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# BIRTH CONTROL REVIEW



MOTHER AND CHILD by WARREN WHELOCK  
Wood Carving and Drawing

# Birth Control Review

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## Organize for Birth Control

There are nine state birth control leagues in the United States

There should be forty-eight

If you live in Connecticut, Delaware, Illinois, Massachusetts, Minnesota, Michigan, New Jersey, Pennsylvania or Rhode Island, join your state league  
See listing on page 355

Follow the progress of state leagues in the BIRTH CONTROL REVIEW a special article on the work in Pennsylvania in this issue, for January, a full report on the Birth Control League of Michigan

Rhode Island announces, as a result of its recent membership drive, 440 new members, making a total enrollment of over 500 in this young organization. All Rhode Island members automatically become subscribers to the Review. Mrs Henry Salomon president writes "You have been generous with your praise of our league work here—but we like it. You have made us feel that the Review is our magazine, and we will keep you supplied with local news each month."

If there is no league in your state, write to us. We will put you in touch with other interested people.

## CLINICS ARE NEEDED

There are 83 centres for birth control instruction, distributed through 18 States, in the United States

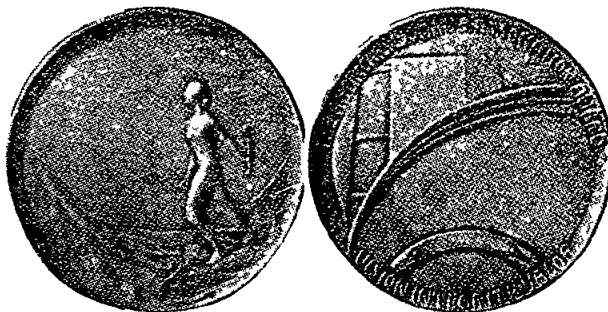
*There should be some in every state, and thousands throughout the country*

# Editorial

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MARGARET SANGER has been selected as the recipient of the first annual American Woman's Association award to the "out-standing woman in the metropolitan area, both in her vocational field and in her individual development" In announcing the award, Miss Lena Madessin Phillips, presi-



Medal designed by Renee Prahar

dent of the International Federation of Professional and Business Club Women, and chairman of the judges, said "She has fought a battle against almost every influence which in the past was considered necessary for the success of a cause She has fought that battle single-handed and the committee thinks it safe now to say that she has won She is, therefore, a pioneer of pioneers She has carried her cause without remuneration or personal reward other than poverty, con-

demnation and ostracism She has devoted her life to that highest of all pursuits—the betterment of social welfare, and she has taken for her cause the welfare and happiness of the sometimes called 'weaker sex'—woman She has opened the doors of knowledge and thereby given light, freedom and happiness to thousands caught in the tragic meshes of ignorance She is remaking the world "

WE REJOICE at this recognition of Margaret Sanger's high achievement, and at the understanding of the meaning of birth control which it implies This award is a milestone near the end of the long road Mrs Sanger has travelled since she first embraced the cause of birth control Her characteristic singleness of purpose is shown in her attitude toward the award, as expressed in an informal letter to the editor of the REVIEW "My heart rejoices," she wrote, "at what it means to the work we are all trying to advance We should all gain an impetus from the publicity and change of attitude induced by this announcement The recognition that birth control is receiving these days brings victory closer" The American Woman's Association, in honoring Margaret Sanger for her birth control work, has honored itself

"THE BIRTH CONTROL REVIEW, as the organ of the birth control movement, is certainly not in favor of the baby," comments the excellent Catholic journal THE COMMONWEAL, in an article on *The Crusade against the Baby*, "although the slogan *The Right of the Child to Be Wanted* has an enticing, logical and friendly significance" For this, much thanks We too think that the right of the child to be wanted has an enticing, etc, ring But we see no contradiction in terms here Birth control is, from first to last, in favor of the baby, more power to him Birth control encourages more babies, better babies, healthier babies, happier and cleverer babies, wanted, welcomed, cared-for

babies Such babies will not come through blind chance to unwilling and protesting parents They will come through the use of birth control for eugenical ends The January issue of the *REVIEW* will be largely devoted to Child Welfare, and will show, we hope, that birth control is a necessary factor in creating the best possible conditions for the child

**I**N THE illuminating report from the Bethlehem clinic, given in this issue, the necessity for contraceptive information at this time of wide-spread unemployment is brought out concretely in case after case "five children, husband unemployed, eleven children, husband unemployed, six children, husband mentally defective and unemployed" Multiply this situation by the hundreds of thousands Admittedly, America has come to such a pass that it cannot provide work for millions of men willing and eager to pay their own way The problems behind this situation are complex and difficult of solution But meanwhile, let us at least take from these families, in want through no fault of their own, the burden of children they cannot provide for What the devoted workers in Bethlehem are doing, should be done in every city and town and village throughout the country There are eighty-three centres for birth control service in the United States today—a splendid record Is there one in your town, or are distressed American families, in addition to enforced idleness and privation, living in dread of the coming of another child? In times such as these, every man and woman whose life has been made better through a knowledge of birth control has a moral obligation, to help his neighbor to the same knowledge Clinics where scientific birth control information can be given to those unable to pay for it, are needed today as never before

**T**HE STATE CONVENTION of the Connecticut League for Women Voters deleted birth control from its study program at its closing session on November 19th This unfortunate action is mitigated by the fact that the issue was clearly drawn, the anti-birth control faction being led by a member who stated that,

as a Catholic, she would resign from the League if birth control was considered a legitimate topic for study It was ably pointed out that the question was not the *approval* of birth control but its *consideration* and study Catholic women cannot feel very sure of the correctness of their position if they are afraid to submit it to dispassionate examination The action of the Connecticut League for Women Voters cannot fail to call the problem to the attention of thoughtful people of that state This will suffice, for, unlike the Catholics, we have faith in the validity of our case, and welcome study, discussion and full consideration of all the pros and cons This attitude won the day in a similar discussion, when the Illinois League of Women Voters decided at their November meeting to include birth control in their social hygiene study program

**O**VERPOPULATION, it is generally conceded, is at the root of the present Japanese-Chinese situation The Japanese attitude toward birth control, a solution of over-population preferably to war (to put it mildly) is far from clear-cut Count Carlo Sforza, in a recent article in the *Herald-Tribune* states that birth control in Japan must fight "against the instinctive objections of an entire people, whose chief moral and social ideas are based upon filial piety" On the other hand, Professor Roswell H Johnson, who made a lecture tour of twenty-one Japanese cities last summer for the American Eugenics Society, reports that the birth control movement is making steady progress Whether the military coterie, at present in the ascendancy, or the peace-loving element, which advocates birth control at home instead of aggression abroad, will win out remains to be seen

### Michigan Readers Please Note!

*A state conference on birth control will be held in Detroit, December 11th*

*Luncheon Meeting*

**SPEAKERS** Professor Henry Pratt Fairchild  
Reverend Alfred W Wishart  
Mrs Cornelia James Cannon

# Birth Control On the Air

Through the courtesy of the Debs Memorial Station, W.E.V.D., the American Birth Control League has sponsored a series of twelve talks on various phases of birth control, beginning October 1st, and continuing through December 31st. The series comprises addresses by Mrs. F. Robertson Jones, Reverend Eliot White, Dr. George Bedborough, Dr. Hannah M. Stone, Miss Henriette Hart, Dr. S. Adolphus Knopf, Mrs. Eliot White, Dr. Eric M. Matsner, Mr. Guy Irving Burch, Rabbi Sidney E. Goldstein, Mr. Jesse Qutman and Mrs. Carol K. Nash. Four of the talks are given below.

## The American Birth Control Movement

By ELEANOR DWIGHT JONES

THE BIRTH CONTROL movement in the United States really started about 100 years ago. But it started among the intelligentsia and not many people knew anything about it. A United States Senator, Robert Dale Owen, wrote a book in favor of birth control, and a Boston doctor, named Knowlton, wrote a pamphlet about it. In those happy days there were no laws against birth control and everyone might have bought these books, but as they had such dry, forbidding titles—*Moral Physiology* and *Fruits of Philosophy*—no one guessed that they were of vital human interest, and the man in the street did not hear of them. Then, from time to time, other intellectuals came out for birth control, Ralph Waldo Emerson, for instance, and Robert G. Ingersoll. So the idea of birth control finally reached the educated classes.

Men and women of these classes, whose mothers had had large families of children—ten and twelve and seventeen—and had carried many babies to the graveyard, succeeded in restricting their children to four or five, and in bringing a larger proportion of babies to maturity. They found that both mother and children were healthier if there were not too many children, and if they did not come too close together. They found that it was a fine thing to be able to keep the family from outgrowing Father's income, that birth control and comfortable living go together. They found that birth control saved husband and wife from a lot of friction and made married life much happier. So it spread rapidly among the educated, well-to-do classes.

But Puritanism and Victorianism were shocked. Anthony Comstock took alarm. "This birth con-

trol is a terrible thing," he said. "Sex is coarse and vulgar and the less people know about it the better. The sexual relation is sinful, and anything which will take away the worries which interfere with its enjoyment is dangerous to society. The knowledge of birth control must not spread. We must hush it up."

He got Congress to enact a law forbidding the mailing of birth control information and means, and he got the legislatures of half our states to enact laws intended to keep people from learning about birth control. So many anti-birth control laws were put through that most people are under the impression that the whole thing is illegal. This, however, is not the case. It is legal to practice birth control in all but one state and it is legal for physicians to give birth control information in all but two states. The Federal law, it is true, forbids the mailing and expressing of birth control information and materials, but the government does not interfere with physicians receiving contraceptive information by mail or securing supplies.

Yet these laws do prevent the sale and general distribution of printed birth control directions and the advertisement of contraceptives, and they make the rank and file of physicians believe that they would lose their licenses if they were known to give contraceptive information to their patients.

The result of this "hush policy" about birth control is a disgracefully undemocratic, anti-social state of affairs. People who have the money to consult well-informed doctors in their private offices, or the initiative to procure the tabooed literature and to find out where they can buy the needed materials, can and do limit their families. But the very poor, who have neither the money nor the initiative to overcome the obstacles we put in the way, are unable to secure birth control information, and are doomed to have large families of

children The mothers are broken down with incessant childbearing, many of their babies die, the children who survive suffer from over-crowding, undernourishment and neglect, they are starved in body and soul

Nineteen years ago a visiting nurse on the East Side of New York saw the desperate need of poor mothers for birth control, and dedicated her life to bringing it to them Courageous and dauntless, Margaret Sanger lectured to the poor about birth control, distributed among them a pamphlet called *Family Limitation*, and finally opened a birth control clinic in the slums of Brooklyn Twice she was arrested, and once she was imprisoned But Margaret Sanger only devoted herself more passionately to the cause of birth control, and with her fearlessness and poignant eloquence she captured the imagination of the American people Margaret Sanger is the heroine of the birth control movement

In 1915 the National Birth Control League was organized, and Margaret Sanger worked for a time with that other well-known birth control leader, Mary Ware Dennett, whose keen, logical mind and consistent policy have been of great value to the movement Then Mrs Dennett started the Voluntary Parenthood League, and for several years labored for the amendment of the Federal law against birth control She succeeded in getting a bill introduced but not enacted, the Roman Catholics putting up too fierce an opposition

Just ten years ago, Margaret Sanger founded the American Birth Control League, which since then has conducted a national birth control campaign of education and organization, and has published the BIRTH CONTROL REVIEW which tells the absorbing story of the progress of birth control from month to month In 1923 the first important birth control clinic in the United States, known as the Clinical Research Department of the American Birth Control League, was founded in New York

But Mrs Sanger is too independent in spirit to be what is known as an "organization woman," and in 1928 she resigned the presidency of the American Birth Control League and applied herself to the more congenial work of managing the Clinical Research Bureau (which by vote of the Directors of the League was now made an independent organization) and of carrying on the Federal legislative campaign, which had been discontinued by Mrs Dennett Last winter she succeeded in getting

a bill introduced into the Senate It had a lively hearing before the Senate Judiciary Committee, but was killed by the Roman Catholic opposition

Since Mrs Sanger's resignation from the presidency, the American Birth Control League has continued its national campaign of organization and education, and the birth control movement has made rapid progress In 1928 there was only one State Birth Control League affiliated with the American League, now there are eight We are working for 48 In 1928 only two or three medical schools in the whole country taught contraception, now 41 teach it We are working to get the other 34 The scientific study of birth control has been greatly promoted by the National Committee on Maternal Health, headed by Dr Robert L Dickinson In 1928 there were only 28 birth control clinics in the whole country, today there are 83, and we are working to have one in every town and village in the United States

#### THE MESSAGE OF BIRTH CONTROL

In every way we are fighting the undemocratic, anti-social policy which has resulted in small families for those who are best qualified for parenthood and big families for those who are least qualified for it To married couples who are healthy and sound and able to provide for children we say, "Use birth control, but do not use it to limit your children to one or two Use it only to space the births of your children, so that you can have a good-sized family without injury to the health of mother or children What the country needs most is more fine, healthy, well-cared for children"

To men and women who are poor or sickly or incompetent, and have not the means to provide for many children, we say, "There is no need for you to have more children than you have health and strength for There is no need for you to have more children than you can provide for Ask your doctor or the health center in your neighborhood to teach you safe, reliable methods of family limitation If they cannot help you, ask us Birth control is legal Birth control is right It is cruelty to children to have them born to parents who cannot give them health and strength and a fair chance in life What the country needs is more well born children and fewer ill born"

This is the message of the birth control movement Its success will mean the beginning of a new social era

## Birth Control in Tuberculosis and Other Serious Diseases

By S ADOLPHUS KNOPF, M D

**I**N MY LIFE LONG WORK for the prevention and cure of tuberculosis, I have seen many a woman afflicted with this disease who became pregnant and whose lung condition was seriously aggravated thereby, causing premature death, leaving a widowed husband and motherless children. These experiences caused me to become an ardent advocate of scientific, judicious and ethical birth control. Had timely and careful prevention of conception been instituted, those mothers might have lived many more years, because uncomplicated tuberculosis is curable in most instances.

The tuberculosis germ is everywhere, and only when we are strong and healthy does it fail to do us any harm, but too frequently repeated pregnancies, even in strong women, will undermine the system and make it less resistant. To prevent tuberculosis every married woman should have an annual health examination and at least a two years interval between pregnancies.

When there are already too many children and the husband's earnings are small, the result is underfeeding, overcrowding and often insufficient clothing in cold weather. These three causes undermine the system, so that the germ of tuberculosis will get easy hold. Large families are often compelled to have their children help towards the family budget. If there is anything which predisposes young people between 15 and 20 to tuberculosis, it is having their growth and general development stunted by child labor. Because of the enfeebled condition of the mother, who cannot transmit much physical strength to the latter born children, and because of inevitable underfeeding, these are the children who so frequently become victims to tuberculosis. Everybody knows that sun, good air and food are helpful in the prevention and cure of tuberculosis. It must be evident how little of these can be had in an overcrowded tenement house with six to ten people living in two or three rooms. Underfeeding and overcrowding are responsible for many cases of tuberculosis. Because it is a disease of the masses, it attacks rich and poor alike, and every consumptive is a source of infection unless he is careful to destroy his infectious sputum.

When the tuberculous mother becomes pregnant it is exceedingly difficult to prevent the baby which

she carries from becoming infected. Although the disease is usually not considered hereditary, the circulation of the mother's blood with that of the unborn child is so intimate that the secretions of the bacilli in the blood render the child more susceptible to tuberculosis. Even if the mother is careful and does not kiss the newborn infant, the close contact will usually result in the child becoming directly infected.

Thus if the tuberculous wife becomes pregnant her own life and that of her child are seriously jeopardized. Such catastrophes can be avoided by the proper and timely application of contraceptives. Prevention of conception in tuberculous or strongly predisposed women is one of the important factors in the reduction of the tuberculosis mortality rate. How much greater would this reduction be if birth control would become more universal, if all physicians were properly educated in the technique of prevention of conception, and if all women would know that by applying to their physicians or birth control clinics for advice their lives, if in danger, would be spared.

However, it is not only tuberculosis which becomes aggravated by an added pregnancy, many other ailments such as kidney, heart, nervous and mental diseases often cause the untimely death of mothers whose life would have been preserved if proper contraceptive methods had been used. One condition which often leads to serious mental trouble is the so-called anxiety neurosis, the woman's constant fear of becoming pregnant when her physical or economic condition will not permit any addition to the family. When pregnancy does occur the women in desperation often resort to abortion, which frequently leads to chronic invalidism or death. These criminal abortions are largely responsible for our country's high maternal mortality rate. One would think that the whole American medical profession would be aroused to prevent such conditions.

What misery and suffering would be spared to women and children if all laws against birth control were annulled and its practice under medical supervision considered a public utility, as in Holland, and not a public menace as our opponents maintain! If one wants to get an idea of what women suffer because of those man-made laws, one should read *My Fight for Birth Control* by that heroic woman, Margaret Sanger, who in her battle for the rights and freedom of womanhood, suffered humiliation, imprisonment, privations of all kinds

and the most brutal treatment in the name of the law. Let us all help her in her present endeavor to have these unjust Federal anti-birth control laws repealed.

What would be gained if we followed the example of Holland, where birth control has been officially sanctioned for over fifty years? Fewer mothers would die from tuberculosis and other diseases, leaving orphaned children. Young people would not hesitate to marry through fear of children arriving too soon and too often, if they knew that they could plan their family according to their economic condition. There would be fewer marital maladjustments, fewer divorces, less illegitimacy, less prostitution, syphilis and crime would be diminished. Our taxes would be lower and the general health of the nation would be better. There would be decided physical, material, moral and even spiritual progress. Overpopulation, with all its dire consequences of disease, crime, war and famine, would be prevented.

In the little land of Holland there is a gradual increase of population, despite the fact that birth control is legalized. Economically and physically the people at large are well off. There is no unemployment, and the maternal and general mortality rates are the lowest of all civilized countries. Let us follow the example of Holland, and become, also, a model for other nations.

## Who Comes to the Birth Control Clinic?

By HANNAH M. STONE, M.D.

**L**ESS than a decade ago there was not a single birth control centre in the United States. The first clinic, the Birth Control Clinical Research Bureau, established and directed by Margaret Sanger, then president of the American Birth Control League, was opened in 1923. Today there are over seventy centres scattered all over America, and new ones are constantly being organized.

At the Clinical Research Bureau alone over twenty-five thousand patients have already been examined and advised. Thousands of cases have been advised in the other clinics throughout the country, making a total of perhaps 100,000 patients. Obviously, the birth control clinic is meeting a widespread demand and supplying an urgent social and medical need.

Who are these women who come to the clinics?

What are their reasons for seeking contraceptive information?

At the Birth Control Clinical Research Bureau the majority of the women who come for information are mothers of many children, in some cases as many as seven, eight and more. Although their reproductive period is not at an end, they feel that they can no longer go on bearing and rearing children, or else that the children must not come so fast. In most instances the economic conditions of these families are such that they find it extremely difficult to supply the children they already have with the ordinary necessities of life.

Here are the records of three such cases who came to the clinic this very day, one after another.

Case No. 25825—This woman was referred to the clinic by her physician. She is 32 years old, Italian by birth. She was married at the age of 16, and became pregnant the same year. She has had four pregnancies and has three living children. Her husband, a florist, is subject to frequent attacks of asthma and earns an average of twenty dollars a week. This constitutes the entire family income. The woman herself is in need of medical attention and her gynecological condition is such that another pregnancy would be contraindicated at the present time.

Case No. 25826—This woman was also referred by her physician. She is 31 years old, Italian, married eleven years. She has had five pregnancies but only three of her children are living. A few years ago she had an abdominal operation and later a serious nervous breakdown. Her husband is a tailor, earning \$22 a week.

Case No. 25827—Referred to the clinic by a hospital social welfare agency. She is American, 34 years old, and married nine years. During these nine years she has had six pregnancies, and she has four living children. Two of her deliveries were particularly difficult, and during the last pregnancy she developed an eclampsia. She is also suffering from a chronic arthritis and from uterine pathology. Her husband is a plasterer, unemployed at present.

Many of the women who come to us are young mothers with infants or small babies. Health, economic, social or some other motives may make essential that they postpone another pregnancy until they are in a position to undertake one. With our present mode of living it is indeed desirable in the interests of the parents as well as of the children that there should be a definite period of rest be-



tween pregnancies and that these should not follow each other too closely. A woman illustrative of this type also came in this morning.

Case No. 25819—Referred to the clinic by a social service agency. The woman was born in South America. She is 27 years old, married four years, and has three children, three years, twenty months and five months old respectively. Her husband is a painter, irregularly employed, with a present income of \$15 a week.

Young, recently married women also apply for advice. Many of these do so because of social and economic conditions. The husband's income may be entirely insufficient to support both of them and to establish a home. The wife intends to continue her employment for the first year or two of their married life. Again, both of them may be students preparing themselves for some chosen career. The birth of a child during these years would result in a permanent change and dislocation in their life and plans.

It is indeed unfortunate that because of our existing laws in this state, such women cannot be accepted as patients at the clinic, unless during the medical examination some physical or eugenic disability is found which would make childbearing dangerous to the mother or the child. The following case belongs to this group.

Case No. 25748—This woman is 23 years old, American, married three years. Her husband is an attorney having a fair income. Both are anxious for a child, but the wife is suffering from a serious heart condition and she was advised by her physician not to undertake any pregnancies, at least for the present.

Many women apply for contraception during the period of their menopause. This is a particularly trying period for the woman, for with the recurring irregularities of her menstrual flow she is always in a state of apprehension about conception. While pregnancy does not often occur at this period, nevertheless it is possible. From biologic, social and other points of view, however, this is rarely desirable, and the use of contraceptives is distinctly indicated for women at this epoch of their sexual life. The following is an illustrative case.

Case No. 25156—Referred by a social service agency. The woman, Hungarian by birth, is 43 years old, and has been married for twenty years. She has seven living children ranging from 19 to 2 years in age, and in addition has had three mis-

carriages. During the last year her menses have become irregular and often delayed and she has been in constant anxiety of a possible conception. Her husband, incidentally, has been unemployed for the last year and a half, and the family receives \$15 a week from the social service organization.

In general, the woman who comes to the birth control clinic is the wife of a workingman with a meagre income. She has been referred to the clinic by a hospital, physician, social service agency, patient or other source. She has been married for many years, has had numerous pregnancies and is the mother of several living children. She may belong to any of the many nationalities to be found in a city like New York, and to any of the several religious denominations. Protestants, Hebrews and Catholics are represented in fairly equal proportions.

An exhaustive statistical analysis of our first 10,000 cases has recently been completed under the auspices of a distinguished scientific and medical committee, and this is now being published in book form. This volume will give the fullest reply to the question "Who comes to the birth control clinic?" and will present a cross section of the social, economic, marital and sex life of the American woman.

## Birth Control — a Righteous Cause

By REVEREND ELIOT WHITE

**A** CENTURY ago my wife's grandmother was bringing up a family of fourteen children in a village in Maine. The parents had little money, but they owned their simple home. The daughters, as they grew up, helped in the household, the sons in the garden and with their father's work as a carpenter. There was plenty of room and food for all.

But change the picture to the East side of Manhattan a hundred years later, where an even larger family dwell in a dingy tenement, a ramshackle building with ten or more other families of varying sizes. While pastor of the East Side Chapel of one of the Episcopal Churches in Manhattan, I baptized the fifteenth baby in such a household. There was at least one other baby after that. Three of the oldest children were married and lived elsewhere, but there was always a throng of smudgy but astonishingly good youngsters swarming through the bare rooms.

The father of the family, who was mentally subnormal, brought in by odd jobs about one dollar and a half a week. To earn enough to keep landlord and grocer appeased, the mother arose at three o'clock on weekday mornings, and through whatever storms might be raging across the black night's end made her way to Wall Street — not to speculate in either "preferred" or "common," but to wash floors for several hours. Then back to the home (compare it with the Maine household), to drag together the children's breakfasts and clothing and shoes enough to send at least a few of them to school! There was little complaining from the mother, only a rueful wondering each twelvemonth how things were to be managed while she took a few days off to increase her clamorous brood by one more baby.

Add to this an account from the late *New York World*, of the attempted suicide of a railroad laborer's wife, who bore twenty-three children in twenty-five years, with only seven of them surviving. At the hospital as soon as she had recovered sufficiently from the poison to talk, she cried "I didn't want to bring more children into the world. We are poor people, and cannot afford to keep on having babies. I wish I had died!"

Yet conventional people, with their families of one to three children, rarely four or five, wonder why a clergyman ministering among such poor strugglers as here instanced, sometimes becomes "radical" on such matters as hygienic birth control information, scientifically guarded, spacing of children, eugenics, and other related but still lamentably neglected subjects.

The privilege of bringing up four or five children with the care she can never give to sixteen, must no longer be denied to any mother, especially under overcrowded city conditions. Legal obstacles still prevent the free dissemination of scientific birth control knowledge. All patriotic and humane citizens who wish to make this country one of healthier and happier homes, should work for birth control, or, at the very least, understand it.

The American Birth Control League and its valorous magazine, the *BIRTH CONTROL REVIEW*, have accurate data on the recent advances among medical and religious organizations in advocating hygienic birth control. Let me urge the use of such reliable sources of information. I shall only have time to comment briefly on the situation in the Protestant Episcopal Church, of which I have been a minister for thirty-six years.

The London, 1930, Lambeth Conference of all the bishops of the Anglican Communion, including the American Episcopal Church bishops, gave "guarded approval" of birth control. The English bishop who led the dissenting minority in the debate and vote on the subject, was, surprisingly enough, invited to preach the opening sermon at the Triennial General Convention of the American Episcopal Church held in Denver, September, 1931. In that discourse the visiting bishop urged the Convention to oppose even such approval of birth control as the Lambeth Conference had given, and the Convention, far too submissively, avoided all open and reported consideration of the subject.

But this can be only a postponement, for the entire matter is too vital and exigent, and involves the welfare of too many millions of the people of this and all other countries. The Episcopal Convention should rather have heeded the declaration of the Anglican Primate, the Archbishop of Canterbury, who said that for the Conference of Bishops at Lambeth to have ignored the fact that there had been "almost a revolution" in the customs of married life, would have been the "policy of an ostrich." Granting certain exceptional cases, "when there is a morally justifiable reason for avoiding complete abstinence," and recognizing that the relation of husband and wife has a value of its own within the sacrament of marriage, whereby "married life is enhanced and its character strengthened," the Archbishop added that the Lambeth Conference was "unable to condemn the use of artificial methods to avoid conception as in themselves sinful. It did, however, insist that their use was permissible only in such exceptional cases, and condemned their use in cases with motives of selfishness, luxury, or mere convenience."

It is a pleasure to record that in contrast to the silence of the 1931 Convention, the Woman's Auxiliary of the Episcopal Church, meeting in Denver at the same time, made the refreshingly frank statement in the *Preparation for Marriage* section of its *Findings Committee Report*, that "proper sex instruction is of prime importance, and the knowledge of birth control of great value. Information concerning these subjects when given, should be imparted by clear-headed, high-minded persons."

In conclusion, with Galileo of old, we can confidently declare of this great modern advance in human welfare, against what opposition and prejudice still survive—"And yet it moves!"

# A Far-Reaching Social Movement

By FRANK H HANKINS

**T**HE BIRTH CONTROL movement is an effort to apply an increasing body of knowledge to a fundamental human problem. It is one of the signs of the advance of the scientific spirit, and seems destined to spread with an inevitability as great as that of the development of science itself.

Control of the size of the family is by no means new in human history, but control by healthful contraceptive methods is a relatively new feature of our own culture. All primitive peoples were under the necessity of keeping their numbers within limits set by their economic resources. They did so by methods which included killing of the aged, infanticide, abortion, taboo periods for husband and wife. Though we do not now approve of these methods (despite which some of them are still in use) they were vastly more humane than those followed in India and China at the present time. These populations breed recklessly and in spite of widespread abortion and infanticide, their numbers are kept within limits only by disease, vice, famine, plague and war. All the worst human ills in aggravated form are found in such societies, while the refinements of civilized life are inexorably denied to vast hordes of the populace.

Such is the inevitable outcome of unrestrained reproduction. Such seems to be the ideal toward which certain opponents of birth control would have Western nations gravitate. Those who tell us in sweet naivete that "Children come trooping down from heaven because God wills it," are appealing to the outworn ideology of a passing age. They overlook the fact that the powers of human reproduction are so great that all the major nations of the world are under the necessity of limiting their increase. If they do not do so they must lower their standards of living to the mere subsistence level, and suffer all the plagues and ills that torment the Orient. The American people desire no such end, rather they are determined not only to maintain their standard of living but to raise it.

We are no longer in the pioneering stage of American life. A generation ago the vast areas of the West were absorbing the surplus of our increasing millions of people. The tide now runs the

other way, at least 500,000 persons migrate annually from country to city. But in the city children are no longer economic assets, they have become heavy liabilities. They cannot work and they must be educated. They must be decently clothed and housed and provided with opportunities for recreation, social life and personality development. At the same time the increasing complexity of life, the growth of knowledge that must be absorbed, and the multiplication of vocational techniques that must be mastered require a prolongation of youth and greatly increase the costs of preparation for making a livelihood. Only the rich can today afford the luxury of large families. Nevertheless it is the poor that have them. And it is partly in consequence of their large families that they are poor.

Under the conditions that normally obtain in this country, poverty—hard, grinding and continuous poverty—is nearly synonymous with either a large family or low mentality. Moreover this condition tends to perpetuate itself, because the parents of many children cannot give them the proper preparation to enable them to rise in the social scale. The evils of ignorance, superstitions, low standards of living, juvenile delinquency, quarreling parents, unwanted and uncherished children thus tend to constitute a vicious circle.

Birth control is one of the most effective attacks upon this whole galaxy of ancient evils. For this reason it is the most far-reaching social reform movement of the modern era. For this reason also it is most bitterly opposed by those institutions which thrive on the perpetuation of ignorance and uncivilization among the masses. A reasonable adjustment of size of family to income enhances the welfare of the entire family, lightens the burden of millions of parents and brings increased health and happiness to millions of children. And it goes without saying that the abolition, or even the reduction, of poverty will bring in its train a multitude of other blessings.

It is often pointed out by students of population problems, and vigorously reiterated by the opponents of birth control, that it has resulted in a much more rapid increase of the less fit than of the more fit. This is largely true. Those who have

\*Address delivered at the New England Conference on Birth Control, Providence, Rhode Island, Oct. 14, 1931.

had the ability to succeed in the struggle for the better things of life have fewer children than those who fail. They succeed in part because they have fewer children, but I am inclined to think they are also the better endowed elements in the population. But the remedy is not to be found in efforts to abolish family limitation. Such limitation is an essential of civilization. It is required by the new status of woman, by the new ideals of the family, by the standard of life and is indeed a socially necessary barrier against the brood of evils above mentioned. It is already a well established tradition among a majority of our population and there is no power under heaven that can compel them to give it up. Birth control is here to stay, and will be more widely disseminated with every passing year.

And just here we perceive a most encouraging fact. In those cities of Sweden and Germany where

all classes are able to regulate the number of their offspring, the more successful classes appear to be having larger families than the less successful. This is a result not generally expected. Birth control was aimed at poverty and its accompanying evils, it was intended to help woman to free herself from the eternal round of fear, pregnancy, undesired children or abortion and too many mouths to feed. But we now see it as an important aid in the eugenic movement for the breeding of a better race. It will aid in the elimination or reduction of various kinds of hereditary defects. It will enable those least well equipped for the competitions of life to limit their offspring in keeping with their status. Above all it will aid in establishing in all classes families of healthy, happy children, well fed and clothed and properly equipped by education and home training for a useful place in a better society than the world has yet known.

## Primitive Population Control

By NATHAN MILLER

*Dr. Miller points out that the need for population control has always existed, and describes how primitive peoples met this problem through abortion, infanticide and sexual taboos. The present era is able to use scientific birth control.*

THE SOCIAL consciousness of a need for the control of population is ordinarily supposed to be a relatively modern phenomenon. In fact, its apparent modernity has served to block its more rapid official or legal acceptance in modern societies. The opponents of population control raise the taboos and moral admonitions of ancient codes of conduct and religious proscriptions, in attempting to forestall its progress, while the active sponsors of the birth control movement have had to develop their case wholly upon the basis of the critical needs of contemporary times. But recent investigations have unearthed evidence that the realization of the pressing need for procreation control as a social policy is almost as old as human culture itself.

Anthropological literature affords numerous instances of the groping attempt of primitive peoples to adjust their numbers in some way to the supporting powers of their natural environment. Naturally, it is a presumption to conclude that in these simpler cultures an actual "population policy" had been conceived and erected, with social compulsions behind it. For even in contemporary industrialized cultures like our own no actual plan-

ned policy has been provided by legislation or even by common consent of public opinion. But among savages, as among ourselves, the realistic threat of a jeopardy to his standard of life compels the individual to resort to drastic measures of relief to offset the burden that children might create. And this despite the forbidding disapproval of cults, priesthoods, officials, and the other vested interests in his group life.

The primitive man reacts sharply to the threat of dearth or actual impoverishment, by the crudest means at his command. This is the case largely because the position of the child has not yet been insured by the abundance and degree of care made possible only in a culture which is able to support increasing numbers comfortably. Bodily discomfort and mere personal inconvenience alone often prove a sufficient incitement to the use of infanticide or abortion. Where the child crowds or would necessitate even the sacrifice of some favorite element of self-indulgence, he may be put away. But it is generally the fear of another *bouche inutile* which causes this summary action—and thousands of abortions take place today for similar causes.

Among some peoples, recourse is had to women who are professional in these matters.<sup>1</sup> Among other primitive peoples, no effort is made at secrecy and the practice of abortion is no disgrace.<sup>2</sup> An observer in Fiji thus reports that the rapid increase of the practise in those islands might be traced in some degree to the social disintegration caused by missionary influence.<sup>3</sup> Charlevoix, an early French missionary, observed of the Indians of Canada that "the use of simples, which have the virtue of keeping back in them the natural consequences of their infidelity is familiar enough in this country."<sup>4</sup> The Paraguayan Indians defended their "right to procure abortion and kill the newly-born whenever they willed it. They claimed a right to the life which they had given."<sup>5</sup> In this manner we find a typical rational justification built up for practises imposed by the conditions of life.

With superior economic support supplied through the use of domesticated animals or tillage, more children could be kept. Moreover, men then desired offspring as a means of increasing their personal possessions and the elaboration of their own social powers. Under such circumstances a woman who procured abortion or practised infanticide had committed a definite misdemeanor which demanded the most horrible punishment. The woman had likewise committed a theft of the man's or chief's goods, a crime against property, and the "immoral" connotations of such a deed were soon developed.

But in the midst of incessant want or privation, infanticide becomes common. In the Torres Straits islands, for instance, parents often agreed on such a disposition of the child before its birth, and in Polynesia, it has been asserted that native women have confessed to destroying as many as five children each.<sup>6</sup> In more advanced cultures, infanticide or abandonment was common where persistent poverty was the rule, as in ancient Athens where the poor exposed the newly-born in baskets at the market-place, in the hope that they might be picked up by strangers.<sup>7</sup>

There is a directness and brutality in such measures which cannot be described as other than "savagery." Yet, the social background of poverty and pressure of populations occasionally induces employment of like methods in even more developed cultures. But we also have evidence of a degree of policy or prevision in regard to birth controls in primitive society. This most commonly takes the form of the regulation of sexual relations between

man and wife during the infancy of a child. Thus, in Africa, among the Bakitara, women lived apart from their husbands for two years after the birth of a child to avoid another conception, in Dahomey, natives abstained until the child was weaned, in the Congo region until the child ran about, etc.<sup>8</sup> Ridicule is the social agent used against the natives in New Guinea who have a second child before the first can walk.<sup>9</sup> On DePeyster island, near Samoa, a second child would be allowed to live only by having a fine paid by its family.<sup>10</sup>

A most striking instance illustrates this keen understanding of the "Malthusian menace" and the realization of the value of control of births in primitive society. Grinnell relates this of the Cheyenne Indians: "It was long the custom that a woman should not have a second child until her first was about ten years of age. When that period was reached the man was likely to go with his wife and child to some large dance or public gathering, and there, giving away at the same time a good horse to some friend, to announce publicly that now the child was going to have a little brother or sister. To be able to make such an announcement was a great credit to the parents. The people talked about it and praised the parents' self-control."<sup>11</sup>

Although it is difficult to generalize and assert that a population policy has been characteristic of all organized social life, yet the evidence is impressively full.<sup>12</sup> An elaborate, complex culture built upon a more productive economy insures higher standards of life and conduct. Poverty and reckless propagation work in a vicious circle to threaten these fruits of culture. The savage may be prompted to crude responses (as are the unfortunate and ignorant today) but social experience has at last produced a policy of foresight and some type of control of births to meet this situation.

<sup>1</sup> Cf. Weiss, *Volkerstamme im Norden Deutsch Ostafrikas*, pp. 671, 167; Merker, *Petermanns Mittheilungen*, XXX, p. 12-13, etc.

<sup>2</sup> Jenks, *Bontoc Igorot*, p. 60; Sigoyan, *Costumbres de los Indios Tirurayes*, p. 66.

<sup>3</sup> Thomson, *Fijians*, p. 222.

<sup>4</sup> Charlevoix, *Journal of a Voyage*, II, p. 52.

<sup>5</sup> Nordenkiöld, *Indianerleben*, p. 38.

<sup>6</sup> *Cambridge Expedition*, VI, p. 109; Ellis, *Polynesian Researches*, I, p. 251, 253.

<sup>7</sup> Chrisman, *The Historical Child*, p. 114, 115, 143, 193.

<sup>8</sup> Roscoe, *Bakitara*, p. 246; La Herisse, *L'ancienne royaume de Dahomey*, p. 230; Johnson, *Liberia*, II, p. 105, etc.

<sup>9</sup> Krieger, *Neu Guinea*, p. 294.

<sup>10</sup> Turner, *Samoa*, p. 286.

<sup>11</sup> Miller, N. *The Child in Primitive Society*.

<sup>12</sup> Grinnell, *The Cheyenne Indians*, p. 149.

# Which Child Will Be Brightest?

By MAYNARD SHIPLEY

ONE OF THE ARGUMENTS for spacing families is that each child of a spaced family will have a better chance not only for survival, but for superior physical and mental development. Another point familiar to all birth control advocates is the contention that if the first child of a family is not born until after the trying earliest years of marriage, it will be a better child, so to speak, for having waited. These statements are important, if true, and it is the business of science to ascertain if they are true.

The University of Chicago Press has recently published a remarkably interesting statistical study by L. L. Thurstone and Richard L. Jenkins on subjects germane to these arguments, *Order of Birth, Parent-Age, and Intelligence*\*. Much of it might be difficult reading for those unaccustomed to the observation of graphs and statistical tables, but the difficulty is rewarded by the finding of several conclusions of the greatest importance.

Thurstone and Jenkin's studies were based on more than 10,000 cases of children brought to the Institute for Juvenile Research in Chicago. These were all "problem children," and their general intelligence-level is low. Of the 1,430 cases selected for close study (because most was known about their parents and siblings), all but 164 were below average normal intelligence, the greatest number were high grade morons, borderline cases, or dull normal. There were 29 idiots and 138 imbeciles. Only 66 were of superior intelligence. Lest, however, it might be thought that conclusions based on such inferior children might not be valid for the normal, more than half the book is devoted to a resumé of similar studies made by other investigators, most of them with far better material to work on.

Most of the findings bear out the claims of proponents of birth control. For example, the best children seem to come when there is a space of three or four years between the child and its next older brother or sister. But too long spacing is markedly bad, after six years, the child produced

is likely to be a poorer product with each succeeding year, and the majority of those puzzling beings, Mongolian idiots, are last children whose next older siblings were born a conspicuously long time before. The mere spacing, of course, cannot be blamed for this condition, the probability is that so-called Mongolism is a sort of abortive freak, Nature's last effort with an exhausted mother, and that it is the age of the mother at the time of conception, not the mere fact of the child's being much younger than its preceding sibling, that is at fault.

This brings us to the very important question of parent-age, and especially of mother-age, in relation to intelligence of offspring. The father's age does not seem to be so much a deciding factor, unless he is very young or very old, but the best children seem to be produced by parents of nearly the same age. A great deal of unpublished work, of epoch-making nature if valid, has been done in the past quarter-century, on this very problem, by two Chicago researchers, Caspar L. Redfield and John F. Kendrick. Neither of these is mentioned in Thurstone and Jenkin's extensive bibliography. Their work is not orthodox, and is based on neo-Lamarckian evolution, i.e., on complete acceptance of the inheritance of acquired characters, a position not much in repute among authoritative biologists today. Their findings, so far as I have been informed of them, are directly contrary to many of those in the present volume. Their contention is that the older the mother, within reason, the better the offspring, and they apply this both to animals and to human beings. The present studies seem to show that the best children are produced by mothers in their late twenties, and fathers in their early thirties. Unfortunately, Redfield and Kendrick's studies have not been published as yet, and without much more information than I possess concerning them, it is impossible to tell how valid their arguments are.

Be that as it may, the present volume seems to show that intelligence does increase in a family with each succeeding child, up to at least the sixth. The fourth child seems, by a slight margin, to have the best chance for mental superiority. (As a fourth child myself, the news is pleasing!) On the other

\*ORDER OF BIRTH, PARENT-AGE, AND INTELLIGENCE, by L. L. Thurstone and Richard L. Jenkins. University of Chicago Press, Chicago, 1931. \$3.00.

hand, genius seems to occur most frequently among first and second children. This may be some compensation to the first child for the fact that in many other ways it is definitely handicapped, both physically (largely due to birth traumas, most common among primiparae) and mentally.

It cannot be too strongly pointed out that (except for difficulties arising from first labor), these handicaps and disabilities of the first child do not occur mystically because it is the first, but are the result of childbearing at too young an age. The same disabilities present themselves in the later children of large families. In other words, the mother's age is the deciding factor, birth control is needed, if for no other reason, because too young or too old women are unlikely to produce superior or even normal children.

Many of the effects which Thurstone and Jenkins, and other investigators as well, attribute to mere order of birth, as if that had some magical significance, are really economic or psychological in source. For example, there is much criminality among first children—an undue proportion, but many families which have to live in a bad social environment when their first child is born later improve economically, so that the later children have a better chance, again, it is notoriously the first child, whose little ego-kingdom is shattered when a new brother or sister arrives, who becomes antisocial as a result of that profound psychic shock. The solution is a proper training of the child, conditioning it not to consider itself the center of a world where no invaders may share its throne. In the first case, the remedy is obviously the one suggested (tradition says) by a subnormal brother of Thomas Jefferson, who, when complaint was made that the last rows of corn were always poor,

suggested that there be no last rows! That is to say, the first child who is born in poor economic and social circumstances should not have been born or conceived at all, until those circumstances improved—and in many cases would not have been, were contraceptive information as freely available as it should be.

We hear often, on the other hand, of famous men who were the last of large families—like the celebrated Mason L. Weems, biographer of Washington, who was the youngest of 19, but statistics show us that a child born of so elderly a mother and father is more likely to be an imbecile than a celebrity. We must remember also that in the eighteenth and early nineteenth centuries people married when hardly past childhood, a woman could easily have her twentieth child—if constant maternity had not killed her—before she was forty. It is the children of mothers almost at the climacteric who are most likely to be very poor specimens indeed. Nowadays the smaller family is smaller because it is more intelligent—too intelligent to be a large one. The effect works in a circle, the more intelligent the family (and usually concomitantly the higher its economic standard), the fewer the children, therefore, the fewer the children, the more intelligent they are likely to be.

Even if Thurstone and Jenkins, and other authorities from whom they quote, do not agree with Redfield and Kendrick in calling for a ban on reproduction until complete or late maturity in the parents, they do show very plainly that avoidance of parenthood among the immature and the elderly, and reasonable spacing of children (from three to four years apart) provide the optimum conditions for the production of healthy, mentally normal or superior offspring.

## Birth Control for China

By FANG FU-AN

**W**HY ARE MILLIONS of people in China dying in one way or another, because of economic pressure? Why have we this enormous number of unemployed? If we try to get to the root of the matter, we shall find that the fundamental cause lies in the fact that China is overpopulated. Its population has reached the saturation point under the old economic and industrial

regime, the struggle for existence has become a very real thing. The tradition of encouraging large-sized families is still prevalent, and propagation among these four million people is more rapid than in any other country, with the exception of Japan. This suggests the validity of the Malthusian theory, which, of course, has been sternly denounced. But with extreme overpopula-

tion in China, it seems better to support this theory rather than the teaching of Mencius which says that "the most unfilial are those without children"—a saying that has played a significant part in accelerating the consistent increase of population in China

In a recent article written by Mr D K Lieu in *The China Critic* of March 6th, 1930, Mr Lieu pointed out that the only possible way to solve the situation was by industrial development. On the same day, *The North China Daily News* printed an account of the unemployment situation in the United States. Is industrialization the solution of unemployment, or rather of the population problem? True, industry in China is not developed. But even though it becomes as developed as it is in the United States, we shall still face the same problem, since the development of industry and the development of machinery to take the place of workers are going on hand in hand. There will still not be enough work for the 500 million souls living in China. *It is because of this over-supply of population in China, that labor is cheap, competition is keen, and the standard of living can never be raised.* At present, as estimated, approximately 70% of the entire population of China is living under the poverty line. These people are making a lively barely sufficient to keep body and soul together.

The BIRTH CONTROL REVIEW, U S A, September, 1929, quotes a resolution adopted by the Sixth International Neo-Malthusian and Birth Control Conference urging the labor movements of the world "(1) to become familiar with the economic and social advantages of the wise application of birth control principles (2) to demand the alteration of existing laws so as to permit the sane dissemination of birth control information, to the end that the poor may obtain what is already available to the wealthy, and (3) to assume the lead in inducing the workers to take an active part in the propaganda and education work of the organized birth control movements in their respective countries." The REVIEW continues "This seems simple and understandable. The facts seem self evident, the conclusions obvious. But practically nothing has been done by organized labor along the lines urged by the Congress over four years ago."

It may well be that no one of the labor class in China has even thought of the importance of this statement. During this period of reconstruction,

may I venture to make the following suggestions as to the measures that should be taken?

(1) a course in eugenics should be conducted by the government, and men and women should be examined by doctors to determine whether they are fit physically and mentally to be progenitors of our future citizens. This may be done by the Health Bureau of every city or town.

(2) Social inspectors should be appointed to ascertain the economic fitness of each couple, and to advise them not to have too many children in the event of financial difficulties. This may be carried out by the Social Bureau of every city.

(3) The Health Bureau of every city should open a number of clinics to teach the common people methods of birth control.

(4) In connection with education, such as mass education for adults in the villages and urban centers, lectures concerning the need for birth control for China should be delivered, and the methods taught.

It is to be hoped that the leaders of Chinese labor unions will take note of these suggestions and commit themselves to the principles involved, that they will ask their fellow workers to practice it, not just to hear and talk about it, so that the whole race in general and the toiling masses in particular may be benefited.

A birth control league has recently been established under the leadership of Dr F C Yen. The work of this league will no doubt relieve, to a great extent, the present sufferings of the people.

—*Excerpt from CHINESE LABOR, AN ECONOMIC AND STATISTICAL SURVEY OF LABOR CONDITIONS AND LABOR MOVEMENTS IN CHINA*  
Published by Kelly and Walsh, Ltd, Shanghai, 1931



*In China both the labor movement and the birth control movement are yet in their infancy, but probably more than any place in the world the labor movement must take account of the problem of overpopulation. Here as in India there are millions of underfed unorganized workers who are in constant conflict with the few that are organized. Here, too, the problem of child-labor is most severe, and unless there can be some restriction of numbers it is difficult to see how there can be any great improvement in their standard of living.*

MAXWELL S STEWART



# News from the Pennsylvania Federation

## COUNTY MEDICAL SOCIETY DISCUSSES BIRTH CONTROL

AT THE October 28th monthly meeting of the Philadelphia County Medical Society, Dr Robert L Dickinson, secretary of the National Committee on Maternal Health, spoke on *Conception Control, A Summary of Foreign and American Experience*. The PHILADELPHIA RECORD of October 29th began its account of the meeting as follows

The Philadelphia County Medical Society broke a precedent last night

It discussed birth control

For the first time in the history of the organization, the highly controversial subject was argued by leading members of the society

The meeting attracted more physicians, physician's wives, internes, nurses, student doctors and laymen than had any other session ever held in the old mansion at 21st and Spruce Streets

The physicians had to present their membership cards. Their physician's certificates had to be identified by clerks and then were stared at suspiciously. At that, over 700 wedged themselves into a room intended for half that number.

At the outset a few physicians raised vigorous objection to the meeting, protesting against its regularity and legality. Dr Jay F Schamberg, the president of the Society, contended that the meeting was legal and regular, and announced that the program would be presented. He thereupon introduced Dr Dickinson, who spoke for forty minutes covering the historical background of the subject and general considerations, and also gave a lantern slide demonstration of the various methods of contraception.

Then followed discussions by Dr Barton Cooke Hirst, Dr A Lovett Dewees, Dr Stuart Mudd, Dr Edmund B Piper, Dr P Brooke Bland and Dr Frank C Hammond. Dr John M Fisher (not on the program) at his own request presented some general arguments against limitation of offspring. Dr Dewees showed a film, still incomplete, which is being made at the Maternal Health Center of Philadelphia, designed to teach the technic of birth control.

At the conclusion of the scientific session, one of the most ardent opponents of contraception arose to present a resolution, but the president

called his attention to the fact that a matter of business could be introduced only by unanimous consent. The meeting by a chorus of "no's" dramatically refused to hear the resolution and then adjourned.

## WORK IN BETHLEHEM

*The Bethlehem Branch of the Pennsylvania Birth Control Federation reports the opening of a Maternal Health Clinic at 26 East 3rd Street, Bethlehem. The following quotation from a recent letter of Mrs George Lord de Schweemutz, Chairman, indicates the spirit of this active organization.*

The Maternal Health Center is across from the public market, frequented by the foreign born and all of us, and next door to Sears Roebuck. What more could the heart desire?

As contributors to the Community Chest, we can properly enquire of the social workers, as to the health and number of children of families supported by public funds. These mothers, when called on by one of us, are usually glad to make an appointment to go to the clinic. On their second trip they often bring a sister or friend. After our monthly meetings, which are always well reported in the newspaper (one of the editors is a member of our Board of Directors) we always have telephone calls of inquiry. Sometimes women after reading about birth control in the paper ask a social worker or visiting nurse for further information. We receive every possible assistance from the social workers.

We run around with baby koops, clothing, cribs, and whatever is needed. If we were not doing birth control work we should probably be regular visitors for the Family Welfare Society, or the Mothers Assistance Fund or the Day Nursery.

Through one of our Board members, a physician, the hospital drug clerk is buying our clinic supplies at hospital rates. The hospital loaned us an enamel top table, a surgeon's widow gave us the sterilizer box out of an old gas sterilizer, which fits on an electric grill, and we bought an antique examining chair. We are getting out an appeal for funds, seven hundred. We really never stop. Of the eighty patients, nine have paid from fifty cents to three dollars. The others cannot pay at all. So we have to think a great deal about money.

We began by getting ten dollars from our Mayor, and the approval of the Superintendent of Police. Our Jewish landlord made friends on our behalf with the Assistant District Attorney. Our clinic is above his office and we trust he will send us flowers on our opening day.

*The following excerpts from the report of Mrs. Oliver W. Holton, Secretary and Treasurer, read at the meeting of the Bethlehem Branch on October 29th, show clearly the importance of birth control work at the present time.*

The average wage of our 86 finished cases is \$17.45 a week. Over three-fourths of the husbands are out of steady work or unemployed. Our average family consists of six members.

One mother has thirteen children. She does day work, cleaning or washing, the husband is unemployed.

One mother, age 22, has kidney trouble. She has one baby, there is tuberculosis on both sides of the family, the husband is earning \$11 a week.

One mother has eleven children, husband unemployed.

One mother has five children, a tumor and gall stones, the husband is unemployed.

One mother with six children is working in the silk mill, the husband is mentally defective and unemployed.

One mother with four children. In desperation she has performed seventeen abortions during her 16 years of married life. She is now working in a store, earning \$20 a week. Husband unemployed.

Another with five children. This mother has performed nine abortions, three of them this year. She is working in a store for \$12 a week. Husband partially employed and usually intoxicated.

We have had a number of patients who refused to go to the clinic at first, but who, many months later, have phoned or sent messages to us. During this interim they have either had a miscarriage or have talked at great length with a relative or friend who is satisfied with the results of her personal experience in scientific birth control.

One of the most interesting of these is a woman with eight children. She is 32 years old and has been married 13 years. The oldest child is 13. She has two sets of twins, the older are two years, the younger seven months. (One of the babies died last week and the other has been expected to die

for several weeks.) The husband is earning \$20 a week. There is tuberculosis and cancer on both sides of the family.

The desire for birth control information has increased during the depression, due to the enforced leisure of men and greater economic pressure.

Everyone of these mothers says that they want children. It is because of this instinctive love that they do not want more than they can properly take care of. Though practically all of them are unable to express themselves, their main interest in birth control information is a desire to benefit their children. They wish above all to give their families more wholesome surroundings.

The following Board of Directors was elected to serve for one year: Mrs. O. A. Kreutzberg, President; Mrs. R. P. Linderman, Mrs. Archibald B. Johnston, Mrs. Jessica Holton, Vice-Presidents; Mrs. Ralph Hess, Treasurer; Mrs. George Lord de Schweinitz, Secretary; Mrs. George Blakeley, Mrs. W. P. Walker, Mrs. R. M. Walls, Mrs. Hannah Godshalk, T. E. Schadt, M.D., L. I. Fisher, M.D., A. S. Gabor, M.D., D. P. Walker, M.D., H. O. Rohrbach, M.D., G. L. de Schweinitz, M.D.

#### NEWS FROM ALLEGHENY COUNTY

On November 2nd, a public luncheon meeting of the Birth Control League of Allegheny County was held. There were one hundred present. Mr. Percy L. Clark, Jr. spoke on *What the United States Birth Control Clinics Are Doing*.

Since September first the speaker's bureau has been asked to provide speakers for six women's clubs in the city. We are trying to reach the smaller community organizations in the suburbs and nearby towns and have birth control given a place on their programs.

On Monday, November 16, Dr. E. Edward Moore, author of *The Case Against Birth Control*, addressed "The Hungry Club," a leading discussion group composed of business men, on *Birth Control and the Natural Law*. The club room was packed with people, many persons who came in late, remained standing during the address and discussion which followed. Dr. Moore read his address and in great part it was excerpts from his book. The questions asked and the general attitude of the audience indicated that if any present were opposed to birth control, they were in the minority.

Not one remark was made showing agreement with Dr Moore's premises or attitude

Our maternal health work is developing rapidly Since June first one hundred seventy-five patients have been accepted and advised by our physicians, an average of thirty a month Two afternoon sessions are held and as soon as our budget permits we will hold one other session One of our members, a trained social worker, is making the home visits necessary in connection with this work

A visit to six coal mining towns near Pittsburgh showed that although coal is not being mined and no other work can be obtained, babies are still being born Most of the miners and their families are living on two meals a day, breakfast composed of black coffee and bread with no butter, and supper consisting of black coffee, bread, and soup Malnutrition and lack of proper clothing are very prevalent

Our membership committee reports a gain of fifty new members since September first, which makes our total membership four hundred The goal is to add three hundred names by May first making a total of seven hundred

### OTHER NEWS

One of the outstanding meetings of November was held at the home of Dr and Mrs John L Atlee of Lancaster Representatives from the welfare organizations of Lancaster County and other leading citizens discussed ways and means of bringing birth control information to the destitute families in Lancaster County Mrs Stuart Mudd, acting chairman of the Maternal Health Committee for the Philadelphia clinics, and Mrs Allyne C Martin, executive director of the Federation, were the speakers Mrs Mary B Nelson, in charge of the Reading Clinic, also gave a report

The Pennsylvania Birth Control Federation and the Southeast Pennsylvania Birth Control League will hold their annual meeting on December 3rd at the Sylvania Hotel, Philadelphia Officers for the coming year will be elected, and committee reports presented A luncheon, under the auspices of the Southeast League, will follow, at which reports from six birth control centers, Philadelphia, Pittsburgh, Newark, Reading, Wilmington and Bethlehem-Easton will be given

*In The January Issue*

THE BIRTH CONTROL LEAGUE OF MICHIGAN

### National Organizations for Birth Control

AMERICAN BIRTH CONTROL LEAGUE  
152 Madison Avenue, New York City  
Mrs F Robertson Jones, *President*  
Alice C Boughton, Ph D, *Executive Director*

NATIONAL COMMITTEE ON MATERNAL HEALTH  
2 East 103rd Street New York City  
Robert L Dickinson, M D, *Secretary*  
Louise Stevens Bryant, Ph D, *Executive Secretary*

NATIONAL COMMITTEE ON FEDERAL LEGISLATION FOR BIRTH CONTROL  
17 West 16th Street New York City  
Mrs Margaret Sanger, *National Chairman*  
Mrs Alexander C Dick, *Secretary*

### State Leagues Affiliated with the American Birth Control League

CONNECTICUT BIRTH CONTROL LEAGUE  
79 Trumbull Street New Haven  
Dr A N Creadick, *President*  
Mrs E B Reed *Secretary*

DELAWARE BIRTH CONTROL LEAGUE  
1019 Pine Street Wilmington  
Mrs William S Bergland, *Chairman*  
Mrs George A Elliot, Jr, *Secretary*

ILLINOIS BIRTH CONTROL LEAGUE  
208 N Wabash Avenue Chicago  
Mrs Benjamin Carpenter, *President*  
Mrs Effie Jeanne Lyon, *Executive Secretary*

BIRTH CONTROL LEAGUE OF MASSACHUSETTS  
18 Joy Street Boston  
Mrs Oakes Ames, *President*  
Miss Caroline L Carter, *Executive Secretary*

MINNESOTA BIRTH CONTROL LEAGUE  
223 Walker Building Minneapolis  
Mrs G C Shafer, *President*  
Mrs H B Wilcox, *Secretary*

BIRTH CONTROL LEAGUE OF MICHIGAN  
1222 Lake Drive S E Grand Rapids Michigan  
Mrs Morton Keeney, *President*  
Mrs Frank Stone, *Secretary*

PENNSYLVANIA BIRTH CONTROL FEDERATION  
1700 Walnut Street Philadelphia  
A Lovett Dewees, M D, *President*  
Mrs Alleyne C Martin, *Executive Director*

RHODE ISLAND BIRTH CONTROL LEAGUE  
168 N Main Street Providence  
Mrs Henry Salomon, *President*  
Mrs Robert J Beede, *Secretary*

### Independent Leagues

NEW JERSEY BIRTH CONTROL LEAGUE  
808 Broad Street, Newark  
Mrs Zachariah Belcher, *President*  
Miss Henriette Hart, *Executive Secretary*

## Book Reviews

MORE ESSAYS OF LOVE AND VIRTUE, by  
Havelock Ellis *Doubleday, Doran and Co.,*  
*Garden City, N Y 1931 \$2 50*

WHEN the majority of psychologists, medical advisors and leading educators were too afraid of social pressure to face the facts of life, whatever they may have believed to be right, Havelock Ellis had already published *Little Essays* on "the art of making love and the art of being virtuous" The world is changing all the time and conditions have changed since then The first *Little Essays* were addressed to young people, "youths and girls at the period of adolescence" Even the publisher who originally commissioned the book, did not dare to print it That was ten years ago The youths and girls then addressed have grown up, and somehow many people have come to hold a different opinion about Havelock Ellis and the things he has to discuss

*More Essays of Love and Virtue* is a companion volume to the first, the author retains the old-fashioned terms of "love" and "virtue" for modern conceptions suited to a modern age, and is again concerned with the adapting of out-grown ideals to present-day use But it is addressed to an older audience It is largely concerned with the sociological problems attendant upon having children and not having children, but most of all in having the best children possible

Like William James, Havelock Ellis began as a doctor and a teacher, and like him turned to the field of psychology William James became the psychologist of scholars Havelock Ellis has become the psychologist of the ordinary reader, the layman who stood waiting for him in need His style here, as always, is convincing and clear He has digested the works of psychologists and biologists, such as Robert Briffault, Sigmund Freud and many others, has gathered statistics tirelessly from all over the world, and again has given us the fruits of his own thought and research in biology, psychology and sociology He combines the patience of a scientist with the brilliant talents of a man of letters He could have written charming essays on any subject, but having chosen a field that might have been dry or graceless, he has made it interesting and popular

He begins with a chapter dealing with the new mother in whom he confesses to feel faith, not for her formulas so much as for her lack of them He concludes "The task is difficult for any kind of mother, and the one may fail as well as the other Motherhood is an art, a rarer art than is commonly supposed But every age must deal with its own problems in its own way The new generation demands the new mother"

In *The Renovation of the Family*\* he takes up the adaptations going on in the institution of marriage, which he argues is not an institution at all, since it "rests fundamentally on biological instincts and the facts of constitutional organization" Birth control he sees as a necessity in the modern home, sees it, moreover, as already "firmly established both in principle and practise in all civilized lands and gradually becoming accepted by every class of the community It is estimated," he adds, "that at the present rate, birth control will become practically universal in our civilization within from 25 to 50 years" One of the most interesting features of this chapter are statistics on the changing institution of marriage from Soviet Russia, where the divorce rate is lower than in the United States, and where the position of the polyandric woman, in spite of her opportunities for self-development, seems to have suffered from the elevation of the monandric woman who has experienced the same opportunities

*The Function of Taboos* and *The Revelation of Obscenity* are companion chapters to some extent Taboos he sees as something fundamental in nature, a part of the discipline of living The conception of "license," the conception of "taboo," these are ever changing, but the essential conflict between them is involved in all life, civilized or otherwise Concern over obscenity he holds on the other hand to be a passing style, although "This episode has maimed the freedom of art and hampered the finest social and individual activities alike in deed and speech"

In the chapters *Control of Population* and *Eugenics* we have the real kernel of the book One could wish this book to have the mission of changing pub-

\*Printed in part under the title *Marriage—An Enduring Institution* in the BIRTH CONTROL REVIEW, June, 1931

lic opinion I should like to see it widely read in Japan, for instance, a country needing the principles and the facts of birth control more than any other nation. In Japan birth control is illegal, not on religious or ethical grounds, but out of the fanatic nationalism of the government. Japanese women marry early, are unusually prolific, give the government an excuse for territorial expansion and a dangerous pre-determined aggressive policy. Birth control is also badly needed in China where the population totals four hundred millions.

In regard to Eugenics, Havelock Ellis says "Eugenics without birth control is simply a castle in the air, a beautiful vision in the clouds, no doubt, but not to be brought to earth. Birth control—in the wide sense which includes sterilization and some day perhaps even more radical measures—is the chief instrument vouchsafed to civilized men wherewith from the infinite possibilities of brutal procreation to carve the great race of the future."

YOUNGHILL KANG

**CONTRACEPTION ITS THEORY, HISTORY AND PRACTICE**, by Marie Stopes *G. P. Putnam's Sons, New York* 1931 \$5 00

**PHYSICIAN'S MANUAL OF BIRTH CONTROL**, by Antoinette F. Konikow, M.D. *Buchholz Publishing Company, New York* 1931 \$4 00

**DR MARIE STOPES'** writings need no introduction to the American student of contraception, to many her name is synonymous with the birth control movement in England. The third edition of *Contraception*, especially adapted for American publication, is doubly interesting because of the wide publicity occasioned by the seizure of the first copy by the customs authorities, and the resultant trial before Judge John M. Woolsey of the United States District Court. This trial established a precedent for all books dealing with birth control.

This latest edition contains a most interesting history of the practice of contraception from the earliest times through to the twentieth century. There is a detailed description of all the methods now practiced in birth control, and particularly of those methods advocated in the English clinics. American physicians will not agree with some of Dr. Stopes' theories, and the clinics in this country differ in their choice of acceptable methods from some of those advocated by the author. *Con-*

*traception* is a comprehensive study of the entire birth control movement in England, however, and should interest all students of the subject.

Dr. Konikow's manual is an interesting document of her own very wide experience with contraceptive methods. There is a clear, complete evaluation of the commonly advocated methods in this country, and a detailed description and discussion of the technique used in the American clinics. As one of the pioneer physicians interested in birth control, Dr. Konikow speaks with authority and a keen appreciation of the many perplexities and problems which face the physician in birth control clinics. This is one of the most helpful handbooks available and should be read by all physicians doing contraceptive work.

ERIC M. MATSNER, M.D.

**THEORIES OF POPULATION FROM RALEIGH TO ARTHUR YOUNG**, by James Bonar Greenberg, Inc., *New York* (Allen & Unwin, London) 1931 \$2 00

**THE PRESENT** volume consists mainly of lectures delivered at University College, London, two years ago. Professor Bonar discusses the population and vital statistical theories of Raleigh, Bacon, Hobbes, Harrington, Graunt, Petty, Halley (Derham), Süssmilch, Hume, Wallace, Price, and Arthur Young. What the reader is given, in short, is a running survey of English theory of pre-Malthusian vintage, Süssmilch being the only non-English writer considered at length. While each chapter is well annotated, the writer adds nothing particularly new to what is known of his subjects. Nor does he develop what seems to the reviewer to be a likely thesis, namely, that the population doctrine of a period is but a function of the socio-economic milieu in which it originated.

As Professor Bonar implies, he is dealing with pre-economic theories of population. For until the dissertations of Malthus and Ricardo made population theory a cornerstone of economic theory, population and demographic theory cannot be said to have been integrated with economic theory. We find Raleigh emphasizing the race, but not to the utter exclusion of the individual. We note that for long the processes of city growth escaped understanding. We see Graunt, the father of modern vital statistics, discovering what today is loosely called the law of large numbers. We observe the slow growth of the mortality table and the increasing awareness of the necessity of collecting

adequate and accurate statistical data. We hear again the arguments concerning populousness in ancient and modern times. We come finally to the problem that inspired Malthus' essay, "What are the laws of natural increase in Utopia?"

How may one characterize the respective population problems emphasized in the seventeenth, eighteenth, and present centuries? Professor Bonar replies in this fashion: "We might say that the problem of population was to the seventeenth century a problem of *room*, to the eighteenth, of *food*, and *we* now take it (provisionally) as a problem of the *standard of living*, involving the other two essentials, but including the larger conditions of civilized life."

JOSSEPH J. SPENGLER

**FIFTY YEARS OF FREETHOUGHT**, by George Macdonald. Two Volumes. *The Truth Seeker Company, New York* 1931 \$5 00

**THIS** is the story of a famous, well-written, well-produced journal, the *Truth Seeker*, the unofficial organ of secularism in the United States. Heywood Brown (in *Roundsman of the Lord*) says its pages "have burned with appeals for the principles of American liberty." These two presentable volumes justify their publication. Mr. Macdonald knows the art of readability; he tells an interesting story of interesting personalities. The *Truth Seeker* has been the friend of many good causes, including that of birth control.

Here we have the story (in part) of Emma Goldman, Dr. Ben Reitman, Van K. Allison and many other early fighters for birth control. If the history of Margaret Sanger and most of the other pioneers of our movement are either ignored or only fragmentarily alluded to, it is because Mr. Macdonald is writing primarily for the secularist public about the anti-religious heroes and heroines of the past fifty years. As such his history makes an indispensable record.

These fifty years have seen the birth control movement survive the enmity of most of the Christian churches. Outside the Catholic opposition, the cause has won the friendliness of most parties and sects. To the pioneers will always belong our gratitude and appreciation. One of these was Robert G. Ingersoll. Perhaps the finest thing in these volumes is the quotation from Ingersoll's last public oration. He was advocating birth control from the woman's point of view. According to the *Truth*

*Seeker* this address "was too advanced for the Free Religionists who greeted the speaker much as he might have expected to be received by an assemblage of backwoods preachers." The offending words were "Science must make woman the owner, the mistress of herself. Science, the only possible savior of mankind, must put it in the power of woman to decide for herself whether she will or will not become a mother."

GEORGE BEDBOROUGH

## Books Received

**THE SCIENTIFIC OUTLOOK**, by Bertrand Russell. W. W. Norton, New York \$3 00

**A THOUSAND MARRIAGES**, A MEDICAL STUDY OF SEX ADJUSTMENT, by Robert Latou Dickinson and Lura Beam. Introduction by Havelock Ellis. Published by Williams & Wilkins Co., Baltimore, for The National Committee on Maternal Health \$5 00

**SORRY BUT YOU'RE WRONG ABOUT IT**, by Albert Edward Wiggam. Bobbs Merrill Co., New York \$3 00

**SEX HOSTILITY IN MARRIAGE**, by Theodore H. Van De Velde, M.D., Cowie-Friede, New York \$7 50

**THE COST OF ENGLISH MORALS**, by Janet Chance. Noel Douglas, London 5s

**A RITUAL FOR MARRIED LOVERS**, by Jules Guyot. Translated by Gertrude Minturn Pinchot. Published by Waverly Press, Inc., Baltimore, for the National Committee on Maternal Health \$1 00

**SANE SEX LIFE AND SANE SEX LIVING**, by H. W. Long, M.D., Eugenics Publishing Co., New York \$2 00

A new edition of this well known and valuable book, formerly \$5

## Pamphlets Received

**THE TRUTH ABOUT BIRTH CONTROL**, by Norman E. Himes. The John Day Co., New York 25 cents

**ADULT SEX HYGIENE AND FAMILY CASE WORK**, by Harry L. Lurie, assisted by Minnie J. Rosenthal and Eva Markman Weber. Reprinted from *Hospital Social Service Magazine*, November, 1931. National Committee on Maternal Health.

# News Notes

**CONNECTICUT** The Connecticut League of Women Voters, at the closing session of its state convention at Waterbury on November 19th, voted to delete the study of birth control from the program of the Committee on Social Hygiene. The vote stood 67 to 49, and followed a spirited discussion during which Mrs. Frank P. McEvoy announced that as a Catholic, she would resign from the league if it voted to study birth control. Mrs. Charlotte Perkins Gilman, well-known author, protested that the proposal was for study only, not for approval of birth control. Officials pointed out that the action does not indicate a disapproval of birth control, but desire to maintain harmony in the face of "the strong emotions being loosed in the discussion from the floor."

The Naugatuck Birth Control League, meeting in the Methodist Episcopal church on November 13th, heard Dr. Margaret Tyler speak on *Birth Control as a Doctor Sees It*. Dr. Tyler outlined the benefits to health accruing from birth control, and urged Connecticut voters to rally in support of the amendment sponsored by the Connecticut League.

**DELAWARE** Mrs. Elmer O. Kraemer, of the Delaware Birth Control League, spoke at a meeting of the Wilmington Colored Branch of the Y W C A on October 22nd.

**MICHIGAN** On November 12th Mrs. Le Moyne Snyder of Lansing gave a tea for a group of prominent women of that city and for Mrs. Morton Keeney, president of the Birth Control League of Michigan. A local committee was organized, with Mrs. Guy Schumway as chairman. The following day, a luncheon, open to the public, was given at the Y W C A. Elizabeth Grew Bacon, long active in the birth control movement, spoke on *How to Organize a Birth Control Clinic*.

The monthly directors' meeting of the state league was held on November 18th at the Women's City Club of Detroit. An open luncheon followed, at which Miss Elsie Wulkop and Mrs. Mayer B. Sulzberger spoke on *Opening Birth Control Clinics*.

Further activities include Miss Wulkop's address at the Babies Welfare Guild of Grand Rapids on November 23rd. A state conference is to be

held in Detroit on December 11th, initiating a month's membership drive.

**MISSOURI** The October meeting of the Lutheran Ministerial Association of Greater Kansas City, held at the Lutheran Hospital, discussed *The Problem of Birth Control*. Members of the hospital staff gave the medical point of view.

**NEW JERSEY** Mrs. Sanger spoke to a large audience at the People's Institute Forum of Newark on November 18th. Dr. Clarence C. Little will address a luncheon meeting of the New Jersey Birth Control League at Trenton, December 3rd, on *Biology, Birth Control and Unemployment*.

**NEW YORK** The Brooklyn section of the National Council of Jewish Women, meeting on October 27th, endorsed the activity to remove legal restrictions from birth control and approved of "sending birth control information through the mails by properly authorized agencies."

Recent meetings arranged by the American Birth Control League:

Vagabond's Club, Nov. 29, Dr. Isabel Beck  
Saturday Nighters, Nov. 28, Guy Irving Burch  
Community Forum of B'klyn, Nov. 29, Dr. Dorothy Bocker

**OHIO** The Citizen's Committee on Maternal Health of Cincinnati held its first annual meeting on November 17th. The Right Reverend Henry Wise Hobson, Bishop-coadjutor of the Episcopal diocese of Southern Ohio, presided, and Dr. George W. Kosmak, Editor of the *American Journal of Obstetrics and Gynecology*, member of the National Committee on Maternal Health, was the principal speaker. His topic was *The Problem of Maternal Mortality—Its Relation to the Community and the Medical Profession*.

Dr. Elizabeth Campbell, Chairman of the Committee on Maternal Health of the Academy of Medicine, opened the meeting. Dr. William E. Brown, professor of preventive medicine at the College of Medicine of the University of Cincinnati, gave a summary of the work of the Committee for

the past two years, its achievements, present status and future plans. Introducing Dr. Kosmack, the Reverend Hobson said:

We have come here today because of our common interest in a great cause. It is the two-fold purpose of religion to provide for the welfare, happiness and health of men, women and children, and to give every chance to the next generation to develop qualities of leadership, so that the world will be a better place in which to live. The whole subject is one which the medical profession must meet, and we should back up the medical profession in this work.

Over 400 guests attended the meeting.

**TEXAS** The announcement that Margaret Sanger would speak on *The Need for Birth Control in America* at the first meeting of the Open Forum of Houston, precipitated a lively discussion in the local press. *The Houston Post Dispatch* wrote:

The trouble with the Open Forum in selecting its speakers is that it has no principles to guide it in what is useful or harmful to "human welfare." The Forum wants to "stimulate thought." Food for the mind is like food for the stomach. Some foods stimulate, aid digestion and nourish. Some give you a bellyache, some send you to the hospital, some put you in the grave. Some food for the mind stimulates wholesome thought, some sends you to the penitentiary, some to the brothel, some to the electric chair. Take your choice. This is a free country.

On the other side, the *Houston Texas Press* commented:

There can be no Open Forum if it is not free and unrestricted for the discussion of any subject that is before the public. The matter of birth control is being discussed today in newspapers, magazines and pamphlets, and by lecturers and lawmakers.

Over 2500 people turned out to hear Mrs. Sanger on November 14th.

#### ENGLAND

**ONE MORE PROOF**, and a striking one, that birth control has finally established itself in England is found in the news of a course of three lectures on *Contraceptive Technique* given in November at the Royal Institute of Public Health, London, of which King George is a patron. Following the lectures by Professor Dr. Leunbach, Sir Arbuthnot Lane, and Dr. Marie Stopes, dem-

onstrations, shown to physicians only, were held at the Clinic for Constructive Birth Control, by Dr. M. B. Bayly, Dr. Jane L. Hawthorne, and Dr. Marie Stopes. The British medical world is now keenly alive to the value of such efforts as the Clinic for Constructive Birth Control has initiated.

The National Birth Control Association (formerly the National Birth Control Council) has been in existence since September 1930. The work of co-ordinating the movement in England has made good progress, for one society has handed over its funds and functions to the Association, and last July the Birth Control Investigation Committee amalgamated with it. This linking up of the administrative and research sides of the work should prove of great value to both.

Sir Thomas Horder, Bart., one of England's foremost physicians, has accepted the office of president of the Association and will take the Chair at the first Annual Meeting on November 23rd when Professor Harold Laski will speak.

Work in connection with the Ministry of Health Memorandum is proceeding steadily and nearly 40 Local Authorities have authorized some provision of birth control advice within the terms of the Memorandum. An organizer for the North of England has been appointed and a campaign in South Wales will be opened shortly. These two areas are among the most seriously affected by unemployment. Present economic distress is influencing public opinion in many directions in favor of contraceptive advice but the necessary funds are difficult to raise at the present time.

#### ITALY

**THE FASCIST** Government, continuing its policy of encouraging the biggest possible families, issued a proclamation for a competition open to residents of Rome, for the largest families raised between January 1932 and January 1937.

#### NEW ZEALAND

**SOME** form of birth control is very commonly practiced in New Zealand at present. Among the upper classes contraceptive measures of some sort are used, in other classes, the abortionists are busy. Regarding the legal situation, there is a current belief that every package of contraceptive material imported must contain a "dud" to satisfy the law, but there may be no legal foundation for this idea.



Public opinion condones the use of contraceptives, and private patients frequently ask advice. Many people practice some method without advice, often with injurious effects. Procured abortion is very common, though the legal penalty, if the crime is proven, is heavy.

The National Council of Women wishes to investigate the question, and study the work of clinics, with a view to deciding whether or not to urge the government to establish clinics in New Zealand. Clinics are needed partly to limit population, in view of the increase in unemployment, partly to attempts to limit the propagation of the mentally deficient, and partly to lower the number of abortions.

*Contributed by Dr. Hulda Northcroft*

### A FINE CIRCULAR

THE New York City Committee of the American Birth Control League has issued a circular called *A Message to Mothers*, to acquaint women in various neighborhoods with the Mothers Health Bureaus established by the Committee in four settlement houses. The circular is brought out in four versions, English-Italian, English-Yiddish, English-Greek, English-Spanish. Under the title *A MESSAGE TO MOTHERS* these cuts tell their own story.



*There is enough food for this baby*



*There is not enough food for this last little baby*

The message reads

#### *Do You Know That*

- 1 You must be healthy to have healthy children
- 2 You must have enough time between the births of your children to recover your strength
- 3 You should not have more children than you can feed

- 4 You can be shown a safe simple way not to have children when you should not have them
- 5 It is not an operation
- 6 It is not an abortion
- 7 To obtain this information go to a Mothers' Health Bureau in a settlement house where the Doctor in charge will give you a careful examination and the proper instruction

Mrs. Carol K. Nash, secretary of the Committee, sends the following report of recent activities:

"A luncheon for social workers was held at Sloane House Y M C A on November 17th. Some of the organizations represented were the Association for Improving the Condition of the Poor, the Charity Organization Society, the Children's Aid Society, the Visiting Nurses Association, the Salvation Army, Christ Church House, the West Side Day Nursery, and the Eisman Day Nursery.

"While some of these workers came as individuals and not as official representatives of their organizations, there can be little doubt that official approval of birth control is only withheld because of the fear of antagonizing a few of the financial supporters of these societies. The freedom with which contraception was discussed, and the open avowal that social workers were sending their clients to birth control clinics were in marked contrast to the cautious expressions of a year ago."

## For Christmas

*Give a subscription to the BIRTH CONTROL REVIEW to your local library, your college library, your club reading room, your friend and yourself*

*Included in dues of \$3 or over to the American Birth Control League, or separately, \$2 per year, \$3.50 for two years. Send list of names for sample copies. Send for leaflets on the work of the League.*

# Letters from Readers

## REMEMBER THE PIONEERS

### TO THE EDITOR

Professor Hankins' review of Mrs Sanger's book in your November issue gives an excellent analysis of the conditions under which social movements have their inception Dr Goldwater's letter in the same number pays a well deserved tribute to Dr William J Robinson's pioneer work for birth control long before Mrs Sanger entered the field

These two contributions have stirred memories of the early days of the movement In the summer of 1907 I had long conversations in London with the late Dr Drysdale of the Malthusian League and with Mr John M Robertson, M P, about forming a society in America for the study of population problems and the advocacy of birth control For various reasons this plan was not carried out Prior to 1907 I was already acquainted with numerous persons in radical, scientific and academic circles who were studying these questions and some of whom were advocating contraceptive measures In the spring of 1916 appeared my *Poverty and Social Progress* in which are several chapters on the increase of population and its artificial limitation Probably owing to this book I was invited to speak at a meeting in Boston in July, 1916, organized to protest against the conviction and sentencing to three years in prison of Van Allen who had advocated birth control in his own paper A woman physician of Boston and Mrs Sanger were the other speakers and Stuart Chase was the Chairman

No one wants to detract from whatever credit Mrs Sanger deserves for her work as an agitator But the birth control movement is largely due to the work of the radicals, scientists and writers referred to collectively above, and to the social conditions which Professor Hankins describes Mrs Sanger has, so far as I am aware, made no scientific contribution to the subject Her prominence is due in considerable part to the strong emotional appeal she makes, especially to women In justice to the other workers in this field, more should be heard of their less advertized work

MAURICE PARMELEE

New York City

## A DIFFERENT VIEWPOINT

### TO THE EDITOR

It is to be regretted that Professor Hankin's criticism of Mrs Margaret Sanger's recent book *My Fight for Birth Control* was not constructive rather than destructive

Who but Mrs Sanger was the pioneer of the birth control movement in these United States I have read Professor Hankin's review not once, but several times, and the conviction grows upon me that the rivalries existing in the movement, as referred to by Professor Hankins, have colored his criticism Mrs Margaret Sanger would be the last person in the world to deny the help given her in one form or another by many people, but there can be no question that the movement has attained its present proportions and its respectability because of Mrs Sanger's great pioneering effort

I know nothing of Professor Hankins I know nothing of what constitutes the making of good books, so that I am not a judge as to whether *My Fight for Birth Control* is good autobiography or history, but I feel that Professor Hankins' review is a labored attempt to take glory from where glory is due

Recently the American Woman's Association granted a medal to Mrs Sanger for her work, and in doing so described her as a "pioneer of pioneers" and stated "that she in a sense stands alone" In making such a statement the American Woman's Association did not belittle others by failing to mention their help, but recognized the greatness of Mrs Sanger as this "pioneer of pioneers" Nor did the editor of the New York *Herald-Tribune* in a recent editorial, commenting on this award, with the headline "She Deserves It" fail to give Mrs Sanger full credit for founding the Birth Control League I should say that in doing this, according to Professor Hankins, the *Herald-Tribune* had run grave risk of falling under the same indictment that "opportunity for noblesse oblige had been badly bungled," because others who unquestionably have given unsparingly of their help were not mentioned I am convinced that from first to last "these others" feel that, among all those who have worked for the cause, Mrs Sanger stands abso-

lutely alone, and that whatever credit she receives she deserves

I feel very strongly that the writing of such unhelpful criticism is to be deplored

MRS J BISHOP VANDEVER

*Kew Gardens, Long Island*

FRENCH BIRTH CONTROL PRACTICE UNCHANGED  
TO THE EDITOR

Mr Quitman has, no doubt, good grounds for his conclusions as to the effects of the anti-birth control laws in France, as described in the October issue, but I, who have been living and working among the French since 1915, do not agree with him. The wide-spread practice of rigorously limiting the family, brought about principally by the law of inheritance in the *Code Napoleon*, had been in existence for three generations before this law came into being. As far as I am able to judge, the old methods of family limitation, good and bad, have continued in use with little change.

There has been greater secrecy, perhaps, though there had always been the greatest "discretion," but the chief result of the anti-birth control law has been the stifling of discussion and sporadic prosecutions. As Mr Quitman rightly says, the law has been practically inoperative. But he charges against it and against "the undesirable sex practices," which, he thinks, are more prevalent in France than elsewhere, a change in the French attitude, a "disagreeableness," he calls it.

There is a change, but it is due, I believe, to the atmosphere of suspicion bred by the war.

S GREEN

*Paris, France*

DANGEROUS DAYS

TO THE EDITOR

The letter by Dr Goldwater in your November issue has attracted my attention. In 1907—24 years ago—I well remember the editorials published by Dr Robinson in *The Medical Critic and Guide*. I was personally acquainted with the late Anthony Comstock, who was at the head of the Society for the Suppression of Vice, and I learned that Mr Comstock took grave exception to the utterances of Dr Robinson, in fact threatened to have the publication excluded from the mails.

As I had known Dr Robinson for years, I volunteered to introduce him to Mr Comstock, and went with him to the latter's office. The scientific

genuineness and disinterestedness of Dr Robinson's efforts were made clear, and the proposed ban was not enforced.

Those were indeed dangerous days, and those who are not late comers in the movement, but are familiar with it from its birth, which coincides with the birth of this century, know that it was Dr Robinson who first tilled the ground and bore the brunt of the battle.

CHARLES ROOME PARMELE

*New York City*

A WELCOME CORRECTION

TO THE EDITOR

It is my belief that the BIRTH CONTROL REVIEW is one of the most valuable periodicals we have today, and it is not therefore with any spirit of criticism of the journal as a whole that I write this letter. It is rather with the view that the cause, which will unquestionably win out completely in a few more years, will be best served by supplying the public with authentic and absolutely reliable facts.

In the September, 1931, issue there appeared an article by a college undergraduate, which on the whole was a most excellent one, showing that the college student of today is thinking clearly on this important sociological question. But in this article there is one statement which is the most rank misstatement of actual fact that I have seen in a long time. On page 254 this sentence appears: "*Syphilis is inherited and is the cause of ninety percent of the insanity*" and fifty percent of the stillbirths in this country" (italics mine). I know of no statistics that are available from any reliable source which would agree with this statement, and therefore I believe the erroneous impression should be corrected.

While it is definitely recognized that syphilis is a considerable factor as a cause of mental disease, nevertheless the actual statistics show that it causes only about 1/20th of the total amount of mental disease—certainly not 9/10th, as stated in the article referred to above. Data taken from the United States Department of Commerce report on mental disease shows that in 1922 the cases of mental disorder in institutions throughout the country, which were found to be due to syphilis, comprised only 5.5% of the total number of cases. In 1927 this figure had decreased to 4.9%. In full justification it should be mentioned that the actual

figures should probably be a little higher than this, since the figures for the State of New York where facilities for accurate diagnosis are doubtless more developed than for the country as a whole, run a little higher. In the year 1922, for example, 79% of the cases admitted to state hospitals were found to be due to syphilis. But even with this latter figure it will be noted that syphilis as a cause of insanity is a relatively minor factor as compared with some of the other groupings of causes.

THEODORE R. ROBIE, M D  
Upper Montclair, N J

#### THE SANGER PETITION TO PRESIDENT WILSON

##### TO THE EDITOR

At the recent dinner given to Mr H G Wells, some mention was made of the petition which Dr Marie C Stopes prepared as a result of the friendship then formed between these strenuous fighters for birth control and its free propaganda. Mrs Sanger was then in England, seeking the aid of European sympathizers. I think your readers will be interested to read the petition.

GEORGE BEDBOROUGH

September, 1915

To The President of the United States,  
White House,  
Washington, D C

Sir,

We understand that Mrs Margaret Sanger is in danger of criminal prosecution for circulating a pamphlet on birth problems. We, therefore, beg to draw your attention to the fact that such work as that of Mrs Sangers receive appreciation and circulation in every civilised country except the United States of America, where it is still counted as a criminal offence.

We in England passed, a generation ago, through the phase of prohibiting the expressions of serious and disinterested opinion on a subject of such grave importance to humanity, and in our view to suppress any such treatment of vital subjects is detrimental to human progress.

Hence, not only for the benefit of Mrs Sanger, but of humanity, we respectfully beg you to exert your powerful influence in the interests of free speech and the betterment of the race.

We beg to remain, Sir,  
Your humble servants,

(Signed by) Percy Ames, LL D, F S A, Sec, Roy  
Soc. Liter, London  
William Archer, Dramatic Critic and  
Author

Lena Ashwell, Actress Manager  
Arnold Bennett, Author and Dramatist  
Edward Carpenter, Author of "Towards Democracy," etc  
Aylmer Maude, Author of "Life of Tolstoy"  
Gilbert Murray, M A, Oxford, LL D  
Glasgow, D Litt, Prof Greek, Oxford  
Marie C Stopes, D Sc, Ph D, Fellow  
and Lecturer, U Coll, London  
H G Wells, M Sc, J P, Novelist

#### NO APOLOGY NEEDED

##### TO THE EDITOR

May I register my approval of *Marriage a la Mode*, which appeared in your October issue? It is a daring speculation, questioning the most acute and widespread traditional dogmatic pattern. Calverton is asking that intelligence, morals and conduct be studied along with structure, function and environment. I hope that science will go on advancing until we shall have a world in which people endeavor to deal only with facts, all the facts and nothing but the facts.

The REVIEW should champion all fearless kinds of thought without apologizing for a point of argument as "provocative."

BENJAMIN BIRNBAUM

New York City

#### DR LIBER, SPOKESMAN FOR BIRTH CONTROL

##### TO THE EDITOR

Seeing in your last issue a discussion about the more modern pioneers of the birth control movement in America, it occurs to me that one of the staunchest, most indefatigable, if modest, birth control teachers has apparently been forgotten by your contributors.

Do you know who has constantly, for the last twenty-seven years, spread our idea and our methods among the American, foreign-born Yiddish-speaking Jews? Who has spoken to them, written for them, distributed to them hundreds of thousands of pamphlets, travelled all over the United States and Canada, addressing huge crowds of Jews on this question? Dr B Liber, whose name should be remembered by some of your readers as a contributor to the REVIEW, and even to the old *Woman Rebel*.

BETTY GOLDBERG

New York City

# No Cause for Alarm

AN ANSWER TO DR DUBLIN

By GUY IRVING BURCH

IN HIS ARTICLE *Birth Control What It Is Doing to America's Population*, in the November issue of *The Forum* magazine, Dr Louis I Dublin strikes a pessimistic note

He begins by telling us that the decline in the birth rate has set in motion forces which are bound, in the next generation or two, to produce serious national and international consequences, which may prove potent enough to determine the future peace and prosperity of mankind He tells us that intelligent people are becoming concerned

As the *impression* produced upon the reader seems to be of equal, if not greater consequence, than the *facts* brought forward and the *assertions* justified, there is need for the psychological treatment of all scientific manuscripts

Beginning with the assumption that "in the last analysis, numbers will count," Dr Dublin naturally believes that birth control and immigration restriction are bad in themselves This is practically the Roman Catholic attitude toward population control Yet in many of his articles mere pressure of facts has forced Dr Dublin to speak favorably of birth control and its consequent effect on the welfare of humanity There are many statements which might even lead one to believe that Dr Dublin approved of birth control on a large scale Nevertheless, from time to time he thoroughly condemns it through implication, especially by the phraseology employed

In the *Forum* article after creating the impression that birth control through decreasing the birth rate is bound to leave serious consequences, Dr Dublin tells us that the "new tendencies are especially marked in America It is now clear that the common expectation of an exceedingly large population in the future—one consistent with the wide area and the enormous natural resources of the United States—will not be realized"

Would Dr Dublin have us as crowded as European countries which he has repeatedly said are overpopulated? He has said that population pressure was the fundamental cause of the World War, and that it is almost certain to make other wars inevitable Moreover, there is no way of knowing

whether this country will or will not have the exceedingly large population that Dr Dublin seems to recommend If Dr Dublin misses the count of the next few censuses as far as he did the 1930 census count his predictions of future population growth will go wide of the mark To predict population growth one must predict what the economic and social conditions, which are the real controls of population growth, will be This cannot possibly be done with certainty more than 10 years in advance But Dr Dublin seems to base his predictions on age groups and the present trends of vital statistics, rather than economic and social conditions, notwithstanding the fact that the latter factors are infinitely more important than a shift of a few per cent in the age groups

## CHANGES IN AGE GROUPS AN ADVANTAGE

Of course, it may be argued that a "favorable" reproductive age group, which is also a "favorable" middle age group, may produce favorable economic and social conditions, and visa versa It is not that we need more potential fathers and mothers, because we are not using one-fourth of the reproductive capacity we now have We don't need a lot of unskilled labors, because already the invention of labor saving devices is throwing millions out of employment But the reproductive or middle age groups will change but slightly anyway in the population of the future The age group under 20 years will decrease about 25% and the age group over 50 years will increase about 100% This should be a further advantage because certainly persons over 50 years old are of much more value to the community than children under 20 years This advantage will increase when child labor is done away with and more children complete their education

After telling us that this country is not likely to grow much larger (which no one can predict), Dr Dublin connects liberty and prosperity with large numbers in a most astonishing manner

"We are evidently not destined to become the great reservoir of humanity where liberty and prosperity are to reside side by side"

What has a great reservoir of humanity to do with liberty and prosperity? China and India are not such good examples

"In the first seventy years of our national history, the population increased eightfold," continues Dr Dublin "But since then, as in other civilized countries, a new way of life has set in. Various social forces were at work to weaken the family bond and to reduce the number of children"

Dr Dublin states that the birth rate of this country has fallen about 25% in 15 years, and that to make matters more acute, there is yet no indication that this tendency is at an end. He continues "On the contrary, the birth rate of this country is declining faster than ever. In the last few years, the rate has fallen about one unit per thousand per year. This decrease is very widespread, being especially pronounced in our cities and industrial areas

"This phenomenon is all the more striking because the age distribution of our people is such as to favor high birth rates. Because of the heavy immigration of young adults and the high birth rates of past generations, our population is still loaded with persons at the reproductive ages, factors which make the present birth rate higher than the current fecundity actually indicates. In other words, the low birth rates which now prevail would be lower still if the population were constituted, with reference to age distribution, as other more stable countries"

#### THE REAL DETERMINANT

This statement has been made by Dr Dublin and by others repeatedly, but it is not only impossible of scientific proof, but, in my mind, extremely misleading. The real controls of population growth and the birth rate also are economic and social factors, and population growth and the birth rate are not dependent upon a slight shift in the age composition. Even if the favorable reproductive age group were cut in half, there would still be enough potential fathers and mothers to carry on the birth rate which we now have in this country—if the economic and social conditions warranted. It is physiologically possible for a population to double every 17 years by its own reproduction, and even if its favorable reproductive age were cut in half, it would still be possible to double in less than 50 years, our population is now doubling in about 90 years, from natural generation. Therefore, it is not likely that the birth rate of this country would

be lower than it is with a reduction of 10 per cent in its favorable reproductive age group

Dr Dublin seems to lament the low birth rates in New York, Chicago, and other large cities. Yet all are agreed that the large city is the one place on the face of the earth where children should not be reared

The rapidity with which the birth rates of this and other countries have fallen during the past few years greatly concerns Dr Dublin. But no one should know better than he that economic and social conditions after the World War did not warrant the relatively high birth rates of the period 1920-1925. The demobilization of the armies in the World War naturally brought the birth rates up abnormally high, but after each family had a child or so there was certain to be a lull in reproduction for a few years. Both Dr Dublin and Dr Kuczynski have made much of this drop in the birth rate, which was merely a normal reaction. Then projecting into the future this trend downward in the birth rate and fecundity, these statisticians have reached most startling conclusions. As a matter of fact this downward trend in the birth rate already shows signs of changing

The provisional statistics for the Birth Registration Area of the United States for 1930 (exclusive of Utah) show that the birth rate held its own at 18.9 per 1,000 population the same as for 1929, the death rate in the same area declined from 11.9 per 1,000 population to 11.3, a new low for the death rate. This means that our rate of natural increase, births over deaths, actually increased from 7.0 per 1,000 to 7.6

There is also an indication that the downward trend in the birth rates of Europe has been checked. For instance, in England and Wales, the birth rate also held its own in 1930 at 16.3 per 1,000 population, the same as for 1929. The death rate was 11.4 being two whole units below that for 1929. This is also the lowest death rate on record for England and Wales. The annual excess of births over deaths in that already crowded Island was 194,033, against an average of 191,824 in the preceding five years. Furthermore, the infant mortality rates in both the United States and England and Wales established new lows for 1930

Thus we discover that no matter whether we look for larger populations or more saving of human life, the year 1930 gives us much reason for optimism. That the birth rate will fall lower and that the death rate will have a "technical" in-

crease (because of the shift in the age composition to older groups) is quite likely. But whether the birth rates rise or fall is not the pertinent question. Rather we should ask, do the economic and social conditions warrant the change in the birth rate? Are parents having only the number of children they can healthfully support and properly educate?

To assume that a change of a few percent in the favorable reproductive age group has a deciding effect on the birth rate, that recent trends in fecundity will continue, or that birth control necessarily means birth "restriction," are, I believe, unfortunate premises from which Dr. Dublin derives his conclusions.

It is indeed regrettable that a person as eminent in the field of population as Dr. Dublin should see fit to alarm the public as to what birth control is doing to America's population. Dr. Dublin is not only one of the most colorful and conscientious scientific writers, but with the extensive facilities at his command has furnished some of the most interesting and important data concerning the composition of the population of this country.

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# BIRTH CONTROL REVIEW



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for

VOLUMES XIV AND XV



1930—1931

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