress, it is very easy to see why the maternity centers of the Bureau could not give this information. Yet the Bureau's splendid studies of poverty and the size of families in relation to infant mortality constitute in effect, as Dr. E. M. East has recently called them, a series of "memoirs on Birth Control." Its organizing of health work for maternity and infancy, and its study from year to year of the figures and results of this work, furnish further arguments for Birth Control. For these studies show that while the Bureau has had an appreciable effect on infant mortality, (though not so great an effect as it had hoped) on maternal mortality it has had no effect whatever. In 1915, the maternal mortality of the twelve states and districts in the birth registration area of that year was 6.2 per 1,000 births. During the World War it rose to 8 and 9. From 1921 on, it has stood at 7 or a little under (6.8 in 1925). In the ten years, that is, the rate has actually risen appreciably. Yet during this time, more and more states have been added to the registration area and the organization of health work within most states has improved, largely through the efforts of the Bureau. The adding of more states, up to the number of 36 in 1925, to the registration area has virtually done nothing for mothers in childbirth but bring out how appallingly widespread and untouched by ordinary health work the death rate of mothers is.

There is but one lesson to be learned from these figures. It is that the maternity work of the Children's Bureau and of any other organization which attempts to put into effect a full and fundamental health program will be ineffective until preconcept-

ual work, the teaching of the means of spacing children to protect the mothers' health, becomes an essential part of its program. To attempt any program without this is to build without a foundation.



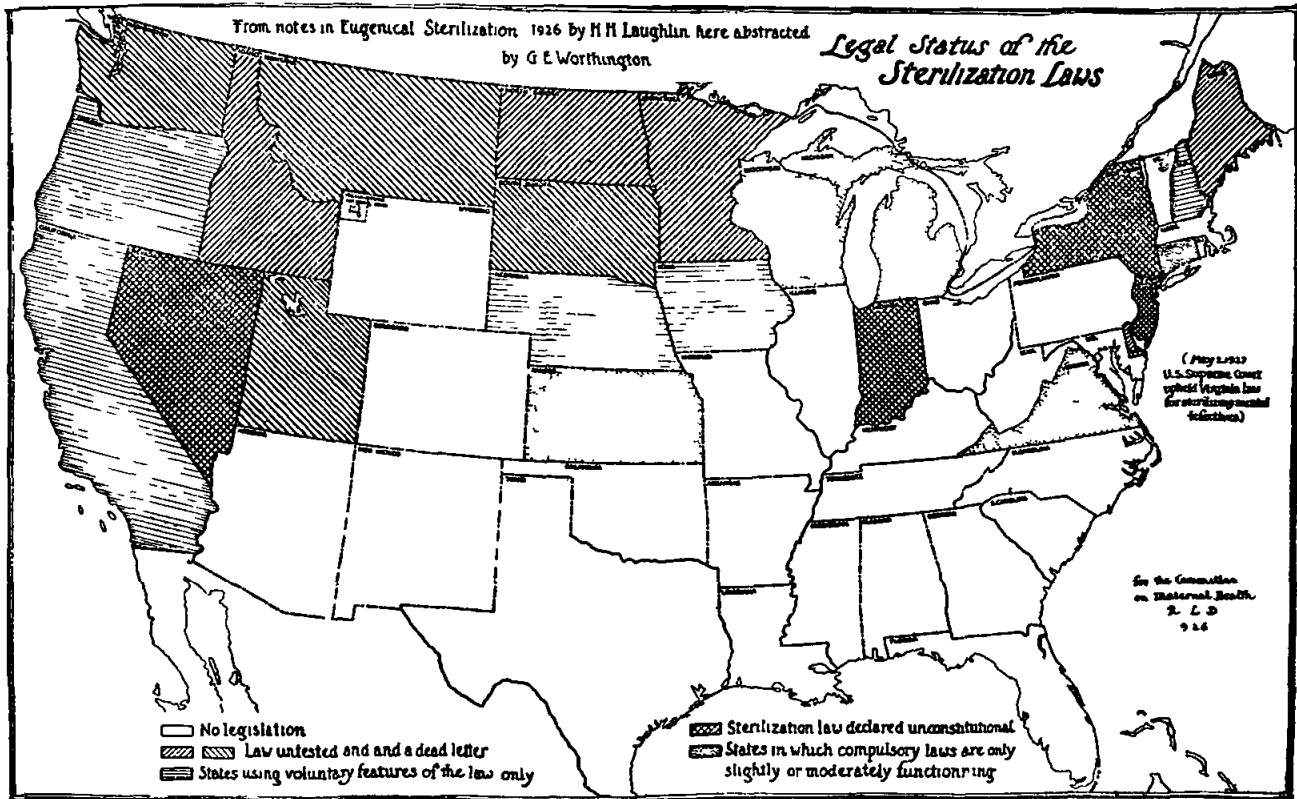
THE MILBANK MEMORIAL FUND is another public health work whose conservative program has made no impression on maternal mortality. The Health Demonstration in Cattaraugus County, N. Y., which it has subsidized, has in five years cut the tuberculosis rate in half, the infant mortality one-third, and has shown important improvements in many other fields of public health. The five years have proved the excellence of its program as far as it goes. Press and people and the County Board of Health have accepted another five years grant. The county medical society alone disapproves. In the face of measurable results and the full and enthusiastic approval of the public, by secret anonymous ballot the local practitioners of Cattaraugus voted 3 to 1 that "the experiment has demonstrated little that affects the county favorably." We need not discuss the motives behind this criticism—the fact that these doctors, 3 to 1, stated also that the demonstration had had a detrimental effect on their prestige and practice is perhaps an indication of one motive. What interests us is that this health program, which contained no controversial features, which offended no prejudices and was administered by medical experts, yet did not escape a bitter attack by those who might have been counted on as its strongest supporters. Conservatism in this case has not conciliated the narrow-minded among professional men. On the other hand the narrow-minded professional men have been powerless to influence public opinion. The Fund has proved to the satisfaction of the public the value of its first five years' work. We believe that if it broadened its program to include Birth Control, as the foundation of its antenatal work, it would not only attract to itself the support of the sensible people in Cattaraugus County but it would show, at the end of its next five years—what no health body has yet shown—an impressive cut in the death rate of mothers in child birth.



THIS month, the American Birth Control League is happy to announce the return of Margaret Sanger from Europe. Since the close of the International Population Conference, she has been in Switzerland for her health.

Sterilization

Map Illustrating State Legislation



Courtesy of the Committee on Maternal Health (N. Y.)

Sterilization as a Social Measure

By ROBERT C. DEXTER

STERILIZATION is one of the many problems which intersect the field of physiology as well as that of sociology.

Of the medical aspects of sterilization I am not competent to deal. There is, however, one aspect of the medical problem which, as a sociologist, I want to emphasize and that is that the medical facts in regard to the effects of sterilization should be widely broadcast. There is apparently a very widespread feeling among the lay public that sterilization is a very serious operation and that it has remarkably far-reaching physical and mental effects on both men and women. So far as I have been able to ascertain, neither of these statements is correct, but whatever the facts are, the results of the latest scientific researches should be made public

property, because it is very largely owing to this feeling that laws providing for sterilization of certain types of criminal and feeble-minded have been ineffective. Sterilization has been considered a cruel and unusual punishment, if not legally then certainly morally.

In my judgment sterilization should not be considered primarily as a punitive measure but purely as an eugenic measure. That means, therefore, that it should not be incorporated in laws providing for imprisonment or fines, but that it should rather be in the statutes dealing with public health. It seems to me that the passing on of a thoroughly dysgenic strain is quite as serious a violation of the health code as the passing on of whooping cough or scarlet fever. I am inclined to think that the reason

why most sterilization measures so far have failed is first, that they have not been preceded by adequate education and second, that they have been considered as punishments and not as community health measures

SO FAR AS the procedure to be used in deciding what cases should be dealt with by surgical measures, I should suggest that both the State Board of Public Welfare, the State Board of Health and the State Boards dealing with crime and prisoners be empowered to recommend individual cases for treatment. Such a recommendation, however, should only be made after a thorough investigation of the individual's past, his physical and mental condition and his family history. It will undoubtedly frequently be thought that such an individual could be allowed to remain at large in society, if there were not the ever present danger of bringing forth children in his or her own likeness. Then, such recommended cases should

come before a State Board of physicians, psychiatrists and social workers and presumably somebody representing the general public. This board, with all the evidence before it, should have the final authority to decide. I suppose that it would only be fair that the individual before the board should be represented by counsel in order to see that his legal rights were safe-guarded, but it is almost certain that scientists would be exceedingly careful in recommending such a procedure.

The objection to sterilization comes very largely from sentimentalists, and perverted sentimentalists at that. It would seem to the writer that it was by far less important that an individual be deprived of certain functions than that boys and girls should be brought into the world doomed before their birth to live a life of unhappiness, disease and crime. Even if society had no stake in the matter right-thinking sentiment itself would cry out in behalf of these unfortunate creatures.

Sterilization: A Social View

By WARREN S. THOMPSON

STERILIZATION as a method of dealing with certain types of degenerates is receiving considerable attention at the present time. The Eugenists in particular are quite fond of recommending sterilization for the feeble-minded, the insane, the epileptic and certain criminal types. There is no doubt of the effectiveness of sterilization from the standpoint of the elimination of the traits of the sterilized from the hereditary stream. There are however, some social consequences of sterilization that need to be considered very carefully before it is adopted generally. It has its very definite limits of usefulness. Perhaps some of these limits can be appreciated more readily if its social effects on a few of the more common types of degenerates for whom it is often recommended are studied, and their relations to the life of the community are scrutinized with some care.

The feeble-minded girl in the small community, who becomes the prey of most of the young men living there, is quite generally regarded by eugenists as a menace to the community largely because of the children she is likely to bear. Manifestly, if sterilized, this menace is removed and the eugenic conscience appears clear. To the sociologist this view is too simple. The half-dozen children—more or less—that such a woman might leave behind her seem less to be feared than the demoralizing effects

of her presence in the neighborhood. If she is removed entirely from contact with normal life and people and properly segregated not only will the eugenic requirements be fulfilled but her power of producing social degeneracy is likewise curtailed. She cannot spread disease throughout the community, she cannot set low moral standards which more normal people may be inclined to follow, she cannot be the means of developing careless sex habits in her neighbors and she is quite likely to be more nearly self-supporting than if left at large. Thus in this case it is evident that sterilization is insufficient to curtail completely the power for evil of such a person and it is unnecessary if the proper segregation is provided for, as this latter deals with both the biological and social aspects of the case at the same time.

Sterilization Irretrievable

Furthermore at the present time it is not known exactly what kinds of feeble-mindedness are hereditary. Sterilization irretrievably prevents participation in the bearing of the next generation and may do some individuals great wrong. Segregation may do the same wrong, but after several years of segregation one may still be released to normal life and share in all its phases, if fuller study of one's condition seems to justify the giving of freedom. Segre-

gation for a few years does not render forever impossible fuller participation in normal life if this later proves feasible

Too much emphasis should not be placed upon the sexual havoc often wrought in communities by the presence of the feeble-minded. There are other standards which their presence makes more difficult of maintenance which are fully as important, if not more so. The ideal of family and individual self-support, the standards of decency in housing, cleanliness and modesty and the normal give and take of neighborly intercourse may all be endangered to some extent by the presence of feeble-minded persons in the community. Especially are the mentally normal who are on the borderline between social degeneracy and social normality likely to be adversely influenced by those who fall below the commonly accepted standard of what is desirable.

The Insane

Sterilization of the insane is open to some of the objections expressed above regarding its use in the care of the feeble-minded. But in-as-much as insanity is a condition which frequently does not manifest itself until after the reproductive period is past, sterilization is not invoked as a solution of the problem of the insane to the same extent as for feeble-mindedness. People of unstable mental makeup are, however, very dangerous when left at large even though they cannot reproduce. They help to break down community standards, they often make life miserable for other members of their families and they frequently endanger the safety of life and property in their neighborhoods. Only segregation can prevent these social ills following from insanity in many cases, and only under segregation can the work of rehabilitation be satisfactorily carried on in a considerable percentage of the cases. Since the proper type of segregation also prevents reproduction where this is necessary, it is by all odds the most satisfactory method of dealing with the insane as well as the feeble-minded. Indeed, there is less need to argue the case of segregation for the insane than for the feeble-minded, because it is much more generally believed that it is harmful to have the insane at large than is the case with the feeble-minded. It seems not unlikely, however, that the facts would show just the opposite.

Social Deterioration

The social deterioration of community life is probably abetted more by the presence of the feeble-minded in the schools, in the laboring groups and among the unemployed, than through the presence of an equal number of insane, even though the

feeble-minded are sterilized. The very fact that people are more generally aware of the danger from the presence of the insane than from the presence of the feeble-minded puts them on their guard against them. The feeble-minded, on the other hand, are often not known and not recognized as degenerates and thus are allowed to participate in the normal life of the community. Since they are quite generally unable to maintain the standards of the rest of the community they tend to lower the tone of the whole and very insidiously undermine the integrity of the so-called normal group. As was said above, sterilization does not touch this very fundamental social problem. Indeed in many respects it intensifies it and makes it more difficult of solution. As often happens the belief in the efficacy of a half-cure or false cure gives us a feeling of security which makes us insensible of the dangers we face and renders us unwilling to take the more heroic measures that are really needed.

The Epileptic

On the whole sterilization is more effective and valuable applied to the epileptic than to either of the groups discussed above. In a considerable proportion of the cases of epilepsy the seizure is short and infrequent, and does not seem to greatly affect the ability of the person to function normally at other times. The great desideratum in such cases is to see that they do not reproduce. Sterilization of course does this, at the same time that it leaves them free to pursue their normal mode of life. Of course there is bound to be considerable danger involved in having any one in the community who has all the normal desires of sex and who knows he is and is known to be unable to take part in reproduction. So that even among the epileptic it would be a great mistake to place much reliance on sterilization as a solution of the problem. Each case must certainly be considered on its own merits and from all angles. And it cannot be too strongly urged that the removal of the reproductive power of a person does not remove their power of doing great social injury to the community.

If one believes that people are what they are almost solely because of inherited capacities, then a firm belief in the efficacy of sterilization as a solution of many problems, follows quite naturally. But, as a sociologist, the author believes that inherited capacities are developed through and are given direction by, the circumstances which surround people. Naturally, therefore, his belief in the efficacy of sterilization is limited and he would see it practiced only where it supplements other methods of treatment which are calculated to deal

(Continued on page 97)

Legal Status of Eugenical Sterilization

By HARRY H. LAUGHLIN

THE whole matter of sterilization fits into the eugenical problem under the heading "differential fecundity." As a matter of applied eugenics, it is the business of the state to encourage fit and fertile matings among those best endowed by nature with fine heredity qualities, and to deny marriage and reproduction to those who are potential parents of hereditary degenerates, even to the extent of providing for their compulsory sexual sterilization. By eugenical sterilization is meant the destruction of the physiological ability of a man or woman to procreate or to conceive offspring, in cases of potential parents with inferior hereditary endowment.

With the male, the simplest operation is vasectomy, just about as serious as pulling a tooth. It consists in removing a short section of the *vas deferens* or sperm duct. With the female, in the present stage of surgical knowledge, the matter is surgically more serious. It requires the opening of the body cavity, and the removal of a section of each of the fallopian tubes. Thus the female patient is sent to the hospital for two or three weeks. It may be that the surgeons will learn some simpler technique, such as scarifying the opening of the fallopian tubes, without opening the abdominal cavity, or by causing permanent sterility by the use of X-rays.

Eugenical sterilization is for the one purpose of preventing reproduction of persons who would, according to the known facts of heredity, in high probability, produce degenerate offspring. Several of the eugenical sterilization statutes provide for sterilization for the "benefit of the individual and for the good of society." No sterilization law is needed for providing for sterilization for the therapeutic benefit of the individual. Existing surgical laws amply cover operations which incidentally might cause sexual sterility.

The Eugenac Aspect

But we are here concerned more with the eugenical than with the surgical aspect of the matter. If it is agreed that certain individuals are so degenerate in their hereditary properties that offspring procreated by them would, in high probability, rank as defective or degenerate persons, despite the best efforts of medicine and education, then it would seem to be the duty of organized society to prevent their reproduction. If such prevention is accomplished by institutional segregation—as is the case

with most modern state institutions—then sexual sterilization is not necessary. If, however, the degenerate individual is physiologically able to reproduce, and is not restrained from doing so by effective segregation, then the surest way to prevent reproduction would seem to be to destroy the physiological capacity to reproduce. This has been done in many cases.

The First Sterilization Law

The first legalized eugenical sterilization was the Indiana law of 1907. Since that time twenty-three different states have, at one time or another, enacted eugenical sterilization laws. These were largely experimental and called forth much litigation. The whole thing, however, worked out in the direction of both legal and practical progress. Many of the early laws had elements of punishment in them. It seemed, for example, to be the application of poetic justice to castrate certain sex-perverts who had committed certain crimes against sex. If such sterilization was not cruel, it was, at least, unusual. But now the sterilization laws are in no manner punitive. The only motive for eugenical sterilization is to prevent the reproduction of offspring who would be endowed with such low physical, mental and temperamental qualities as to make it highly probable that they would function as defectives or degenerates. There were many other features in the early laws which the courts questioned. Finally, however, after twenty years of experimental legislation, the Supreme Court of the United States, on May 2, 1927, upheld the constitutionality of the Virginia sterilization law in the case of *Carrie Buck vs J. H. Bell* (No 292, October term, 1926). The Virginia law is held to be well within the police powers of the state. It is not punitive. It protects the rights of the individual by due process of law, and by its use the state exercises its now decided right to cause the sexual sterilization of individuals who, from their individual and family history evidence, would, in high probability, produce degenerate offspring, if they produced any offspring at all.

Supreme Court Decision

The decision of the United States Supreme Court marks a step of fundamental importance in the advance of applied eugenics in the United States. The first experimental period is now ended. In this decision the opinion of the Supreme Court

was delivered by Mr Justice Holmes, in the course of which he said

"We have seen more than once that the public welfare may call upon the best citizens for their lives. It would be strange if it could not call upon those who already sap the strength of the State for these lesser sacrifices, often not felt to be such by those concerned, in order to prevent our being swamped with incompetence. It is better for all the world, if instead of waiting to execute *degenerate offspring for crime*, or to let them starve for their imbecility, society can prevent those who are manifestly unfit from continuing their kind. The principle that sustains compulsory vaccination is broad enough to cover cutting the Fallopian tubes. *Jacobson v Massachusetts*, 197 U S 11. Three generations of imbeciles are enough.

"But, it is said, however it might be if this reasoning were applied generally, it fails when it is confined to the small number who are in the institutions named and is not applied to the multitudes outside. It is the usual last resort of constitutional arguments to point out shortcomings of this sort. But the answer is that the law does all that is needed when it does all that it can, indicates a policy, applies it to all within the lines, and seeks to bring within the lines all similarly situated so far and so fast as its means allow. Of course so far as the operations enable those who otherwise must be kept confined to be returned to the world, and thus open the asylum to others, the equality aimed at will be more nearly reached."

Mr Justice Butler dissented, but did not write a dissenting opinion.

A Clear Road

It is now clear that any state in the American Union can, if it so desires, enact a eugenical sterilization law which, based on the experience in legislation, litigation and practical administration, would—unless specifically forbidden by its own State Constitution—be held constitutional, and which would reasonably be expected to aid greatly in solving the problem of hereditary degeneracy. But too much must not be expected from eugenical sterilization. It will doubtless increase in usefulness, and will become a powerful factor acting in the direction of its purpose, but it is only one force out of many which must converge in concerted effort to destroy hereditary degeneracy.

It is popular in some quarters to deride experimental legislation and to bait law makers, but when a new problem is presented for legislative solution, the best that human wisdom can do is to act conservatively, but none the less courageously and experimentally, in achieving the desired ends. The part which the common law, or the so-called bill of rights, has played in the working out of a successful eugen-

ical sterilization law is very striking, and forces the would-be cynic to praise the fundamental soundness and usefulness of our constitutional law. Early laws in the particular field were attacked on the ground that some were punitive, and if punitive, they were cruel and unusual, and if not cruel, were at least unusual. Others seemed to be bills of attainder, others two punishments for the same offense. Some early laws had to stand the test of not being *ex post facto*. Then the matter of class legislation, or equal protection of the laws, came in, and finally the whole matter of policy and authority came in—that is, it was necessary to determine whether sterilization for eugenical purposes was well within the police power of the state to advance the public welfare. One by one these problems have been met, the old laws repealed, and new ones enacted in conformity with the requirements of the bill of rights, as laid down by different state and federal courts. Finally, when the punitive element was left out entirely, the new bills struck directly at their main purpose, namely, the prevention of reproduction of defectives. And now states have learned how to write laws which are better and more direct and effective for having stood the clarifying process of meeting the fundamental conditions required of the bill of rights.

Enough experience has now been had in administering the several sterilization laws of the United States so that, now, supported by the final legal test in which the highest court of the land has sustained the legality of sterilization, any state can, if it desires, provide in a conservative and legal manner for the sexual sterilization of certain persons, which will operate practically in preventing the reproduction of defectives or degenerates.

Standards Needed

The sterilization laws must set a standard for hereditary degeneracy. They must provide a criterion for their administration and for the courts. In most of the present laws this standard is very low, so that it applies only to the most patent cases of hereditary degeneracy. A workable standard of probability of hereditary offspring must be set. The law can establish such a standard at "the probability that one-fourth of the offspring would, due to defective heredity, function as social inadequates," or at "the probability of producing defective or degenerate offspring greatly in excess of the normal probability." In the absence of workable Mendelian rules for computing the probability of degenerate offspring, such probability may be fairly computed by measuring the incidence of hereditary defectiveness among the thirty or forty nearest blood kin.

The situation calls also for a definition of degeneracy which, thanks to modern mental and temperamental measurements, and provisions for custodial care, can be readily provided, in a satisfactory manner, by the statute. The laws too must provide procedure, they must describe just how the state must take the initiative in bringing about the sterilization of a potential parent of degenerates. The law must provide adequate court procedure, the process being too fundamental and important to be intrusted to officials as a mere administrative detail. Then the voluntary and compulsory elements must, in a manner similar to the provisions for commitment to custodial institutions, be carefully stated in the statute.

What Has Been Done

Up to July 1, 1925, in the several states, 6,224 persons had been legally subjected to eugenical sterilization. Administration officers are learning more about the law. They are finding out how to study pedigrees with the view to determining hereditary degeneracy. The courts are learning more about the purpose of the law, and are learning how to evaluate testimony in reference to hereditary degeneracy. While it is probable that, in the future, sound laws will provide for compulsory eugenical sterilization, it is probable, too, that in some border-line cases voluntary sterilization will be permitted. In the cases of the more degenerate individuals, who are still capable of reproducing, it is most likely that either the state will have to take compulsory measures, or the voluntary element be supplied by the guardians of the degenerates. Of course, in case an individual is sound personally, but has a high incidence of degeneracy in his near kin, so that his probability of carrying degeneracy in a recessive manner is great, the voluntary element may be provided for by law. The laws will begin conservatively by applying only to the most patent cases of hereditary degeneracy. Later, as more experience is had by administrators and the courts, and the states become more confident of the use of sterilization in preventing degeneracy, the standard may be raised, and still greater portions of the degenerate sections of the population be prevented from reproducing by sterilization.

Studies on the physiological and social effects of sexual sterilization on different types of persons, of different ages, and of each sex, were begun by the Eugenics Record Office in 1911, and have recently been subjected to thorough consideration by Mr Paul Popenoe, working in collaboration with Mr E S Gosney of Pasadena, California. These studies have been made, first-hand, on cases histories of long standing in California institutions, where so

many persons have been legally sterilized on account of hereditary degeneracy. Their findings seem to indicate that the fears of sexual sterilization on account of undesirable physiological and social consequences are largely unfounded. Their publications are giving the data and analysis by which they have arrived at this conclusion.

Parallel Cases

The legal aspect of the matter has a close parallel with each of three legalized processes: first, vaccination. No one now doubts the legal right of the state to compel its citizens to be vaccinated. This may call for seizing the individual and applying a very minor surgical operation, for the process has been demonstrated to be a protection of the individual and of the state. Similarly, the courts have held that a state may, if it chooses, cause certain individuals to be made sexually sterile, even though it may imply compulsory surgical operation. Second, another legal parallel is found in legally taking away the liberty of the individual in his own interest and in that of public welfare by compulsory quarantine. A third parallel is the commitment to custodial institutions, where the voluntary and compulsory elements are quite parallel to those which will doubtless work out in sterilization. Certain individuals may take the initiative and submit to voluntary confinement. For others the initiative may be taken by the near kin, while the commitment of others may be fought both by the individual and his family, but nevertheless the state may, by proper court procedure, cause the commitment of the individual. This is for his own protection and for the protection of society.

The twenty years from 1907 to 1927 constituted the first era in successful experimentation in the application of eugenical remedies for hereditary degeneracy. Applied eugenics must operate both positively, principally in mate selection, migration control and by influencing differential fecundity, and negatively, principally by restricting reproduction by persons with inferior hereditary endowments. Eugenical sterilization operates on the negative side, but it is none the less a necessary and effective instrument for eugenical advance. As a co-ordinate with restrictive marriage laws and custodial segregation, eugenical sterilization has demonstrated its usefulness as a legal and conservative agency for race betterment.

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Some Objections to Sterilization

By ABRAHAM MYERSON, M D

THE principle upon which I base my reaction to a proposal for sterilization is that facts come before acts

The heredity and transmission of mental diseases is still an unknown country. After reading most of the important literature on the subject, and after a good deal of personal research, I believe that one may state as follows

Concerning mental diseases. Certain types of mental diseases run in family groups, but the laws of inheritance even in these cases, are not all understood. A very large part of the mental diseases appear to have no inheritance whatever. We have not yet reached, in the case of those mental diseases which appear to run in families, any understanding of their pathology, and because we are thus in the dark as to the essential nature of these conditions, we have no basis upon which to work

Concerning feeble-mindedness. The classical and royal families of feeble-mindedness, the Nams, the Jukes, the Kallikaks, have genealogies and histories which are an inextricable mixture of fact and fable. It is entirely wrong to accept them as typical of feeble-minded families, even if they are feeble-minded. A study of some 800 families in Massachusetts in which feeble-mindedness occurred, revealed no duplicate of any of these families. A study of the feeble-minded of Massachusetts did show that probably the larger part arise in perfectly normal families, without any heredity whatever. It also showed that there are families in which feeble-mindedness occurs for more than one generation and in several members of the family. This research, however, showed no such devastatingly high birth rate or continuous propagation of the feeble-minded as is universally postulated by those advocating sterilization

Regarding epilepsy. All the later work makes negligible the role of heredity in epilepsy, and shows it to be a bodily disturbance, possibly arising on a constitutional basis, but undoubtedly arising in many instances from disordered chemistry and brain injury. The more we know of epilepsy, the less we talk about its heredity

Regarding crime. The belief that the criminal represents a special type of humanity and needs to be dealt with in some extra-human way, belongs with the stagecoach and early locomotives. Those who know criminals refuse to generalize about them, and regard them as products of the social environment, of the tradition of the times, and of

many factors which are fundamentally environmental

BY STATING the above, the inheritance of certain types of mental diseases and certain types of feeble-mindedness is not denied, but until we have more specific grounds to act upon, it is idle to advance a radical cure. In the first place, even if these conditions were inheritable, sterilization would make almost no difference in the sum total of cases, since heredity is a matter of mathematics, involving the entire population, rather than the individuals directly concerned, namely the parents and potential parents. If there is heredity of mental diseases, the qualities inherited are recessive, and are present throughout the population, amongst the apparently normal as well as amongst the apparently sick

Furthermore, there is not the slightest chance in the present state of civilization that a sterilization law of any scope would be enforced. When the simple law prohibiting the sale of alcohol cannot be enforced in any adequate way, how can one expect that the community will be behind any mutilation of human beings for the sake of posterity. There are great churches whose belief is entirely opposed to such methods, and even aside from these churches, there are groups of individuals who reject the conclusions reached by the eugenists. I am frank to say, with all the good will in the world toward eugenics, that propaganda rather than research has apparently been the watchword of the eugenists. Preconceived opinions have ruled. Hypotheses have been established not in the spirit of science as a working basis for research, but in the spirit of propaganda, from a passionate desire to eradicate evils which need cautious approach and thorough research before impetuous action is taken

If I were a director of any of the great institutions, or if I were one of the rich individuals who contribute funds for eugenics, I would have as my motto, "Millions for research, not a penny for propaganda." What we need is to know the essential nature of dementia praecox and of manic depressive insanity, diseases which run in families, what we need is a pathology of those types of feeble-minded which apparently run in family groups. Such information will never come from a statistical analysis by biologists and field workers, it will come in the laboratories of the world, from men whose business it is to investigate disease

Sterilization

The California Experiment

FAR the largest experience of sterilization in practice is that of California. The state law, passed in 1909, is compulsory in form but it is voluntary in operation, the patient or the patient's relatives being asked before the operation is attempted. This very asking permission has proved an educational feature and from this and other publicity there have come to the state institutions requests to be sterilized from no inconsiderable number of patients, many entering the hospitals simply to have the operation performed.

In the nineteen years the law has been in operation 5,000 persons have been sterilized. Three-fifths of the total are men and four-fifths of the total (about 4,000) are insane. Most of the one thousand feeble-minded were in the Sonoma State Home of which Dr. F. O. Butler is medical superintendent.

Through the generosity of Mr. E. S. Gosney of Pasadena, a study of the California cases was initiated about two years ago. The research was done by Paul Popenoe who has published five of a series of studies of various aspects of the subject*. He finds that the practice of sterilization has shown a large increase since 1920. In no case have any ill effects resulted from the operation to either man or woman. About one in twelve of the insane in California institutions has been sterilized, the 1,000 feeble-minded sterilized do not represent one-twentieth of the total feeble-minded in the State.

In cases of dementia praecox and of pregnancy or fear-of-pregnancy psychosis patients have been so markedly benefited by sterilization that in these cases the operation was recognized as therapeutic rather than eugenic. In general however, though in not a few cases a therapeutic effect was observable, the patients sterilized were "those whose diseases there is reason to believe are most markedly inherited or inheritable." In other words the operation was in most cases a eugenic measure.

Some Results

A follow-up of feeble-minded patients paroled from Sonoma brings out the following:

- 1 Two-thirds have satisfied a reasonable definition of success in their attempt to live in non-institutional surroundings.

*Eugenic Sterilization in California

- 1 The Insane
- 2 The Feeble-minded
- 3 Success on Parole after Sterilization of Feeble-minded
- 4 Changes in Administration
- 5 Economic and Social status of Sterilized Insane.

- 2 Those who have not been delinquent before commitment have a slightly better chance to succeed on parole.
- 3 One in 12 of the girls on parole became sexually delinquent. (Nine in 12 of these girls had been sexually delinquent before sterilization.)
- 4 There was no instance of sexual delinquency among the boys on parole.
- 5 Among 2,000 feeble-minded and insane women sterilized, five or six were reported to consider their infertility as a possible asset, in freeing promiscuity from the fear of pregnancy.
- 6 No such instance was found among 3,000 men sterilized.
- 7 Sterilization favors the permanent stabilization of many paroled feeble-minded girls through marriage.
- 8 As practiced in California, parole of the feeble-minded after sterilization has not tended to increase the amount of promiscuity in the community, or favored the spread of venereal diseases. On the contrary, it has helped greatly to reduce both.
- 9 As practiced in California, sterilization is a valuable adjunct to a system of parole for the mentally defective.

Economic Studies

No study has yet been made of the sterilized insane discharged in care of their families. The insane are, however, made the basis of a study of social and economic condition. This study, which is merely suggestive as some details could only be obtained for a rather smaller number, tends to suggest, among other things, that:

- 1 There is a great preponderance of sterilizations among those classed as economically dependent.
- 2 The largest group among the sterilized is made up of unskilled laborers, the next largest of skilled laborers.
- 3 In economic status the sterilized insane average definitely lower than the total population of the state, and very much lower than a group of 525 fathers of superior children in the public schools.
- 4 Half of the sterilized males fall in classes that contributed virtually no superior children to L. M. Terman's study, half of the fathers of the superior children are in classes so high as to be scarcely represented at all among the sterilizations.
- 5 There is three or four times as much mental disease in the ancestry of the sterilized insane as there is among the ancestors of superior children, and in

(Continued on page 97)

Voluntary Sterilization

By WILFRID CHASE

OUR progressive agriculturists choose their seed with greatest care, but we as a people are largely sowing the field of humanity with weeds

Since society suffers so much from the existence of cacogenic persons, it has a right to assume a vastly greater control over them than it yet has done. As a means of preventing the reproduction of cacogenic persons, without waiting for society to insist upon its full right in the matter, the following plan is suggested —

The plan is to sterilize most of those men and women who would consent to it. Three methods of inducing cacogenic persons to consent to sterilization are as follows —

First By reasoning and kind persuasion. Many could be made to see that it was best for themselves and all others concerned.

Second By offering the alternative to many persons in prisons and other places of detention of remaining there or else submitting to sterilization and gaining their freedom. This alternative might well be offered to certain types who would be little or no menace if at liberty in a sterile state.

Third The offering of cash payments to cacogenic persons who would submit to sterilization. The payments might be sums of one-hundred or

two-hundred dollars or more. Probably great numbers would gladly avail themselves of what seemed to them an opportunity, especially might this be so if it were generally understood that sterilization does not necessarily cause the loss of all sexual powers. The expenditure would be an exceedingly wise one. Suppose the original Jukes couple had been paid one-million dollars and had remained childless. Would not the expenditure have been a very wise one indeed? If each state maintained a corps of surgeons to specialize in this work, would not vast benefit soon result?

It is obvious that the great majority of men and women who would submit to sterilization would be unfit for parenthood. But occasionally a worthy, fit person, because of dependency or in order to secure much-needed money for dependents or for some other reason, might wish to part with his reproductive powers. He should of course be deterred, and probably in most cases he would later be duly thankful. Before any person, no matter how low he seemed, were sterilized, permission should be granted by a board of at least three competent people who had the full history of the person clearly in mind. If proper care were exercised, few mistakes would be made.



Biology of Population

By JULIAN HUXLEY

Reprinted from the *N Y Times*

THE first World Conference on Population has just been held at Geneva. Among its members were to be found economists, medical men, politicians, social workers, lawyers, administrators, biologists, statisticians and geographers. It was, however, a significant fact that on the scientific side the conference owed its inception chiefly to a group of biologists, and that a considerable amount of its deliberations were devoted to discussions of a biological character.

The fact is symptomatic. At last biology, from being in part a handmaid of medicine, in part a descriptive compendium with a certain philosophical background, is coming into its own as a unified science, which in addition is the base and foundation of all the human sciences, and must be taken

into consideration in the solution of human problems. The twentieth century will be remembered as the period when biology, pure and applied first came into its own.

One or two of the main points that emerged clearly at the conference may be mentioned. Perhaps most vital is the notion of optimum population. The average man, especially in a young country like America, is apt to think that the only desirable state of affairs is an increasing population. The greater the number of inhabitants in his town, his state or his country, the better is he pleased. He is a booster for quantity. But he forgets that rapid population increase is a very exceptional event in world history. It is an affair of the last 150 years at most.

Practically all primitive nations have some method of keeping their population increase very low. In addition, war, disease and recurrent famine took a much greater toll in past times than now.

Optimum Population

Obviously, a high state of civilization not only permits but demands a greater population density, but the recent rapid increase has at last made the industrial nations ask whether they are not rapidly becoming overpopulated. We are beginning to realize that, from the purely economic standpoint, the maximum number of people which a country can somehow or other support (at any given stage of the world's agricultural and industrial progress) is very much greater than the optimum number, in other words, that there exists a point beyond which an increase of population means a decrease in efficiency and prosperity, not merely to each individual but also to the country as a whole.

It is quite obvious that if Great Britain possessed a population of 4,000,000 instead of 40,000,000, she would be worse off than she is today, but equally obvious that she would also be worse off if she possessed a population of 400,000,000.

It is probable that England is already overpopulated. An English acquaintance of mine was telling me recently of some inquiries he had been making concerning the introduction into his business of up-to-date labor-saving machinery for smelting, already in use in the United States, in which two men did comfortably what had otherwise to be done by the hard labor of thirty, stripped to the waist and sweating. He did not introduce it because wages for unskilled labor are so low in England that the interest on the capital cost would have been higher than the wages of twenty-eight men. And the wages of unskilled labor are low because the supply of it is excessive.

Rapidity of Increase

The next point to remember is the rapidity, biologically speaking, with which even a small ratio of increase exerts its effects. In the last century various European countries were doubling their population in thirty or forty years. But if the world were to double its population once in every century, then by A. D. 2927 there would be more than a trillion human beings on this planet. That is a mere thousand years hence, and man has every reason to anticipate some thousands of millions of years in which to work out his terrestrial destiny.

This has at once a bearing on immigration problems. From countries such as Japan and Italy we hear voices claiming as a right that under populated countries like the United States, or still more

Canada and Australia, shall throw their doors open wide instead of making ingress difficult or impossible. But if every barrier to immigration were removed, all that would happen would be that the vacant spaces would fill up in 50 or 100 years instead of in 200 or 300 years, and that the countries that sent the emigrants would merely have got rid of their surplus and remain as overcrowded as they were before.

After the speech of M. Albert Thomas, head of the International Labor Office at Geneva, to the conference I think all present realized that the United States or Australia has precisely the same right to demand that the population-exporting countries should take steps to lower their birth rate as each has to demand an open door from the population-importing nations. The matter thus becomes one of give and take, to which the biologist adds his word of caution, "Go slowly."

Falling Birthrates

In face of these facts it was interesting to see the reactions of the representatives of different countries to the universal phenomenon of the falling birth rate. In general, the English and Americans hailed it with a sigh of relief, while the French and Belgians and, to a certain extent, the Italians regarded it as a danger to be fought at all costs. The Germans, on the other hand, seemed divided on the question.

I noticed with some interest, not unmixed with surprise, that one very relevant fact was not even mentioned, namely, that the birth rate of France is almost identical with that of Great Britain. The difference between their rates of increase is almost wholly due to the fact that France has a higher death rate, especially among babies. If France wants a bigger population, improvement of sanitation and public health, with infant-welfare centres, will do far more than propaganda or prizes for large families.

Another point at which biology vitally touches our problem is that of the quality of population. Mr. Ladbetter gave an impressive demonstration, from patiently collected pedigrees, of the way in which mental and physical defect runs in families, and how a quite small measure of negative eugenics could enormously reduce the burden of defective humanity which the race has to carry on its shoulders, as well as the burden of suffering borne by the defectives themselves.

Here again, however, the contrast of views was striking. Several sociologists of the older school declared that the improvement of social conditions would by itself solve the problem and get rid of the defects. There is, on the other hand, every bio-

logical reason to suppose that this would merely accentuate the gulf between those able and those unable to profit by the improvement. The obvious effects to be produced by improving education and environment have prevented the average man from realizing the great differences in potentiality, due solely to the irrevocable fate of heredity that exists between one human being and another.

Differential Fertility

Then comes the question of differential fertility. We are passing through a phase, apparently unique in the world's history, during which, in almost all civilized nations, the different classes of the community are multiplying at different rates. The intellectual and professional classes are reproducing themselves least rapidly, and in each generation must be recruited from other groups, unskilled labor multiplies fastest, and the other groups show intermediate rates inversely proportional to their economic position. This differential fertility of different economic and social groups has arisen only during the last sixty or eighty years.

The question at once arises whether there is any hereditary difference in the average endowments, physical or mental, of the different classes, for if so, the inherited character of the population will be changing from generation to generation. Professor Carr-Saunders, after a detailed and cautious review of the situation, came to the conclusion that, while the situation was not nearly so bad as some eugenists had painted it, nevertheless it could not in any circumstances be a favorable one, and was in all probability altering the average innate qualities of the human race for the worse.

An extremely interesting state of affairs was revealed for post-war Stockholm by Dr. Edin. Here careful investigation has shown that pre-war conditions have been entirely reversed, so that now the higher economic classes have the highest rate of increase. This is probably to be in large part

ascribed to labor and Socialist propaganda in favor of family limitation.

The Roman Catholic Church

This brings us up against one of the burning practical questions tangled up with the general problem of population. The Roman Catholic Church officially pronounces contraception to be in itself immoral and sinful, for whatever end it be practiced, and this view is shared by many of other persuasions. The practice is under legal and political anathema in France, Belgium and Italy.

On the other hand, to a great number of other equally sincere persons, this same practice appears as a sacred Promethean gift, by which man, if he will, can control his destiny, and, in addition, there are many who, for practical reasons of hygiene or economics, would wish to encourage it.

Personally I regard this as one of the big politico-religious questions of the near future. It has been driven underground in the past, but is now coming more and more into the open.

I do not know how conditions are in the United States, but in England there is no doubt that fear of the loss of Catholic votes has made the Labor Party drop the subject like a hot brick. But they will not be allowed to let it lie.

These are but a few of the topics discussed at the conference. I have had no time to mention the physiological side, nor the interesting but obscure problems raised by Professor Pearl's theories concerning biological laws of population growth. The conference was certainly of great value in bringing together a large number of experts in different branches, and in airing differences in point of view. It will have been of still greater service if it reminds public opinion that by far the most urgent human problems demanding regulation in the next century are those arising directly out of the blind biological urge of reproduction—the problem of quantity and quality of population.



Dream

IT is earth keeps me whatever I have said
 Whatever I have sworn I shall go back to her
 She will claim every wanderer,
 She will bring every lover to her bed
 When I am tired I feel her hand on my breast
 Weigh like a silence where your hand has tossed
 Love me, or I am lost

Longing to sleep, I serve her passion best

God knows I am married to her whatever I said,
 And you are a dream, and I am dreaming all this
 I shall wake to her wild kiss,
 Her breasts of granite, her thighs of wind instead

—GEORGE H. DILLON in *The World Tomorrow*

STERILIZATION

Letters from Mothers Who Want to Know

Among the many letters that come to us asking for Birth Control, there is every now and then one that asks questions about sterilization. In most cases the ideas of the writers concerning the operation are hazy, and often they seem to be unaware that they could find the relief they seek by the less drastic method of Birth Control. But occasionally there are cases where it is perfectly clear that a woman should never again bear a child, either because another birth would mean death, or because the stock has been shown to be undesirable, and the mother is horrified at the idea of bearing more defective children. In these cases, if sterilization were easily accessible on a voluntary basis, there would be complete freedom from what one woman describes as "that terrible worry", and society would be entirely relieved of the possibility of more defectives to be carried by the community. Such letters as these show the need of properly guarded means of voluntary sterilization, in addition to the many laws that provide for compulsory sterilization of designated classes.

Hankering After Relief

South Carolina

I want to ask you a question. Will you please explain what kind of an operation it is to be sterilized and can any Doctor perform it? I am the mother of three children and will be the mother of the fourth in about two months. I have just got out of bed with a spell with my kidneys. I can hardly drag around. I have an awful bad time when I am pregnant, I swell awfully bad, I can hardly get on any shoes or stockings or anything else. I don't feel like it would be a sin to try to do something to keep from getting pregnant, if I live to get through this time. Do you think so? I will thank you for any advice you can give me.

In my present state of health I doubt very much if I would survive an operation, besides at my age, only 23, I do so hate to submit to one.

Surely there is help for me. Could you, will you, send me information concerning a means of Birth Control. Is there anything you could tell me, or send me, or that you could tell me to get? I would be only too glad to pay you for it if you would only help me.

If there is any help you can give, words will never be able to express my thankfulness.

Sterilization or Birth Control?

New York

I am 23 years old, I have been married 5 years, I am the mother of 3 living children, the oldest 4 years old, and have had 2 miscarriages since the birth of my last child. The two miscarriages have been harder on my health than the birth of two children would have been. I haven't as yet recovered from the last one. My doctor is one of the best surgeons here and has attended me in all my illness since childhood, says I must submit to an operation as a means of preventing pregnancy or else lose my life in a few short years. I am affected with anemia, my father having died with pernicious anemia, and I also have weak lungs. In fact there is no organ in my body that isn't weakened. I have asked my physician repeatedly for information concerning a means of preventing pregnancy but he absolutely refuses to help except to operate.

I would so love to live and raise the three babies I have

"Sentenced to be Sterilized"

California

Being that you understand these things I wish to ask your advice. I'm a woman of twenty-five years of age. Have been married for six months. On account of a broken leg I couldn't go through my first motherhood so I consulted a doctor. He took down all my ailments, which consists of the effects of scarlet fever. I have a stiff knee which was caused from operations and the disfiguring of the knee-cap. Then I have a spell which caused me to sleep more than normal, that is I have to. All this is caused from the scarlet fever, thirteen years ago. When I got through telling the doctor all this, he sentenced me to be sterilized. Being a poor girl and as I don't quite understand this sterilizing business, I went to another doctor who helped me out of the pregnancy. I also asked her what she thought of it and she had different ideas altogether. I've tried to make this as short as possible and if you would be kind enough to answer this, I would appreciate it ever so much.

Information Wanted

Illinois

I want to ask you a question about sterilization I am not well and have too little boys, so we do not want any more How can a woman or man be sterilized?

If a woman is sterilized, does it deprive her of sexual desire or expression? What is the best way to be sterilized? Does it hurt a woman's health?

Please answer soon as I want to know right away

Husband Favors Sterilization

Ohio

My husband is very much for the operation of sterilization for men as he thinks I have gone through with enough and he is willing to go through this minor operation himself We have two boys and one girl and he is sure we can't keep any more the way we want to bring the children up, but I want to make sure just what this operation that is only an office call will be like I don't want him to give up what all men enjoy, their manhood and I can't just make myself think what it would be like

I am lacking in the really satisfied state, since our last two children were born in fact I almost dread to think of being interested, but I love my husband dearly and must do this to keep his love

Is a Surgeon Restricted?

Oklahoma

I wrote the Superintendent of the State Insane Asylum of Oklahoma stating that I have an uncle and a cousin, both on my fathers side, that are insane of which he has a record of since they are both in that institution and are both hopelessly incurable He states in his letter that there is no danger and no need of my being alarmed, but I don't care to run any more risk and aim to have the operation performed if I have to do it myself

I want to know if you can advise me where I can get it done, or if you can tell me the necessary steps to take to justify a surgeon to perform the operation, or if you have the authority to give them permission, thereby freeing them from legal proceedings If it is necessary that I make affidavit to this I will do so upon request

A Case for Birth Control

Virginia

I have no disease but I have other troubles that are most as bad and would like to know how I might be made sterile I have three little children, a paralytic father-in-law and an invalid mother-in-law and I do all my work including the sewing for us and I feel that another little baby would be disastrous I am sure you will agree with me in saying I need this information

What Kind of Operation?

New York

Will you please enlighten me on sterilization? Is it an easier operation for the husband or wife, and can you tell me the name of some hospital around my home where they will perform the operation?

I spoke to my physician, but he isn't in favor of Birth Control, and so would not tell me, so I told him I stood for it first, last and all the time and if he wouldn't tell me I would get the information elsewhere

Will you tell me as a member of The American Birth Control League, is the operation of a serious nature?

"Free of the Terrible Worry"

Indiana

My last pregnancy nearly killed me I went to a Chicago hospital for the delivery and had twilight sleep, I felt I could not get through any other way—the doctor said my organs refused to work I guess there was no labor at all—the baby was very frail but with the good care at the hospital, managed to live six weeks Ten days after delivery I had to be operated on for appendicitis and had my tubes tied—so now I am free of that terrible worry, but it has taken me almost a year to recover from that ordeal

Your work is splendid and I would do anything to help the cause, but that baby and operation cost \$300, not to mention hospital bills, railroad fare, etc, so you can understand that I am unable just now to help financially

Last Sunday I was talking to a young mother who had a new baby twenty days old—the next one fourteen months, the oldest two years'

Is it a Serious Operation?

South Dakota

We would like to know more about sterilization—whether it is a serious operation, whether expensive, by whom it may be performed Would you advise it?

Which is it the most serious for, the husband or wife?

Birth Control Preferable Here

Ohio

I don't quite understand in what way a man or woman could be sterilized So I'm asking your assistance to enlighten me on this subject

I have two children and I would very much appreciate your advice For I cannot afford to bring any more children into the world not wanted

Birth Control

By ELLA K. DEARBORN

IT IS an injustice to both parents and child to bring an unwelcome baby into the world. Most people find life hard enough at best, without being an unwelcome child in any home, and more so in a poverty-stricken one.

Some have feared that if Birth Control knowledge were given to the world, there would be no more babies, and unbridled lust become rampant. Is fear the chief ingredient of virtue and morality? If so, we may as well expunge the two words from our dictionaries, and write **FEAR** in large letters.

People *want* homes and babies, but want them under proper conditions—the best conditions that our civilization makes possible, and restriction of propagation of the unfit is the first step in making a place for those of better birth.

The 60 per cent of our population who are of 13-year-old intellects breed proportionately faster than the normal 40 per cent, because in them lust and nature take their course, without the restrictions of modern intelligence. From them come the vast armies of criminal and insane. Many of the 60 per cent do not know enough to take proper care of themselves, much less to care for their children, even when they have enough money, if intelligently expended, for a comfortable living, and the lack of money easily pushes them into the criminal class.

OUR FIRST STEP in racial uplift is *teaching Birth Control, thus limiting the unfit*.

The second is eugenics—the art of breeding up, teaching those fitted to bear children how to have the best babies possible, teaching them the advantages and disadvantages of heredity and of proper care and training of the child in the right kind of home. Lack of judicious home training is a large factor in the production of criminals.

Who have a right to bear children? Any couple who want them, if they are healthy, intelligent and financially able to properly care for them.

Very few couples want children the first few years of their married life, they want to become adjusted to each other's peculiarities of temperament, and found a home, and in time they will welcome their children, if not, they should not have any. It would be rank injustice to all involved if they did.

Home is the best place on earth! If a couple defer marriage till late in life, they become used to drifting about alone, become selfish, conceited, and unyielding. Far better to marry while young, while adaptations are easier, they can nest build, and

honey moon till the good pals become wise enough for parentage. This honey moon home would be the salvation of many of our young people, physically, mentally, morally, and financially.

IT HAS BEEN said that "the use of contraceptives is sordid and repugnant." Possibly true, but honorably aesthetic when compared with overbreeding, ill-health and poverty.

Someone has said "In the eyes of God birth prevention must be as heinous a crime as wilful murder." Follow the thought! Every spermatozoid must be supplied with an ovum, which is impossible. Furthermore, the greatest criminals must be those who lead continent lives, yet they pride themselves on their virtue.

The same writer says "Is not the life of an unborn child as sacred as that of an adult?" A student of history will search long for any evidence of the sacredness of life, either remote or modern. Ancient history is page after page of war, theft and rape, men, women, and children killed, virgins taken captive, and trophies carted away. Modern history is the same. Our daily papers show us that human life is the cheapest thing on the market. Babies are given away or deserted, but dogs, chickens, and pigs are sold, and a pedigree goes with them.

NO, LIFE isn't sacred, never has been, never will be till Birth Control has taught the world that ideal motherhood means welcome babies. Then and only then, are mother and babe sacred, and home a sanctuary. Forced motherhood and unwelcome children are pitiful and heartbreaking.

Forget medieval superstitions—go about your city with open eyes and mind—go to the police court for three days—go to the baby homes—to the crowded tenement districts—to the factories, then answer the question: Is Birth Control a Crime? If you can see straight and your brain is functioning properly, you will say 'Birth Control is an imperative need in world progress and utilitarian civilization.' Scrub stock has been replaced by thorobreds in the barn, now let us do some selective breeding for the human family.

"He who is begotten in true love, and comes welcomed into life, is of immaculate conception."

Sterilize those not fitted to propagate, and teach Birth Control, which leads to sacred motherhood and welcome children, and America shall lead the world.

Sterilization

A S Y M P O S I U M

TO ASCERTAIN the opinion of a selected list of men whose work entitles them to rank as authorities, we sent out a letter to which these are some of the replies

A FAMOUS PHYSICIAN

Your letter of Jan 3rd last is to hand. If I understand you right, your question may be restated somewhat as follows—Is it advisable to sterilize persons with grave endocrine defects that transmission of such defects to the offspring may be avoided? To this I should say, if the endocrine defects are congenital, Yes, certainly

Many criminals and congenital defectives, however, have only secondary disorders or none at all of the endocrine class, and your question is only a part of the general question of sterilization of the unfit

As to the general question I should also say, Yes, certainly! But the Eugenists and Psychiatrists will never get anywhere till they do far more than this. The methods of the dog fancier and cattle breeder will have to be applied ruthlessly to human breeding, and a class of professional mothers and fathers will have to be medically selected and governmentally authorized before any definite racial improvement ensues. Other people might be allowed to marry freely, and enjoy all the physical and spiritual satisfaction of love, but should not be permitted to produce children

Among the conventional seven-eighths of the population, whose prejudices are baked hard, such a plan as this would raise a long-drawn and deafening howl, and—in short, I might conclude with Sir Thomas More that "There are many things in Utopia which I rather hope than expect to see adopted in mine own country"

WILLIAM N BERKELEY, M D

A UNIVERSITY PRESIDENT

In many ways your letter of the 21st, concerning Sterilization Legislation, is difficult to answer. This is not the case because of lack of interest in the matter on my part, but because it is difficult to generalize. In general, I believe, however, that we can afford to progress along the lines of voluntary sterilization as far as public support will take us. Criminals should most decidedly be included under this type of legislation. At the same time, I believe that we should proceed with great caution in compulsory sterilization until economic pressure becomes sufficient to drive public opinion wholesale in that direction. I do not see that anyone can possibly determine what was behind state decisions against earlier sterilization laws. I

imagine that interference with personal liberty loomed much larger as an unfavorable argument than did either the activity of the Catholic church or fear of abuse. As a general thing, I feel that the American people at present need merely the facts of biological and sociological findings rather than propaganda for any type of legislation. I do not believe that any of us can prevent the appearance of an economic crisis in the not very distant future but I feel that we should bend our energies more toward spreading the truth than attempting to influence what must be of necessity imperfectly conceived legislation

C C LITTLE

WRITER, LECTURER, RADICAL

Theoretically I believe in sterilization of the subnormal. Practically I am afraid—perhaps increasingly afraid—of the ghastly mistakes that might be made by those to whom we would entrust the power. Not only would the prejudice against radicals to which you refer enter into the picture but also all sorts of other prejudices of a radical sort. I have actually known cases in which science or alleged science has been a cloak for a very refined type of brutality. When Powers Hapgood was suddenly sent by the police of Boston to a psychopathic ward he got out promptly because he had friends. I have known at least one other case where a radical prisoner was not so lucky

Now before I become a practical advocate of sterilization I will have to be convinced that the social good it does will outweigh the inevitable risks. Those risks can be greatly reduced but not removed altogether under any law. Have you a model law in mind? Have you any substantial body of experience to guide you? What I fear in the present stage of our development with regard to any law is that either it will be a dead letter because of the general reluctance to give such power over human beings or that if that reluctance disappears and our present class and racial prejudice persist some very terrible things will be done under the sanction of this law in the name of science. You see I am definitely one of those whose doubts you will have to remove

NORMAN THOMAS

AN AUTHORITY ON PLANT BREEDING

Nov 20, 1927

So far as I can discover from my contacts and from Dr Laughlin's summary published by The American Eugenic Society, I am convinced that sterilization legislation is the only effective method of dealing with certain elements in our population by way of keeping them down numerically

A S Y M P O S I U M

Of course I do not believe in it except as a eugenic measure. Some states use it in part as punishment. I am opposed to this. For feeble-minded and insane, whether at large or in institutions liable to turn them out into the population again, I believe in compulsory sterilization. For certain types of criminals, I think this should also be used—that is *chronic criminals*. As to some of the other classes included by the laws of some states—such as rapists, certain types of syphilitics and other degenerates, I am not qualified to judge whether it is desirable to include them. The Iowa law with its amendments is a very strict one. But no such laws should be put on the statute books of any state unless they are ready to use them. It is deadening to pass such laws and let them lie unused, as some states seem to have done.

ORLAND E WHITE

A PROFESSOR OF SOCIOLOGY

You ask my opinion of sterilization legislation. I will say that I do not consider that I am an authority on the subject but that people in whom I have confidence have been so favorably impressed that I am thoroughly for such legislation.

E A Ross

A GREAT WRITER ON SEX PSYCHOLOGY

As regards sterilization, I have nothing of importance to add to what I said seventeen years ago in Vol. VI of my *Studies*, pp. 611-616.* I still think it a proceeding which is often desirable. But I am not in favor of making it *compulsory* at present. It ought not to be inflicted as a sort of punishment, but accepted freely by the subject, or those responsible. When this is done there is no need for any special legislation, and (in opposition to Dr. Laughlin) I am against any such special legislation. When adopted as a contraceptive by men who, for one reason or another, do not desire more children and wish to make intercourse absolutely safe, it is extremely satisfactory. I know of various professional men in the U.S.A. who have adopted this method, and they are very pleased with the results, as are their wives.

HAVELOCK ELLIS

A QUOTATION FROM ELLIS

It (castration) was first advocated merely as a punishment for criminals, and especially sexual offenders, by Hammond, Everts, Lydston and others. From this point of view, however, it seems to be unsatisfactory and perhaps illegitimate. In many cases castration is no punishment at all, and indeed a positive benefit. In other cases, when inflicted against the subject's will, it may produce

*It is under the heading of Castration, but of course, actual Castration is neither necessary nor desirable.

very disturbing mental effects, leading in already degenerate or unbalanced persons to insanity, criminality, and anti-social tendencies generally, much more dangerous than the original state. Eugenic considerations, which were later brought forward, constitute a much sounder argument for castration, in this case the castration is carried out, by no means in order to inflict a barbarous and degrading punishment, but, with the subject's consent, in order to protect the community from the risk of useless or mischievous members.

The fact that castration can no longer be properly considered a punishment, is shown by the possibility of deliberately seeking the operation simply for the sake of convenience, as a preferable and most effective substitute for the adoption of preventive methods in sexual intercourse. Equitable, practical, and scientific methods of castration have been advocated, not involving the removal of the sexual glands or organs, and not as a punishment, but simply for the sake of protecting the community and the race from the burden of probably unproductive and possibly dangerous members.

It is scarcely possible, it seems to me, to view castration as a method of negative eugenics with great enthusiasm. The recklessness, moreover, with which it is sometimes proposed to apply it by law—owing no doubt to the fact that it is not so obviously repulsive as the less radical procedure of abortion—ought to render us very cautious. We must, too, dismiss the idea of castration as a punishment, as such it is not merely barbarous but degrading and is unlikely to have a beneficial effect. As a method of negative eugenics it should never be carried out except with the subject's consent. The fact that in some cases it might be necessary to enforce seclusion in the absence of castration would doubtless be a fact exerting influence in favor of such consent, but the consent is essential if the subject of the operation is to be safeguarded from degradation. A man who has been degraded and embittered by an enforced castration might not be dangerous to posterity, but might very easily become a dangerous member of the society in which he actually lived. With due precautions and safeguards, castration may doubtless play a certain part in the elevation and improvement of the race.

HEAD OF SCHOOL FOR RETARDED CHILDREN

WHILE I agree heartily that the feeble-minded—those of them, that is, who are not undersexed and therefore present no problem—should not have children, I very much fear any general policy of forcible sterilization. I do not think our institution officials are as a class of a high enough type to be given this blanket power to sterilize. Incidentally I am amazed at the argument for sterilization based upon the assumption that feeble-mind-

A S Y M P O S I U M

edness and insanity are in most cases heredity taints. That they are sometimes hereditary I do not doubt. But in my experience of many years with handicapped children I have found more whose condition was not hereditary, and I have found, in children whose mental retardation is due to prenatal shock, to hemorrhage at birth or shortly after or to other injuries caused by the forceps, to such diseases as sleeping sickness or infantile paralysis, much the same traits as in those whose condition was inherited.

Nor do I believe that sterilization will ever fully solve the problem of segregation, among many other reasons because one great object of segregation is to relieve the normal from the lifelong strain of providing for themselves and their children and at the same time acting as attendant, day and night, of one who is a perpetual child.

BERNARD CADWALLADER

Three contributions to the Symposium are anonymous. The first contributor did not wish to involve his organizations. The other two did not feel well enough informed to give opinions over their own names.

A CRIMINOLOGIST

I regret that I know too little about biology and particularly about heredity, to venture on a contribution to your symposium. I believe that we are on our way to a knowledge of these matters which will soon make it seem wise and desirable to resort to methods of sterilization, but it does not seem to me that the present state of our knowledge is such as to justify the adoption of such a policy at the present time.

A PSYCHIATRIST

There are two sides to the question of sterilization. I believe that all who desire to be sterilized should have the right—that there should be no law which prohibits or which can be interpreted to prohibit sterilization. As for compulsory sterilization of the unfit such a policy should not be entered on widely until we know more than we do about the inheritance of insanity and feeble-mindedness. We already know that a large percentage of insanity is not inheritable. The only justification of wholesale sterilization of this class is that they are in no condition to furnish their children support or a good home environment and that the strain of responsibility may increase their own abnormality.

In the case of the feeble-minded also, this argument of inability to raise a family properly is far more telling than the argument of heredity. We need much more thoroughgoing research than has been done, before we shall be able to say what proportion of feeble-mindedness is due to

inheritance and what to environment, to accidents at birth and to many other causes.

Certain types of the feeble-minded such as Mongolians are undersexed and offer no serious problem. Of the rest, those who are as highly sexed as normal persons and not, like the normal, gifted with judgment and self-restraint, it may be said that while the danger of rape followed by childbirth is bad, so too is the advantage that normal men sometimes take of a feeble-minded woman known to be sterilized. Such a woman has been known to become a local prostitute and carrier of venereal disease. There is also danger that the higher types of feeble-minded men and women, realizing that pregnancy will not follow their acts, will become promiscuous and a menace to young people.

While I agree that children should be born only to those who can furnish them both a good inheritance and a good home, I feel that legislation on this subject has been too headlong. Certainly the crop of wholesale compulsory sterilization laws which were passed at first were not wise. It is a notable fact that among those of the general public who most vigorously supported these laws were Fundamentalists, Kukluxers, supporters of Blue Laws and many, if not most of them, were Sadists with a castration complex. The administration of these laws was often put in the hands of officials of a low type. Perhaps the era of that type of law is passing, at any rate it must pass before it will be possible to support sterilization legislation with any enthusiasm. The law of the future should not be compulsory, it should be based on wide research and it should be administered by experts and not by local medical men and police.

A RADICAL

I am not familiar enough with the arguments for and against sterilization to be willing to be quoted publicly by name. In general I am opposed to the exercise of such a power by the State. It is subject to grave abuse and the errors of judgment inherent in our deficient knowledge of heredity and of disease. I am totally opposed to its application to so-called criminals. Restricted to the feeble-minded of low grades and to the hopelessly insane, and under a carefully protected system of administration, it has obvious social merit. But even in such cases, adequate institutional care and segregation would accomplish the same results. For those who could live without institutional care, and yet who are hopelessly diseased in hereditary mental disorders, it is less an evil than institutions. But even so, voluntary rather than compulsory treatment should be used wherever possible.

I have not heard of the use of sterilization laws against radicals, but if they are generally applied to "criminals" they run the danger of it.

Book Reviews

WAR AND BIRTH CONTROL

AS MR BAKELESS states in his preface, this book¹ is an effort to show that "forces essentially identical with those that caused the last World War are actively at work today, preparing the way for a new one." The most important of these forces, he insists over and over again, is the demand for more food, more markets and more raw materials, resulting from the growth of populations. Population pressure was the fundamental cause of the last World War, as of all modern wars, and it is population pressure that will bring about the next World War.

This being the case, why do we not prevent population pressure by means of Birth Control? Because, declares Mr Bakeless, this is not practicable. "The limitation of population is not a game at which one nation can safely play alone. Either all must limit, or none may safely do so."

If one nation limits its population it promptly falls behind its neighbor, whose luxuriant numbers tend to flow across the border and swamp the less populous race. And that all states should consent to limit their populations is, in his opinion, an "unimaginable condition", for "what umpire would assign appropriate numbers to each or induce them to accept the figures assigned? What political party could retain power or what cabinet could hold office for a moment if it ventured to embark upon a policy so thoroughly and so rashly intelligent?"

Now it would undoubtedly be best if all nations would limit their population at once, but if Mr Bakeless would turn from theory to fact, he would see that population limitation by individual nations has not proved so disastrous, after all. Has Holland, where Birth Control has been in general practice for some fifty years, been swamped by its neighbors? Has France, where the birth-rate has long been restricted, fallen behind Italy with her "illimitable spawning"? And in both countries the population has been limited without the assignment of figures by any umpire or the upsetting of any cabinets. In fact, it has been enough that contraceptive information should be accessible. The people have voluntarily regulated the birth-rate in accordance with economic conditions, so that population pressure has been avoided.

But unfortunately Mr Bakeless draws his conclusions from theory rather than from evidence. The prevention of population pressure being theoretically impracticable, even unimaginable, and population pressure leading inevitably to the various rivalries that cause war, the brightest hope he gives us is that the next and greatest

World War may be some time in arriving—perhaps twenty years.

Any one glancing through the fifty-three recent magazine articles, committee reports and excerpts from books on the cause and cure of war which are collected in this handbook² will realize that, according to the consensus of modern opinion, the chief cause of war has been and will be economic rivalries between nations. But only he who reads the symposium pretty carefully will gather that these economic rivalries are aggravated by population pressure. And only an actual student of the handbook will observe that one of its fifty-three authors throws out, in the form of a question, the suggestion that inasmuch as population pressure aggravates economic rivalries, the intelligent restriction of population might possibly mitigate them. All honor to Professor I W Howerth of the University of California.

ELEANOR DWIGHT JONES

"THE MEDICAL FOLLIES," and "THE NEW MEDICAL FOLLIES" by Morris Fishbein, M D, Bon & Liveright New York \$2 00 each

THE first book is said by its author to be "an analysis of the foibles of some healing cults, including Osteopathy, Homeopathy, Chiropractic and the Electronic Reactions of Abrams, with essays on the Antivivisectionists, on Health Legislation, Physical Culture, Birth Control and Rejuvenation."

The second covers the cult of beauty, reduction, rejuvenation, dietary "fads", eclecticism, electric therapy and psychoanalysis. It discusses, most inadequately, ethics—medical and otherwise—and the physician of the future.

There never was more need for a thorough discussion of quackery, fakirs and cults than at the present time. Individuals using the title of doctor, after a few months training in some cult, are a menace to society. Dr Fishbein presents his matter in his usual clear and interesting style. It is, therefore, a very readable book. He is however, frequently carried away by a clever and facile pen. Nor is he always happy in his choice of subjects, lumping together with pure follies movements which have set stirring in medicine new and healthy currents, as well as movements of real and permanent medical value.

Our special interest is in the chapter on Birth Control. Eight pages are devoted to this subject. Nothing new is presented and the principal criticism is that there is not at present a hundred per cent effective method. Dr Fishbein says "The fact is that none of the students of the problem not even the physicians have ever perfected any

¹ The Origin of the Next War, by John Bakeless Viking Press N Y

² War—Cause and Cure. Compiled by Julia E Johnsen, for the Handbook Series. Published by the H W Wilson Co N Y

method of Birth Control which is physiologically, psychologically and biologically sound in both principle and practice" In a new form he is only saying, what physicians have often said before, that "medical science is not yet satisfied with the achievements of investigators in this field"

Is there in the realms of medicine or surgery a hundred per cent method for anything? Vaccines, Hormones, Electricity, Light, Heat, Drugs, operative procedures or whatever? Is there a hundred per cent cure for disease? Take the outstanding causes of death from disease Tuberculosis, Cancer, Cardio-renal, Diabetes, etc Who has a hundred per cent cure? Why then discredit the application of reason, intelligence and control to the procreative process, because we have not yet developed a technique of perfection?

Besides the Research Department of the American Birth Control League, other investigators are at work trying to perfect a technique In the article in the *Journal of Obstetrics and Gynecology* on which this chapter was based, the author in the summary states that "The Committee on Maternal Health, as part of a study of fertility and sterility has carried on several steps of the investigation of contraception and has under way clinical, chemical and laboratory studies These in due time with proper supervision and adequate professional collaboration and sufficient funds should secure the facts The falling birth rate, the popularity of smaller families, the testimony of thousands where lives have been made more worth-while by the application of discretion and control to the procreative process indicate that methods in use at present do have some value"

Dr Fishbein, looking at the crime, degeneracy, poverty, incompetence and other sores of society and not seeing in Birth Control an immediate and perfect relief, loses sight of two important things, first, increasing interest in the problem which is bound to culminate in more accurate and intelligent action, and second, the individual aspects of the matter Regardless of other circumstances every woman has the right to be the mistress of her own body and to decide her own maternal destiny Women are increasingly realizing that motherhood is such a beautiful and noble undertaking that it never should be left to accident, blind chance, or the caprice of nature, but should be undertaken voluntarily and intelligently, with due regard to the mother's health, the health of the children already born, the economic outlook and the prospects of life in general In other words motherhood should always be voluntary and intelligent, rather than accidental and indiscriminate, regardless of circumstances or consequences This is the attitude of the majority of intelligent women everywhere and is free from "folly and foible"

After hinting at several methods Dr Fishbein mentions x-rays and the immunizing serum of Guyer, Dittler, Metchnikoff and others Of these he says "Obviously if science is able to develop some such method, which

will permit the production of sterility in individuals of the lower stratum with their own consent, which will be renewable after a definite period and which will not depend for its effectiveness on any mental or physical action of the persons concerned at the time of sexual activity, a feasible method of Birth Control will have been found"

With the amount of scientific investigation going on in this line at present, it is as reasonable to expect that a solution of this problem will be found, as to expect the solution of other medical problems

JAMES F COOPER, M D

Books Received

LA GARCONNE, by Victor Margueritte, Ernest Flammarion, Editeur, Paris, France 12 Francs

THE TALE OF GENJI, by Lady Murasaki, Houghton Mifflin Co, Boston \$3 50

THE SACRED TREE, by Lady Murasaki, Houghton Mifflin Co, Boston \$3 50

THE WREATH OF CLOUD, by Lady Murasaki, Houghton Mifflin Co, Boston \$3 50

THE CHILD AND THE HOME, by B Liber, Vanguard Press, New York \$ 50

THE CHILD IS THE FUTURE, 20th Annual Report of the Children's Bureau of Philadelphia

FREEDOM AND LIMITATION OF SEXUAL DESIRE, by Dr Tokijiro Kaji, Tokio, Japan

SCHOOL OR WORK IN INDIANA, by Chas E Gibbons & Harvey N Tuttle, National Child Labor Committee New York

THE BIRTH CONTROL MOVEMENT, by Robt Latou Dickinson, M D, Committee on Maternal Health New York

BIRTH CONTROL AS IT CONFRONTS THE MEDICAL PROFESSION IN U S, by Adolphus Knopf, M D, Reprint from Clinical Medicine & Surgery

MEDICAL ASPECTS OF CONTRACEPTION, Martin Hopkinson & Co, Ltd London 10s 6d

GETTING AND SPENDING AT THE PROFESSIONAL STANDARD OF LIVING, by Jessica B Peixotto, The Macmillan Company New York

MAN'S QUEST FOR SOCIAL GUIDANCE, by H W Odum, Henry Holt & Company New York

PROCEEDINGS OF NATIONAL CONFERENCE OF SOCIAL WORK, held in 1927 University of Chicago Press Chicago

LAY THOUGHTS OF A DEAN, by W R Inge, G P Putnam's Sons New York \$2 50

PERSONAL HYGIENE FOR WOMEN, by Clelia D Mosher, Stanford University Press California \$1 50

WHAT I BELIEVE, by Wm J Robinson, M D, Eugenics Publishing Co New York \$2 00

News Notes

UNITED STATES

A BIRTH RATE which decreased in the Registration Area from 21.1 per 1,000 in 1925 to 20.1 in 1926 is announced in the recent report of the Surgeon General of the United States Public Health Service, who adds that "this trend has been noted since 1915." Side by side with this the Association of Life Insurance Presidents, representing the fifty-two leading companies of America, reports a steadily decreasing death rate, which was at its lowest for the year just ended.

The arrival of Mrs. Margaret Sanger from Europe is announced for March 13th.

The *Christian Leader*, a journal published by the Universalist Church, sends us the text of the resolution on Birth Control passed by the General Convention of the church in October. Resolution IX of the convention reads:

Whereas, one of the most important functions of the church is to aid in the establishment of the home as a monogamic institution, and

Whereas, under the conditions of industrial civilization the home is being increasingly threatened both by divorce due to marital incompatibility, and to the growing demands of woman for the right to a self-determined life, and

Whereas, the control of conception is an important factor both in marital harmony and in woman's control of her own destiny,

Therefore be it resolved That in the interests both of the home as a basic social institution, and of the sanctity of individual personality in marriage, this Convention hereby instructs its Board of Trustees to appoint a committee of not less than seven men and women who shall in co-operation with similar committees from other churches investigate the bearing of the practice of Birth Control upon the institution of marriage, and the welfare of the race, and to make a report for the guidance of this Convention at its next session.

New York

THE principal events in New York in recent weeks have been the introduction of the Birth Control bill in the Legislature, the work done on its behalf by Dr. Cooper and Mrs. Constance Heck, and the hearing on it on February 28. An account of the Hearing will be given in our April number.

The Birth Control Bill is now before the legislature, having been introduced by Judge William

C. Olsen of Bronxville on February 7th. The bill which is the same as that introduced last year reads as follows:

"Physician's instruments. An article or instrument, used or applied by physicians lawfully practicing, or by their direction or prescription, for the contraceptive treatment of married persons or for the cure or prevention of disease, is not an article of indecent or immoral nature or use, within this article. The supplying of such article to such physicians or by their direction or prescription, is not an offense under this article."

Organization of the state is proceeding rapidly. Mrs. Constance Heck, who is organizing in the northern section, reports three new committees. Of the committee at Saratoga Springs Mrs. John C. Ames is Chairman, other members are Miss Kathryn Starbuck, a lawyer and instructor at Skidmore College, Mrs. Caroline Slade, Head of the Children's Court, Mrs. J. S. G. Bolton, Instructor in Sociology at Skidmore College and Mrs. T. E. Fundston, Leader of the League of Women Voters.

The Rev. Ernest Caldicot is Chairman at Schenectady and the committee is made up of Mrs. C. W. Mitchell, a member of the Professional and Business Women's Club, Walter F. Wellman, a lawyer, Mrs. Van Ness Phillip, Victor Starzenski and Mrs. Elsa McGie, who is Probation Officer of the Children's Court.

At Ballston Spa a committee is headed by Miss Annette Remington, Instructor at the Ballston High School. The other members are Mrs. Ralph B. Post, the wife of a physician, Mrs. John Knickerbocker, Mrs. Harry Dorman and Miss Imogene Granger, a social welfare worker.

On February 9th Mrs. Richard Billings, member of the Board of Directors of the American Birth Control League, spoke before the Woman's Alliance of All Souls Episcopal Church, New York City. Following her address the Woman's Alliance endorsed the New York Bill. This makes the forty-first organization, social or religious, which has given its endorsement.

Other speakers in New York City in recent weeks are Mrs. Walter Timme, member of the Board of Directors of the American Birth Control League who addressed the United Order of True Sisters (Union Lodge 6) on February 15 and Dr. James F. Cooper, Medical Director of Clinical Research Department of the League, who on the same date addressed the Men's Club of the Broadway Tabernacle.

On February 16th, "Her Unborn Child", a misleading play in which abortion is called "Birth Control" again invited the League to state its case and make clear the distinction, between the acts. The invitation was accepted by Mrs F Robertson Jones and Mrs Huse who spoke at performances on 14th Street and in the Bronx

Pennsylvania

THE Young Democracy, a Philadelphia organization, held an open meeting at the South Broad St Theatre on Sunday afternoon, January 22nd, this meeting was on Birth Control, with Doctor Cooper as speaker. It had been given much publicity and was well attended. The Broad Street Theatre, where the meeting was held, has a capacity of 2,000. It was crowded and many were turned away. Miss Mary Winsor, member of the National Council of the American Birth Control League and an officer of the Pennsylvania League, presided. At Wilkebarre Mrs P B P Huse, Executive Secretary of the American Birth Control League spoke to a group of interested women at the home of Mrs Loveland. Another group heard Mrs F Robertson Jones on February 8th at tea at the home of Mrs Edward Biddle at Ardmore. The same evening Mrs Jones spoke before the Woman's Club at Reading. An enthusiastic audience of over three hundred listened to her and to James Maurer, who presented the labor aspect of the subject.

"As Pennsylvania has its important primary election for candidates for the legislature on April 28th", writes Dr Mudd, its former president, "the Federation has been keeping an ear to the ground and is especially interested in the return of some of the representatives who were favorable to Birth Control."

New Hampshire

ON February 16, Mrs F Robertson Jones addressed an audience of 400 at a meeting held under the auspices of the Dartmouth College Round Table.

California

THE Los Angeles Mother's Clinic Association reports a total of 1,500 cases from April 1925 to December 1927. There are five attending physicians, all women. The Friday Morning Club, for many years one of the most influential groups of women in Los Angeles, which has long been interested in Birth Control has held a debate on Birth Control. Hubert C Morrow of the State Medical Association took the affirmative and the Rev Joseph A Sullivan, a Catholic priest, the negative

The club plans to have further discussion on the subject later in the winter.

Dr H G Brainerd is president of the Los Angeles Clinic. Dr Aaron J Rosanoff, vice-president and Dr J Perceval Gerson, secretary-treasurer. Other members of the executive committee are Mrs Edith C Bjorkman, Mrs Kemper Campbell, Mrs Frances Noel and Dr Etta Gray, Mrs J W Lowe, R N is superintendent and Mrs C C Smith, office secretary.

Following his arrest at Petaluma other charges of distributing Birth Control literature for sale were brought against Carl Rave in Santa Rosa, Richmond and San Francisco. In all but San Francisco they were dismissed but in the latter city he was sentenced late in December by Police Judge O'Brien to a fine for violation of a city ordinance. The case was appealed by the Civil Liberties Union, however, and the decision reversed by Superior Judge Louderback.

The steady and encouraging decline in birth rates in California continues, for San Francisco births were 8,236 as against 8,421 the year before. The infant death rate decreased slightly as compared with 1926.

Delaware

BY invitation of Rabbi Mischkin the Community Open Forum of the Congregation Beth Emeth of Wilmington heard Dr James Cooper on February 16th.

New Jersey

AT Camden, Mrs P B P Huse spoke before the Camden County Women's Republican Club on January 16th. The next day Mrs Huse addressed the Princeton Reading Club.

Connecticut

THE Get Together Club, Congregation Beth Israel of Hartford, heard Dr James F Cooper on February 20th in a debate with Rev J F X Murphy of the department of history, Holy Cross College, Worcester, Mass as his opponent. Dr Lewis A Sexton, Superintendent of Hartford Hospital, presided. The attendance—men only—was unusually large, and great interest was shown.

Ohio

THE speaker at a recent meeting of the Erie County League of Women voters (Sandusky) was Dr Gudrun Friis-Holm. Dr Friis-Holm, who has been in contact with the clinical work of the American Birth Control League took Peace as her subject and she urged Birth Control as the means of removing the greatest cause of war.

(For English News, see page 98)

Correspondence

GRATEFUL TO MARGARET SANGER

Switzerland

Editor, BIRTH CONTROL REVIEW

I wish to thank you most heartily for your book "Happiness in Marriage", which you so kindly have sent to me, and also for your words of friendship written on the first page. I have read your book in the meantime and I am amazed how thoroughly you have grasped the various problems pertaining to the sex questions. What I have collected, in small bits of experience, in a long life of strenuous practice as a physician and advisor, you bring in concentrated form, and in such completeness, that I wished I had been able to read your book 40 years ago, before I came in contact with these difficult and most important problems of life.

I am sure your work will be of lasting advantage to humanity—especially when the doctors, teachers and ecclesiastics have read it and profited by it. Will they? They are wont to deal out a snake for an eel and a stone for a bread! Let's hope for the best!

Fritz Schwyzer, S D

WELCOME RECOGNITION

Editor, BIRTH CONTROL REVIEW

I want to congratulate you on Mrs Porritt's article* in the current number of the REVIEW. The clarity of her exposition, combined with her documented optimism is very encouraging after the badly garbled press accounts, with their more or less pornographic bias. My superficial observations of the French system had suggested the artificiality of which she speaks and distressed me far more than the personal annoyance of being accosted in the most public places in broad daylight by the "contact men". Such facts as you publish here will serve well those who wish, as all the readers of the REVIEW surely do, to help destroy this ancient trade. The article attacks it at precisely the point where it seems strongest—in its pretense of inevitability—and gives us courage to attack the old conservative position anew, armed with new facts.

The Companionate and Birth Control are accepted things here among large numbers of the students. The "Senior Bible" class recently spent three weeks on Judge Lindsey's Companionate Marriage and approved. Monday noon, the Social Science Club of the faculty discussed the proposition under the leadership of Professor Clark of Sociology, all approving but three. This evening I have just returned from Paul Douglas' discussion of the Family Wage where the REVIEW enabled me to correct him on the inevitability of the dysgenic birth-rate. I was glad to be able to refer to the current number of

the REVIEW reporting the figures given at the Population Congress this September, when he asked for a reference. I shall make it my duty to send him line and page, as he is in touch with important Labor organizations and a good number of employers. A student had first mentioned ignorance as the trouble in this country and was glad to have reinforcement. In ten years Birth Control will have gone so far the old reactionaries won't know the country.

Hudson Chapman

A FRIENDLY COMMENT

THE BIRTH CONTROL REVIEW has analyzed the families listed by the New York Times in its holiday appeal for the "100 neediest cases". Fifty-one per cent, this journal reports, are needy for lack of knowledge regarding methods of contraception: mothers dead of anemia from the strain of bearing too many children, babies dying for lack of enough food and blankets to go around, fathers attempting suicide after a hopeless effort to support eight children on an unskilled worker's wage. Luckily the workers of the world are not everywhere subject to the legal puritanism prevailing in the United States. In England where the distribution of Birth Control information is widespread if not scientifically controlled, the decline in the birth-rate among the working class was as great, between 1911 and 1921, as in the population as a whole. In London the average decrease for four poor boroughs since 1921 has been about 16 per cent, comparative figures in four wealthy boroughs show no greater decrease and in some cases an actual increase for the same period. In other European countries the figures are even more impressive. We quote from the BIRTH CONTROL REVIEW:

The city of Bremen, which has a record typical of many German cities, had in 1901 an average of 1.27 children for the wealthy, of 4.49 for artisans and the poor. In 1925 it had 1.47, a slight increase, for the wealthy and only 1.92 for artisans and the poor. That is, these poorer classes had cut their families more than 50 per cent.

In spite of the stubborn bigotry of opponents of the movement, we cannot believe that it will be long before the workers of the United States insist on a similar right to limit their families to numbers they can decently support without recourse to the charitable efforts of the New York Times and other agencies of casual relief.

—From *The Nation*, N Y

Never anything happened greater in the world than the death of a false idea and the birth of a true one —Dr F W NORWOOD

*"A Momentous Report," BIRTH CONTROL REVIEW, January, p 10

STERILIZATION A SOCIAL VIEW

(Continued from page 77)

with the individual case in its organic relations with the rest of the community

The principles stated above apply also to the sterilization of criminals, which is being practiced to some extent at the present time. It is not yet known what proportion of criminals in general are hereditarily defective, indeed in only a few prisons have adequate examinations been made of the nature of the mental defects in their inmates. There is, also much disagreement as yet between experts regarding the standards by which criminals are to be judged defective. It seems increasingly clear, however, that what is inherited is not a tendency to steal, or burn, or kill etc., etc., but a mental instability or weakness which renders one likely to contravene the standards set up by the community. Thus what the potential criminal, whose mental equipment is abnormal, needs most is early segregation which will render it unlikely that his mental instability will have a chance to grow and become dangerous. The same may be said of the young criminal of abnormal mental make-up. The most normal minded criminal needs the influence of an environment in which there is no encouragement to criminal acts and in which he can function in a thoroughly normal manner within the recognized bounds placed by society. It may be wise at times to cut off the reproductive power of mentally abnormal criminals, but it is just as dangerous socially to do this and leave them at large as in the case of the feeble-minded. Segregation and the development of communities in which the criminal can be restored to a healthy—mental and physical—mode of life will do far more towards lessening criminality than sterilization. This latter should only be employed as a complementary factor in a method of treatment which takes account of the total set of circumstances in the life of an individual and aims at making the best adjustment of the individual to these that appears possible in his case.

Sterilization then may be useful at times in the attempt to bring about better relations between the individual and the community, and to render certain persons harmless to community life. But unless it is employed as one factor in a more comprehensive scheme of personal rehabilitation it is quite likely to do more harm than good. A society is fully as likely to degenerate through the development of unhealthy social attitudes of mind as through the increase in numbers of the mentally abnormal. Indeed the sociologist generally believes that it is more likely to do so because the propagation of attitudes and habits is potentially much faster than biological reproduction.

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THE CALIFORNIA EXPERIMENT

(Continued from page 82)

the former group the relationship of the affected is also much closer than in the latter

Moreover, the contrasts between the two groups would certainly be greater if the ancestry of the insane were known and reported as thoroughly as that of the superior children

- 6 Sterilization of the insane as it is practiced in California will prevent the birth of few, if any, superior children, while it will prevent the birth of many children who would certainly be inferior

A very gratifying by-product of the California experiment is the therapeutic value already noted in certain types of insanity. The marked improvement it produces in the mental and physical condition of patients with dementia praecox and the effectual doing away with pregnancy and fear-of-pregnancy psychosis constitute an entirely new and unlooked for argument in favor of sterilization. Incidentally the woman's sterilization operation—a far more serious operation than for a man—has in some cases justified itself by offering the opportunity to find and correct other serious abdominal conditions which were affecting mental health. For these and other reasons the tendency in institutions of late has been to sterilize soon after entrance and not, as in former years, shortly before leaving.

In Sonoma State Home the wise superintendent (Dr. Butler) based a decision to sterilize, with the patient's consent, in some cases on the fact that the handicapped patients had already "as many children as they could comfortably care for."

ENGLAND

THE figures for 1927, issued by the Registrar General on January 19, reach a new low level for both the birthrate and the infant mortality rate for England and Wales. The birthrate was 16.7, with an infant mortality of 69 per 1,000 births. The general mortality rate was 12.3, slightly higher than in 1926. In 1923 the infant mortality rate was almost as low as in 1927, there being only a small decimal in favor of last year. The publication of the figures was hailed with warm welcome from some quarters and lamentation over the possibility of depopulation in others. This possibility does not yet show much likelihood of materializing, as the natural increase of the population for the year was over 400,000. This means that nearly half a million boys and girls were added to the ranks of the workers—or would have been so added had there been occupation for all of them. As a matter of fact many of them enrolled in the army of the unemployed. The general sentiment concerning the fall of the birthrate was well expressed by Edward Herbert in the *London Star*:

On the whole, then, there is no ground for pessimism. Surely a healthier, better educated, more efficient—though stationary—population is to be desired rather than one which proliferates in ignorance, poverty and disease.

Medical Officers of Health in many cities and boroughs are attributing the lower birthrate to the increasingly wide-spread knowledge of Birth Control, as are also, in general, the newspapers.

Sterilization of mentally defective persons, to lighten the heavy burden imposed by segregation, was recommended to Parliament by the Derbyshire County Council. The Council also recommended legislation prohibiting the marriage of mental defectives.

A Birth Control Caravan Clinic was recently instituted by the Society of Constructive Birth Control, whose President is Dr. Marie Stopes. The caravan is advertised as being organized to fill the need until "the Minister of Health does his duty." It began its work in East London and traveled thence into the country towards Reading. Mrs. G. S. Guy, who is in charge, reports that it has been well received by doctors, nurses, and police, as well as by the women in the towns and villages.

LONDON, Jan. 15.—A small boy, recently admitted to a local hospital, was weak and near death from hunger. He was one of a family of 12 and his father's wages amounted to about \$20 a week. When the nurse gave the boy a cup of warm milk he asked appealingly, "How far down can I drink?"

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In addition there were many others who contributed richly to the discussion of the papers.

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