

BIRTH CONTROL REVIEW

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MORE clinics are needed Never before has the need been so great, nor has it been so clearly recognized Everywhere doctors, nurses, social workers, ministers, all who are in intimate and understanding contact with the underprivileged, are asking how birth control advice may be made available for them The increase in the number of clinics has been rapid and encouraging, and each month adds new ones to the list Since the first of the year, clinics have been opened in Macon, Georgia, Albuquerque, New Mexico, Springfield, Ohio, and Danville, Virginia But one has only to contrast the figure of 160 clinics now in existence and the number of patients cared for—estimated roughly as 200,000 in all clinics since their inception—with the number of towns and cities in the United States and the number of married women of childbearing age, to see the immensity and the urgency of the problem

Will you, who read this REVIEW do your bit? Has your own community this necessary health service? What of your neighboring town? Call together first a small group of fellow citizens Enlist the aid of your doctor and your minister, a few leading social workers, and your woman's club, if possible Let the League help you with suggestions and printed material Distribute our literature to your friends, to your personal clubs and at a special birth control meeting, if you can arrange one Once interest is roused, you will be surprised how easy the rest will be

The League has printed material of great variety Use it

The Safe Period by Dr Matsner, a brief, simple statement on this much discussed subject, and *A Program for Family Health* by Dr Kavimoky, have just been reprinted from recent issues of the REVIEW They are free *A Message to Mothers*, an attractive booklet, tells about birth control in simple, story form, and is available for social workers and others who wish to refer women to doctors and clinics An even simpler *Message to Mothers* in English, Italian, Spanish and Yiddish is designed for work with foreign groups These booklets are one cent per copy and 75 cents per hundred

Let the League help you with literature, suggestions, speakers Start a new clinic in 1935

PHYSICIAN'S SYMPOSIUM

BIRTH CONTROL IN RELATION TO HEALTH AND WELFARE

Following are excerpts from the chief addresses given at the Physicians Conference of the Annual Meeting Chicago January 17th

THE widespread dissemination of contraceptive devices and knowledge results in mass prevention of conception But here there is a certain amount of selective limitation due to the fact that the intelligent and more responsible groups of society have knowledge of, together with the desire and intelligence sufficient to use these methods There is a further tendency to encourage the more widespread use of these methods among the social groups lowest in the economic scale It should be clearly understood that while these lower economic groups are struggling for existence in modern society, while many of them are unable to cope with environmental conditions, they are by no means the least desirable individuals of society

One has further to consider selective limitation upon the biologic basis This brings up for consideration the whole problem of eugenic control As yet we know relatively little concerning eugenic laws in their effect upon the human life There is much evidence pointing to the conclusion that the offspring of certain types of defective individuals carry with them inheritable characteristics which perpetuate these defective qualities in the human race These defective qualities may be highly undesirable in their effect upon the individual and upon society

The medical professional of today is confronted with problems related to the limitation of reproduction which involve both medical and sociologic aspects The principles underlying the various methods are essentially medical insofar as the determination of their value and their application is concerned The doctor is confronted with two major problems, the welfare of the individual and the welfare of society in the application and use of these procedures

It is therefore my belief that we should determine what is best for individuals and for society, and attempt to proceed with definite eugenic, medical and sociologic indications leading to human betterment Personally I am of the opinion that our acts as medical men and as public servants should be consistent with the best in

dividual and collective interest Sociologists should proceed along the same lines and establish reasons for giving instruction to individuals for the limitation of births

My position is strongly in favor of selective limitation of births by voluntary and compulsory methods by recognizing public servants and agencies

FRED L. ADAIR, M D

Chief of Gynecological Service, Chicago Lying In Hospital

THE PHYSICIAN'S RESPONSIBILITY

A PHYSICIAN may be responsible first to or for his patient, second, to or for the community There are two kinds of responsibility, legal and moral The legal responsibility of a physician to his patient, or to the community, is determined by the laws of the community as interpreted by the courts The moral responsibility is determined by the judgements based upon the ethical principles of the patient, of the community, or of the doctor himself Sometimes the physician appeals to the moral judgment of mankind The responsibility of the physician for his patient, or for the community, implies that he has some authority or influence by virtue of which he can direct the actions of the individual, or of the community Physicians often, and justly, claim the right to influence the opinions of the community on medical, or quasi medical matters because of their superior knowledge of the facts involved Because of this claim they must admit their greater responsibility

The immensity of the problem of control of the propagation of mental defectives, including the feeble minded and irresponsible morons, and the victims of tuberculosis, is exceeded by the problem of the control of indigency With ten or twelve million unemployed, with one-fifth of the population of the country on local, state, or Federal relief rolls, the responsibility of all citizens for the control or the prevention of the increase of this threatened economic catastrophe is evident The fact that the birth rate among families that have been on relief for more than one year is about 60% higher than among families from similar social strata who are not on relief, and the additional fact that unemployment relief agencies do not in general permit their clients to consult birth control clinics, shows the desirability of getting the medical profession to attack this problem

The responsibility of the medical profession in solving this question is perhaps greater than that of any other class They know, or should know, the results of the unlimited increase of the indigent class of the community They know the individual suffering thus caused They know the moral deterioration and degradation

caused by idleness and acceptance of dole They know the dangers to the community of such a very large and growing mass of people, discontented, resentful, feeling themselves helpless victims of a bad social system They know the enormous strain on society to support by taxation this mass and they, better than other classes of the population, can advise how to prevent its increase

It is not my purpose to tell you how the medical profession can be made aware of its responsibility to the community, except to say that the demand of enlightened citizens for scientific advice and treatment must eventually be heard, and the competition by commercial quacks must be checked

To summarize We recognize that the medical profession has both a moral and legal responsibility to individual patients, and to the community, in the matter of birth control Members of the profession are personally responsible for the methods of contraception advised, or used They are responsible to their patients, at least morally, for refusal or neglect to use or recommend contraceptives in certain cases where pregnancy is dangerous to life or health They have some responsibility for the unrestricted manufacture and sale of harmful or useless contraceptives They are responsible to the community for efforts to control the propagation of the diseased and unfit The profession is responsible to the community for help in the control of the manifold dangers threatened by growing indigency

CHARLES SUMNER BACON, M D

*Professor Emeritus Gynecology and
Obstetrics Illinois Medical School*

A PROGRAM FOR THE FUTURE

FROM the viewpoint of health, physical and mental, there is no other group more concerned with the problems of birth control than is the medical profession While doctors have taken a certain interest in the problem for over 2,000 year, and it was a Boston physician, Dr Knowlton, who laid the basis for the modern birth control movement with the publication of a pamphlet on contraception in 1832, the profession as a whole has failed to give the movement the support it deserves

As a practical movement in this country 1914 marks the starting point, when Mrs Margaret Sanger, at that time a visiting nurse in New York, began her campaign to furnish adequate methods to the poor and the needy She established the first clinic in the United States, in 1923, and a year later, the Illinois Birth Control League opened the first of its seven clinics Since that time more than one hundred and fifty clinics have been established all over the country and over one hundred thousand clinical case histories have been accumulated

We know that the method prescribed in clinics is efficient. When properly instructed, the poor and uneducated groups can achieve as high a rate of success as do the more privileged classes. The average rate of success in the clinics as a whole is 93.3%, while in many of the clinics it is much higher, and in our Chicago clinics last year it reached the figure of 99½%.

We know that the method is harmless. In all the records accumulated, there is not the slightest evidence of any injury caused by the use of our methods. We have thousands of reports from patients that their mental and physical health has improved with the elimination of fear of unwanted pregnancies, and we have seen peace and greater happiness brought to many couples who have suffered from sex maladjustments.

As to the future we need to train students in the science of birth control, we need more research and study of available data, we need more research in improving our methods, and we need more pre-marital sex information which would help to cut down abortion.

We need to change the 62 year old Comstock law so as to put the responsibility for dissemination of contraceptive information on the physicians where it belongs, and which would, in turn, enable us to standardize the drugs, supplies and mechanical devices now being used and stop the flow of quack remedies which are flooding the markets.

Finally physicians must come to see this field of medicine in its true light and give information concerning it with the same dignity, knowledge and understanding as other forms of medical information are given.

RACHELLE S. YARROS, M.D.

Medical Director Illinois Birth Control League

A BIRDSEYE VIEW

THE physician, whether he be a specialist in internal medicine or in family practice, too often does not think about birth control until the question arises "is therapeutic abortion indicated?" When that question arises he wishes that he knew more about the subject—knew of more satisfactory and more effective methods whether or not associated with the use of contraceptives.

As purely medical indications for contraception the doctor thinks of active or recently arrested tuberculosis, nephritis, hypertensive vascular disease, thyroid disease, heart disease, diabetes, previous toxemias of pregnancy, too frequent pregnancies, and malnutrition. He believes that sterilization is probably the only efficient method of preventing conception in the insane and the mentally deficient. He feels that sterilization might also be considered when a family has as many children as they

can properly support and that other methods of birth control should be used under those circumstances.

Appreciative of the advantages of marriage to couples both of whom must work and the impossibility of such a couple having children at once, he realizes the need of efficient birth control for such people. It seems that the family doctor is the one best able to give information with respect to contraception. His knowledge of the couple makes it possible for him to select a method with or without the use of contraceptives that will be most satisfactory in each case.

The legal situation, which makes it impossible for work with various methods of contraception to be reported, discussed, and evaluated in medical literature as are other therapeutic and preventative methods, makes it difficult for the members of the profession to really know much of anything about methods of birth control. The taboo on the subject resulting from this legal association of birth control and obscenity has until recently kept the subject out of the curricula of medical schools.

NATHAN S. DAVIS, III, M.D.

*Assistant Professor of Medicine
Northwestern University*

THE COOPERATION OF ORGANIZED MEDICINE

THOSE of us who have been vitally interested in birth control for a dozen years or more have patiently observed the slow but growing cooperation between it and organized medicine. The average physician from time immemorial has been a conservative and an individualist, and is so to a great extent at the present time. His life is one of sacrifice to what he considers the best interests of his patients, he is busy with the obvious and immediate demands incident to his profession, he rather resents the invasion of his more or less narrow domain by the eager and sometimes overzealous efforts of lay individuals whose enthusiasm at times exceeds their judgment. Furthermore, birth control until a comparatively recent date, met with so much opposition owing to the attitude of the church and to legal restrictions that the physician became afraid of it. Birth control has been, until recently, in a more or less nebulous state and many differences have arisen concerning it among its own ranks and among social workers and economists, last but not least, very little research work has been done to prove its efficiency until a few years ago. It is, therefore, not surprising that the profession, in its corporate capacity, has held aloof from it.

The physician need no longer be concerned to any great extent because of religious objections to birth

control in the light of the fact that the head of the Roman Catholic Church has given his approval to natural birth control and permits his people to avail themselves of the period of so-called physiological sterility, and inasmuch as the House of Bishops of the Episcopal Church of America voted in favor of birth control at the last general meeting a few months ago. It would seem that the action of the heads of these two great religious bodies is one of the most significant and encouraging steps in favor of scientific birth control and it would seem that the day has arrived for its full cooperation with organized medicine.

I believe that it can be stated today, without fear of successful contradiction, that scientific birth control, if adopted, and properly practiced by the corporate profession, offers a measure which can be utilized with a very high percentage of success, and furthermore, that it can be put into use for an indefinite period of time without any harm whatever to the patients concerned.

I can see no reason why organized medicine should not encourage research work and other studies on a subject which so vitally affects so many people of all classes and which is so intimately dovetailed with the doctor's daily work.

Nearly every normal individual, at some time, resorts to certain methods of contraception, many methods in general use are not only ineffectual but positively inimical to mental and physical health. Is this not the concern of organized medicine?

The Medical Profession in America is already birth control conscious, I am hoping that it will soon become birth control conscientious.

The following suggestions should facilitate greater cooperation between birth control and Organized Medicine.

- 1 Active cooperation should be secured between Maternal Health Leagues and State Medical Societies.
- 2 Contraception should be taught in all Medical Schools.
- 3 Inasmuch as there are in every State a number of physicians who are already properly trained in contraceptive work, an effort should be made to have them address County Medical Societies at periodical intervals.
- 4 Cooperation should be effected in the small as well as in the larger County Medical Units. A Birth Control Committee should be appointed by the President in each Society.
- 5 Each year a Speaker of National reputation on Birth Control should be secured to address each State Meeting of the Medical Society at its General Assembly.

- 6 Continued efforts should be made by advocates of birth control to obtain its indorsement by special medical societies, and one may prophesy that the time is not far distant when the American Medical Association will unanimously adopt it.

ALEXANDER M. CAMPBELL, M.D.

Medical Director Maternal Health League of Michigan

BIRTH CONTROL AND MENTAL HYGIENE

I BELIEVE at least ten groups or types of mental or emotional disturbance exist which proper contraceptive information and instruction can often prevent and sometimes entirely overcome. All but the last of these are represented by one or more actual cases which have come to my attention in my own neuropsychiatric practice.

Women's fear of pregnancy as such. In the absence of adequate justification by physical, economic or other facts this condition should generally be combatted by a careful psychological investigation, followed by sympathetic and intelligent instruction, persuasion and encouragement. When all these fail, the chronic panic state remains a problem which is only touched by a gradually built up confidence in a very sure and safe contraceptive technique.

Anxiety neuroses in women are often traceable to no other set of causes than fear of pregnancy based on secondary considerations such as economic stress already existing, overcrowding, progressive failing of strength, actual chronic disease, hereditary disease potentialities, or menacing habits in the husband such as chronic alcoholism, drug addiction or criminality. Most of these are cold hard facts which cannot be changed and prevention of pregnancy is called for.

Sexual frigidity in women is an easily understood consequence of either of the foregoing. Obviously, there can be no relief unless either the conditions are changed or some safe contraceptive procedure is adopted. Practical experience and observation shows only too clearly that the latter is usually the only course that can be successfully followed.

Anxiety neuroses in men not infrequently appear to be associated with the practice of coitus interruptus. There are various theories to account for this relationship. It does not matter which, if any, of them is true providing there is some causal connection. The practice of course also tends to deprive the woman of her normal rightful satisfactory experience. With the development of suitable contraception, there is no excuse for the continuation of this undesirable makeshift.

Psychic impotence in men may come about from a multitude of causes, mostly emotional. But whatever the cause, and however well it may be met by psychotherapy, a beginning must be made in successful performance. The various devices used by men for contraception are almost guaranteed to prevent this success. The employment of modern contraceptive technique by his partner permits a natural and unhampered attempt by the man and greatly increases his chances of recovery.

A warped or wrecked sexual life of both husband and wife only too often results from any of the foregoing conditions. The consequences of unhappy marriage, with or without divorce, both to the partners and to children are too well realized to need comment here. The occasional experience that comes to the medical advisor of repairing and saving the sinking ship by correction of mistaken ideas, faulty techniques, and tragic disharmonies is one of his richest rewards. Such accomplishment has only been reasonably possible since the development of modern contraception.

Remorse over abortions is occasionally extremely serious. Like any other remorse, it must be treated psychotherapeutically by the physician. I have seen several severe instances of women who had been raised as Catholics, but had drifted away from that faith. Early training had dominated the emotional picture. With contraception displacing abortion, this cause of mental agony will vanish.

Exhaustion psychoses in women from too frequent pregnancies. Whether the frequency of pregnancy is actually responsible for these insanities or merely "pulls the trigger" for some underlying factor to explode is of little consequence. The result is the same and that such things occur is well known. The answer of course in proper spacing of children.

Personality difficulties in men can result from the tension of self-enforced continence, from conflict and remorse over extra-marital excursions, and from inferiority feelings resulting from substitutions, either masturbation or perversions, carried out because of ignorance of better ways.

General paresis the most serious of the organic psychoses, is caused only by syphilis. The following line of thought may seem a bit involved, but I feel sure of its essential soundness. Contraceptive technique permits earlier marriage, which cuts down the use of prostitutes, which lessens the spread of syphilis, which decreases the amount of general paresis.

JOHN FAVILL, M D

Clinical Professor of Neurology Rush Medical College University of Chicago

CONTRACEPTION—ITS ROLE IN PREVENTIVE MEDICINE

THE keynote of modern medicine is the prevention rather than the cure of disease, and epoch making strides have been taken in the fields of preventive medicine and public health. However, it must be kept in mind that in today's changing social order a doctor must be more than a technically trained expert. Never before in the history of the United States has the close relationship between health and socio economic conditions been more striking. It is essential that the modern doctor understand the effect of unemployment and curtailed income on the individual's health and on the physical and mental health of the entire family.

In no department of preventive medicine is this understanding more important than in that of maternal and infant welfare. Studies on the effect of too frequent pregnancies in a short period of time give striking proof of the increase in both maternal and infant mortality, where births are not properly spaced. Furthermore, statistical surveys of the incidence of non therapeutic abortions indicate that this practice increasing. No fair minded physician will fail to recognize the desirability of contraception as against abortion.

During the past year the wide spread publicity given to the "safe period" as a means of controlling conception, the active cooperation of medical schools and county and state medical societies all indicate a growing recognition of the importance of contraception as a medical and social problem. The differential birth rate and relatively high birth rate of families on relief are factors which call for an intensive program in medical education and cooperation.

In preventive medicine and public health no factor is more important than the protection of the lives of mothers and children. There must be made available for every mother the means of controlling her fertility, so that she may have as many children as she, her husband and her family doctor feel are desirable, and for whom educational and social necessities can be obtained. We are living in a changing social order, and one of the most significant objectives in an ideal, planned society is recognition of the importance of the planned family.

ERIC M. MATSNER, M D

Medical Director American Birth Control League

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THE UNBORN SPEAKS

I AM a stilled voice I have not yet been heard, but
I am speaking I am a germ plasm that has failed
of growth I am one of the unborn

We have been denied the right of fruition, the right
of birth, the right of fulfilling our destiny We have
been destroyed by a sin against biology So say the
prophets and we listen, and in the eternal darkness
where we abide we indulge in a faint, protoplasmic
laugh

We have been denied the right to add our millions of
unborn souls to the 130 million born souls in this great
nation, and thus increase by so many millions the army
now standing with idle hands before the factories and
shops, or toiling in the farmlands for a pittance, or
hungering in the cotton fields among the plentiful crops

We have been denied the right of shivering on windy
corners selling apples and pencils, or pawing in the alley
ways for scraps of food or freezing the nights through
wrapped in newspapers which carry stories about the sin
of contraception and the glory of being born

Prepare the way for us, you born, before you weep
over our fate Prepare the way for us Look to the soil
before you plant the seed

In the world you have made for us we would find
scant nourishment We would be stunted, blasted,
whipped by the winds or uprooted by stupid or hateful
hands

You proclaim the right of the unborn to inherit the
drought and the dust and the barren earth, but for the
veriest cabbage you prepare the loam

ERNEST L. MEYER

—*New York Post February 9th*

NINE OBSCENE ARTICLES

NEWSPAPER headlines on January 6, 1935, read
"Nine articles of literature ruled OBSCENE ac-
cording to the U S Customs"—and according to Sec-
tion 245 of the Criminal Code Ridiculous if it were
not pathetic

What is this literature and why is it considered ob-
scene? One was a medical text-book, edited by Mar-
garet Sanger, with discussions of contraceptive methods
by outstanding physicians who met at a Birth Control
Conference in Washington last year It contained *scien-
tific* information on contraception and would be of use
only to physicians who need to know more about birth
control methods and who have been very anxious to
have this book for guidance Hundreds of copies are
now on the desks of physicians in this country

Then there was the pamphlet by Dr Hannah M
Stone on *Therapeutic Contraception* a reprint from
the MEDICAL JOURNAL AND RECORD

Several copies of magazines printed in England, the
BIRTH CONTROL NEWS and the NEW GENERATION,
were ruled out not because of any stories they contained,
for they did not contain stories, except for a few
pathetic instances of overburdened mothers who asked
where they could secure birth control information But
they did give the addresses of birth control clinics in
England and gave the name of products to prevent
conception purchaseable in England

The Rhythm was in the collection of books seized
What kept the Customs authorities from ruling this
book obscene? It is not a technical book for doctors,
it is published for the lay reader But the so-called
natural method expounded in *The Rhythm* isn't con-
sidered a method by the Customs It is considered some-
thing natural, whereas the other books referred to a
definite method By this reasoning the wearing of eye
glasses is unnatural, compared to taking eye exercises

Why wasn't *The Rhythm* ruled obscene? Could it
be because it has the Ecclesiastical Approbation of a
church and introduction by a Catholic priest advising
women to follow this method? Could it be that because
it is advertised in the Catholic magazines it is there-
fore considered reliable and decent? Or could it be
because General Farley has ruled the books carrying
Ecclesiastical Approbation or Imprimatur of a cardinal
from his church legal and decent?

Is it possible that women must be dependent upon the
Roman Catholic Church for all methods, that even a
discussion of any other method or an article giving the
address of where birth control information may be ob-
tained is considered illegal and obscene?

Why was not *The Rhythm* classed with the other
books dealing with birth control? The fact that *Thera-
peutic Contraception* had been printed in an American
medical magazine did not take that article out of the
class of obscenity This magazine does not, of course,
carry the Ecclesiastical approbation of the Catholic
Church

Sixty-two years after Anthony Comstock secured the
passage of anti contraceptive legislation, his spirit rises
up and tells the women of America that they have no
right to space their children according to their physical
and economic needs, or according to their intelligence

Should the Birth Controllers give Congress the
benefit of a parade of all the married women in this
country who have practiced birth control and are
therefore classed as OBSCENE? Surely they would rec-

ognize many faces in that parade Should the taxpayers protest in a body because they must continue to pay for unwanted children? Should we have a demonstration of the mothers dependent upon relief who are, today, fearful of the birth of another child because there are no public clinics available to them?

Or can we depend upon Congress to face facts and act intelligently on this subject?

HAZEL MOORE, *Legislative Secretary*
National Committee on Federal Legislation for Birth Control

UPWARD AND ONWARD

UNDOUBTEDLY the rejection of Mrs Sanger's bill by the House Judiciary Committee on February 5th, will prove to be a stimulating rather than a depressing incident The Coming-of-Age Birth Control Dinner, held in Washington on February 12th, was a proof of this feeling Eight hundred men and women were there, and all were absorbingly interested in a program of brilliant and impressive speeches

The Birth Control movement is fortunate in having in Congressman Walter M Pierce a supporter of great personal charm and dignity, a gentleman of the old school, a scholar and a man of courage and action He has introduced a new bill

A resolution asking the President to establish a Population Bureau to formulate a National Population Policy was enthusiastically passed The keynote of the evening was *Family Security through Family Planning*, making possible President Roosevelt's slogan *National Security through National Planning*

Pearl Buck brought into her delightful speech examples of national hypocrisy in facing realities Dr Prentiss Willson, Dr Ira S Wile, Mrs Harriot Stanton Blatch, Mrs Lucretia M Blankenburg, Reverend Charles Francis Potter and Dr Rachelle S Yarros made brief addresses Finally Margaret Sanger spoke and every word carried inspiration

The ever increasing strength of the Birth Control movement is recognized by our opponents, a fact which was proven by the hasty and unfavorable attention given to the first bill Everyone interested in the movement is urged to get signatures for Mrs Sanger's petition Copies may be obtained from the League Office

We all know the value of petitions, telegrams and letters in influencing government officials and legislators So do let us all do our level best and see that Margaret Sanger's hope of one million signatures soon becomes a fact

ALISON PIERCE MOORE, *Chairman*,
Executive Committee, American Birth Control League

With this issue the League reluctantly relinquishes its editor, STELLA HANAU, who has directed the destinies of the REVIEW since June, 1929 She leaves us to become Publicity Director for Margaret Sanger in her courageous fight to change the Federal Law

In the five years of Mrs Hanau's able editorship she has shown those high qualities of discrimination and impartiality, so important in winning friends for the movement Under her guidance the REVIEW has flourished The Directors and the Staff say *Auf Wiedersehen* rather than *Goodby* and all good wishes for continued success

The April, May and June REVIEWS will be issued under the direction of guest editors

CATHERINE C BANGS, *President*

THE COMMUNITY AND THE BIRTH CONTROL MOVEMENT

THE practice of birth control is inherent in our modern social arrangements It is not likely to be given up in the near future This situation has created reciprocal obligations for the birth control movement and for the community

Historically, the relationship between the community and the birth control movement has been characterized by friction and antagonism At the outset, the birth control movement cut across the whole gamut of ideas and emotions which had been canalized into conservative institutions No wonder that the church denounced it, nice people avoided it, legislators passed laws suppressing it, and doctors denied all knowledge of reliable methods

But time has marched on There is evidence of changed attitudes registered in court decisions, resolutions of church bodies, the practice of physicians, and the expression of individual opinion The reason for the change in public opinion is not far to seek Birth control is something people want If they cannot limit their families by safe means they will use what means they can

In times like these, it takes little imagination to realize the importance of reliable and safe methods of birth control to large numbers of families Even in prosperous times, and assuming the adoption of the President's program for social security, the conditions imposed by modern life are silent but powerful arguments for family limitation In a democratic community, organized under a competitive economic system, a large family is a handicap to the attainment of a satisfactory life, for the great majority of people The practice of birth control has gained popular accept-

ance, not by reason of a fully realized philosophy, but because it has been a means of facilitating the ends and purposes to which our social system directs the ambition of men, and to which the majority of persons respond uncritically

In view of the changed attitude on the part of the community, and the wide spread acceptance in practice, it is claimed by some that there is no longer need for a birth control movement. These persons argue that the functions which the movement undertakes to perform should be turned over to the various community agencies of health and education. To this I cannot agree. The birth control movement has not yet fully discharged its obligation toward the community. It came unwanted into a conventionalized world. It has been the aggressor against established customs and traditional doctrines. The statistics of the falling birth rate and the popularity of commercial contraceptives are evidence of the acceptance of birth control in practice. This rapid spread of the practice of birth control has created a situation for which the leaders of the movement must assume responsibility.

There are, as I see it, four tasks which call for immediate action and which require a specialized organization if they are to be effectively carried out. They are (1) organizing, financing and administering clinics, (2) encouraging research and popularizing the findings of scientists, (3) educating the public in sex attitudes so that birth control may receive its proper emphasis in relation to the larger problems of personal adjustment and family life, and (4) changing federal and state laws dealing with contraception so that they will conform to modern thought and practice.

I look forward to the day when these tasks will be taken over by those agencies of the community to which they logically fall—maternity and child welfare ser-

American Birth Control League

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vices, doctors, medical societies, the institutions of formal and informal education. But that time is not yet. In the meantime the birth control movement must carry on its work and in this it needs the cooperation of the community. It asks of the community the opportunity to do its job.

HELEN FISHER HOHMAN

Evanston Ill

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*Sent to all members of the American Birth Control League
 and affiliated State Leagues*

*Persistent attempts to prevent the scientific study of
 contraception prove that many supposedly intelligent
 people are still trying to live according to the teachings
 of the dark ages. Surely a wholesome decent non
 political non sectarian investigation should be wel-
 comed by Catholics and Protestants alike*

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