

# Birth Control Review

Published by the American Birth Control League

Vol IV No 7 (New Series)

APRIL, 1937

## Birth Control and Marital Adjustment

By Mary Fisher, Ph D

**B**IRTH CONTROL is as much a part of our culture and our times as rapid transportation or technology. We cannot decide to have it or not to have it. We can only decide to try to understand its social implications and to attempt to guide its social direction. A rapidly increasing number of individuals in all economic groups are attempting to practice some kind of birth control. Not all groups, as we know, are equally fortunate, as yet, in having access to the safe, scientific methods of contraception which birth control clinics provide.

This fact, that there is increasingly reliable birth control, is one of the most dynamic factors of our society. The role of women is changing—due, at least in part, to the fact that the natural consequences of the sex relationship are not inevitable. Relationships between husbands and wives and between parents and children are changing, again due in part to the fact that parenthood may be assumed voluntarily.

Many individuals are greatly concerned because families are growing smaller. They do not understand that, on the other hand, the family is becoming increasingly important for satisfying psychological and emotional needs. In their fear that the institution of the family will disappear, they misinterpret the effects and influence of birth control. They forget that birth control in itself is neither good nor evil. It is the uses to which it is put, the fundamental human needs it serves or denies, that are constructive or destructive.

The effects of birth control on marital adjustment is one of the most important but least understood aspects of this whole vital problem. It is an area in which we need more facts in order to be able to think clearly and honestly. But also, it is the area in which it is most difficult to get the facts with which to think. Sex attitudes and sex problems do not just happen. They are built into the very structure of the personality from early childhood. Unfortunate training has produced an unrealistic attitude toward the whole subject. Most of us have found that our own feelings and experiences have not corresponded very accurately with the facts of sex

"A young child needs an emotionally sound mother even more than a physically sound one," says Dr Fisher, who is associated with the Child Psychology Department of Sarah Lawrence College and with the Family Consultation Bureau of Teachers College, Columbia University.

ual behavior which our parents and other mentors saw fit to give us. This has caused confusion, anxiety and feelings of guilt. Thus, most men and women today find it difficult to accept themselves, or to give to others, honest data about their sex lives.

We can discuss, however, what may be safely called general considerations. Before we talk about the effect of birth control on the adjustment of husbands and wives living here and now, may we consider for a moment ideal conditions in a rational but still non-existent society? Ideally, in terms of fundamental human needs, all young people should be able, in their early twenties, to find congenial marriage partners. They should have sufficient economic security to make reasonably early marriage possible. They should be sufficiently mature to make mutually satisfying sexual adjustment a foregone conclusion. Emotionally and physically, they should be ready to have the first baby early in their marriage, as a natural and satisfying fulfillment of their relationships. Remember, please, that I have said "ideally." If these ideal conditions were true even for a majority of young adults, we could limit our discussion to "birth control and marital adjustment *after* the first pregnancy."

The pitiful, ironic and tragic fact today is that a whole generation has just come, or is just coming, into physical maturity without hope that there is a place for them or their children. Some of them, through no fault of their own, have been so deprived emotionally that they would be incapable of assuming the responsibility of marriage and parenthood even if they had the opportunity. They are destined to seek other solutions for their needs.

The group with whom we are concerned is the marginal group—those who still have hope and courage,

those who are eager to assume the dignity and responsibility of family life. Marriage, legitimate sexual relationship and the companionship of a husband or wife are essential and right for such young adults, even though they must postpone parenthood until they have more economic security. Their well being and emotional security depend upon it.

### Working Wives

In addition to the need for postponing the first pregnancy, such early marriages often involve the wife's working. We must be very careful and very honest not to oversimplify this aspect of the problem of early marriage. Until we know what we are talking about, we should stop saying that no self-respecting young man will ask a girl to become his wife until he is able to provide a suitable home for her and their children. We should stop saying that no young woman will consider marrying a young man until he is able to provide for her in the manner to which her father has accustomed her. And we should stop saying that working wives are a handicap to their husbands and to society.

Let us at least stop saying those things until we know to what despair and hopelessness and destructive emotional substitutes such standards are condemning thousands of young people. It is cruel to encourage a set of values which are unrealistic in our present society. These conditions can be changed, when we know enough and care enough. They cannot be changed by emotional and intellectual dishonesty.

### Do They Want Children?

The majority of young adults who have been caught in the economic and social maladjustment of our times must have access to scientific birth control. It is a necessity and their right. It is one of their few chances of helping to work out their own salvation. We need not worry that they won't have children. They are breaking their hearts because they haven't a chance to have children. What they ask of society is the right to be free to have their children.

There is another group of married people for whom birth control is also a personal and social necessity. This group may or may not have economic problems, but they do have emotional problems. They have grown up seriously handicapped by inadequate emotional education. It is important for them to have time and an opportunity to work out their sexual and emotional relationship before they assume the additional adjustment of pregnancy.

Fortunately for the future of our society, there is

growing recognition of the importance of normal and emotionally satisfying sex life. However, a satisfactory sexual adjustment does not come automatically with marriage, and it takes longer to achieve in some marriages than in others. Fear of an unplanned pregnancy is certainly one factor which often interferes with such an achievement. This fear should be removed for the good of the marriage, and also for the good of society, if society benefits by permanence in marriage. It is true that in some instances adjusting to an unplanned pregnancy seems to unite husband and wife. However, the more we know about the complexity and importance of the emotional side of marriage, the more cautious we should become about making such an adjustment necessary.

### The Mother's Mental Health

Hardly anyone today questions the importance and legitimacy of birth control for a married woman who has a serious health handicap. There are mental and emotional conditions which are less easy to diagnose but even more serious from a social point of view. The more we learn about children and the complicated process of growing up, the more we realize that a young child needs an emotionally sound mother even more than a physically sound one. It is handicapping a child unnecessarily from the first to condemn him to a home where he is unwanted and will be an inevitable source of conflict between husband and wife.

We are beginning to realize that marriage does not cure personality difficulties—although it sometimes helps—and we are also finding out that parenthood does not, either. The problem is essentially an educational one. We must learn enough about human development to know how to make it possible for children to grow up sound in mind and body, so that they will be ready for parenthood and will desire to be parents. Meanwhile, it is shortsighted to sacrifice children unnecessarily to the unsolved problems of their parents.

Many immature people want children and have them before they are prepared for the responsibility. Should we, then, force people to have families when they *know* they are not ready for this step? Access to scientific birth control is a social as well as a personal necessity for such individuals while they finish their growing up. This applies to all economic groups in our society.

The cultural fact of birth control is inextricably woven into the very fabric of our society. There is no aspect of our personal, social or economic lives that it does not affect directly or indirectly.

We must enter into a new phase of the movement, exploring objectively and scientifically the consequences of birth control or the lack of it. This exploration must accompany continued research into improved techniques of contraception. Let us take this cultural fact of birth control, face it honestly, learn how to use it intelligently and make it serve our ideals and our faith in democracy as a way of life.

## Organization for National Strength

(An Editorial)

WE WERE interested to hear recently from a correspondent with the Birth Control International Information Centre in London that the American Birth Control League and its member leagues constitute "the largest birth control organization in the world."

Size alone, we believe, is no criterion of strength. Without standards, without national planning and national solidarity, there can be no stability. Similarly, the number of birth control centers is not in itself significant. What counts is the number of centers that feel their interdependence and their mutual responsibility for the future of the movement.

To build the American birth control movement on an enduring basis, the League within the past few years has been stressing more and more the importance of organization and standards. And more and more, we have had the satisfaction of seeing this philosophy attain results.

The benefits of organization are well illustrated by the fact that, of the 57 new clinics established in 1936, only five were in unorganized areas. And of the 300 clinics now on record, 228 are in organized areas.

In field work, the League has not been satisfied with opening a clinic here, a referral service there. Our chief concern has been to form strong local and state units equipped to carry on with full responsibility. If the movement is to expand, every newly organized unit must serve as a nucleus for the extension of contraceptive service to outlying areas.

In the summer of 1935, the League announced minimum standards for affiliated centers. One hundred and seventy-five centers now display the certificate which testifies that they meet these or higher standards. Mothers who visit these centers, physicians and social workers who refer patients, local friends who lend financial support—all are assured by the certificate that the center is a non-profit organization under the direction of a representative medical advisory board.

Because patients applying for contraceptive advice are entitled to the most reliable information available, the certified clinics are asked to report to the League's medical board any deviation from the standardized clinical techniques which they may contemplate. This request is made in the interests of the movement as a whole, and in no sense to discourage individuality in scientific inquiry. By checking with the National Medical Council before they institute research, clinics avoid needless duplication in such projects and are advised regarding all possible safeguards.

The certificate differentiates the reputable, scientific centers from the commercial enterprises, outlets of manufacturers for their products, which masquerade as "birth control clinics" in a number of cities.

For some time before the decision of the United States Circuit Court of Appeals, there had been a distinct trend toward the establishment of clinics under public auspices, in hospitals, city halls and health departments. The decision is lending impetus to this trend.

One state member league is planning to announce to its contributors that they will be asked for donations only during the next three years. At the end of that time, this progressive league expects all clinics in the state to be tax supported.

How soon the acceptance of birth control as a government responsibility on a national scale will come, we cannot now predict. In the meantime, it is the obligation of voluntary organizations to maintain standards on a par with those of any public health service.

Organization, standards, follow up work—prosaic subjects, perhaps, when one thinks of the dire human need among thousands of mothers who are without contraceptive information. But haste defeats its own purpose and retards progress. To the end that more mothers shall receive scientific advice from reliable sources, the American Birth Control League will continue to build on the secure foundation of orderly procedure by responsible groups.

## Tulsa Has Hospital Clinic

Oklahoma's first birth control clinic in a metropolitan area has been opened in the Tulsa General Hospital under the sponsorship of the Tulsa Maternal Health League and with the endorsement of the Tulsa Medical Society. Public opinion was mobilized toward the establishment of the clinic by the field work of Mrs. Ruth Smith of the American Birth Control League.

## News Around the World

**INDIA** The first birth control clinic on the island of Ceylon opened in Colombo in January, writes Mrs F Robertson Jones, honorary president of the American Birth Control League, who is traveling around the world Mrs Jones was asked to preside at the formal opening of the clinic and to speak at a meeting of physicians and social workers held in the governor's mansion

Though Mrs Jones is traveling for rest and recreation, she has taken the opportunity to study the birth control movement in many of the countries she has visited In India, she has visited maternity hospitals, has seen the contraceptive service available, and has talked with many who wish to extend the clinical facilities so desperately needed by India's impoverished mothers The educated Indians are enthusiastic, she reports, but know little of the practical procedure of organizing clinics

"The great need is for a woman doctor as field worker to go from province to province, teaching the local doctors and getting clinical service started," Mrs Jones writes "In Ceylon the birth rate is extremely high and the Lying in Home is so crowded that the women can remain in bed only twenty four hours after their babies are born I saw forty or fifty poor creatures sitting on the floor in a long corridor and holding their tiny babies in their laps—looking so limp and miserable!"

**CANADA** A significant victory for birth control in Canada was won on March 17th when Magistrate Lester Clayton ruled that the dissemination of information on contraceptives was for "the public good" The magistrate dismissed the charge against Dorothea Palmer, social worker, who was accused of having advertised birth control information in a pamphlet which she arranged to have sent to local women who requested it A possible penalty of two year's imprisonment is provided for such a violation by the Canadian criminal code

"The acts alleged to have been done by Miss Palmer were done knowingly, without lawful justification," Magistrate Clayton found He dismissed the charge, however, by applying the escape clause of the criminal code which prohibits conviction if the court finds the actions served the public welfare

Pointing out that one quarter of the residents of East view, Ottawa suburb where the trial took place, were on relief, the magistrate said, "The one class of society from whom this information is being withheld is the poorer class What argument is there from a humani-

tarian point of view that will deny to these people the knowledge and the means of properly spacing their children so that the mother and the child can enjoy good health, and so parents can control the number of their children to those they can support in a manner above the mere level of starvation existence?"

During the trial F W Wegenast, defense counsel, vigorously attacked arguments raised by Roman Catholic witnesses "What an utterly absurd and indefensible thing it is in these days for any church to undertake the regulation of science," he is reported to have said "Indeed, I would be prepared to argue that it is against public policy that any priest or cleric should be in a position to stand in the way of free circulation of knowledge, whether it be about contraceptives or astronomy"

**ICELAND** Iceland is the first country in the world to make it compulsory for physicians to give advice on contraception, when pregnancy would be dangerous to the mother The full text of a bill to this effect, passed in 1934, is given by Dr Max Hodann in the November, 1936, issue of *Marriage Hygiene*

The bill also provides that any medical practitioner shall be bound to give a woman contraceptive information if she consults him for it "Directions to Women on How to Prevent Pregnancy" is published by the Minister of Health and distributed among physicians by the Chief Medical Officer

**JAPAN** The only solution for Japan's problem of population is birth control This a charming Japanese visitor, Baroness Shidzue Ishimoto, has been emphasizing on a lecture tour throughout the United States Though educated under the old feudalistic system in a "school for peeresses," the Baroness is her country's leading feminist and the president of the Japanese Birth Control Association

Baroness Ishimoto has spoken under the auspices of several state and city birth control organizations Attracting large audiences and colorful publicity, her lectures have focused attention upon local clinical work On February 1st, she lectured for the Minnesota Birth Control League, in the woman's club auditorium, Minneapolis The Birth Control League of Monroe County, New York, opened its annual membership drive on February 15th with an address by Baroness Ishimoto in the Hotel Seneca, Rochester On March 8th, she appeared under the auspices of the Greenwich, Connecticut, Committee for Maternal Health, in the Greenwich

High School auditorium The Birth Control Clinical Research Bureau of New York City on March 19th gave a tea and reception in her honor

Since 1934, Baroness Ishimoto has maintained in her home in Tokio a clinic where a physician gives birth control advice, and where printed material is prepared for distribution to women too far away to visit the clinic Birth control advocates in Japan are working on an educational program which will show parents the futility that is ahead for their children as members of a large family

"There is no law against birth control in Japan, and no religious prejudice, but there is opposition from the military faction, which is eager for Japan to keep up with Italy and Germany," the Baroness reports "Our leaders believe that strong soldiers are synonymous with a rich country My answer is that soldiers are stronger if they have grown up in families which have been able to adjust their size to their incomes Many of our soldier conscripts are suffering from tuberculosis"

Japan's population is increasing at the rate of one million a year, she points out, in spite of the fact that a large part of the population is subsisting on a starvation diet and the island is so crowded that even the slopes of the volcano of Fujiyama are being used for residence Infant mortality is alarmingly high

**EGYPT** Birth control by married Moslems has been generally approved by the Grand Mufti, leader of the Mohammedan religion in Egypt In a dispatch from Cairo, which appeared in the *New York Times* of February 3rd, the Grand Mufti is reported to have issued a statement saying that birth control is not contrary to the sacred laws of Islam, provided it is necessary and not harmful to the health Abortions were condemned in the strongest terms

"Birth control has been steadily gaining in Egypt in recent years and is now reaching the peasants who wish to avoid the huge families of the past," the dispatch commented

**HOLLAND** "The Dutch, oldest systematic practitioners of birth control, are now the tallest and healthiest species of oft stunted Europe Their carefully limited families have, for generations, received a maximum amount of food and care Their watery land is cramped for space, but birth control—not wars of expansion—solves the problem Holland's neighbors in Europe and Asia please note"

—*Review of Reviews*, August, 1936

**ITALY** Chancellor Hitler may cloak the Reich's population policies in a plea for Nordic supremacy and the preservation of the German race, but Premier Mussolini frankly admits that more soldiers is the objective of his campaign for more babies

"Without a large population there is no life, no youth, no military power, no economic expansion On large families, in exceptional times for the fatherland, will fall the heavier sacrifices and greater contributions of men," states the seven point program for increasing Italy's population which was approved on March 4th by the Fascist Grand Council, with Il Duce presiding This highest legislative body of the land devoted most of a five hour session to the declining birth rate and the need of more children for Italy's armies of the future

The program provides that priority in employment and in promotion shall be given to fathers of large families Men with families shall receive higher pay in proportion to the number of their children Loans shall be provided to enable young working men to marry A central organization shall be established for "the control and promotion of the regime's population policies"

**RUSSIA** The Soviet Union finds itself ill prepared for the great increase in the birth rate that has followed the anti abortion law of last July Births in Moscow have increased 65 per cent, and maternity costs only 13 per cent, reports the United Press Corridor tables and stretchers are being utilized by hospital authorities to handle the increase in maternity cases Mothers are being forced to leave maternity wards within four or five days after birth

The government's program to provide increased hospitalization and medical care has lagged far behind the schedule mapped out for it *Izvestia* points out that in many cases construction has not yet been started on hospitals and rest homes supposed to have been finished in 1936 The People's Commissar of Public Health admits, "We are poorly prepared for the great increase in the birth rate with which we are already faced as a result of the government decree forbidding abortions We must make up for time lost and rectify the position by all measures and by an enormous effort"

In a recent lecture before the League for Political Education in New York, Maurice Hindus stated that though birth control is legal in the Soviet Union, it is frowned upon A woman can get information on how to avoid conception, but birth control supplies and appliances are scarce, and, for the most part, inefficient

## What the States are Doing

### Michigan League Holds Annual Meeting

The hope that "every city and county unit will establish at least one birth control clinic during the year" was voiced by Mrs Addison P Cook, president of the Maternal Health League of Michigan, at its annual meeting held in the Women's City Club, Detroit, on February 19th

A stimulating address was given at the annual luncheon by Dr Norman E Himes, professor of sociology in Colgate University, and author of "Medical History of Contraception" "Birth control is a direct challenge to our intelligence and no civilization ever arrived at a sound policy by waiting until all the facts were available before attempting reform," Dr Himes declared He urged clinic workers to view their problems broadly, and to recognize that ultimately birth control clinics may have to enter the marriage counselling field, advising men as well as women

Dr Himes congratulated the League on its achievements "Michigan probably leads all states in the extent to which the leaders of the birth control movement have been able to enlist the active support of physicians, social workers, and public health officials," he said

Dr Lent Upham, professor of sociology at Wayne University, introduced Dr Himes Mrs James McEvoy, president of the Detroit Maternal Health League, reported 622 new patients and a total of 3,623 visits for the city's three birth control clinics during 1936 At the North End Clinic, 58 per cent of the patients are on the relief rolls, she said

### New England Progress Reported

Impetus to the birth control movement throughout New England was given by a luncheon and open board meeting held in Providence on February 10th and sponsored by the Rhode Island Birth Control League Guest speakers represented all the New England states having organized leagues The luncheon was attended by 125 men and women, including representatives of nearly every welfare and hospital board and staff Splendid newspaper publicity was secured

"Our audience was able to gain a broader understanding of what we are trying to do in Rhode Island by a picture of what other New England states are accomplishing," reports Mrs Thomas K Chaffee, executive vice president of the Rhode Island League "We New Englanders are proud of each other"

Dr Robert H Whitmarsh, president of the Rhode Island League, who acted as chairman, spoke of the advance which the birth control movement is making against indifference, prejudice and selfishness Guest speakers were Mrs Deane B Small, president of the Maine Birth Control League, Mrs Harold A Woodward, social worker of the Concord, New Hampshire, Maternal Health Center, Mrs Caroline L Carter Davis, field secretary of the Massachusetts Birth Control League, and Mrs A Morgan Pease, president of the Connecticut Birth Control League

"Our own timidity and inertia, and the inertia of the community at large is the greatest opposition we have to face in birth control work," Mrs Pease declared

Dr Eric Stone, past president and chairman of the clinic committee of the Rhode Island League, gave a brief summary of the League's activities since the establishment of its first clinic in 1930 The percentage of abortion cases among all cases admitted to the gynecological service in the Rhode Island Hospital has declined from 28.9 per cent in 1932 to 11.9 per cent in 1936, he stated "While it is not claimed that this decrease is due entirely to the efforts of the maternal health center, it is to be noted that at least a dozen patients who appeared year after year, sometimes more than once a year, in the hospital wards in the throes of abortion or miscarriage, are now patients at the clinic and have not become pregnant since the receipt of contraceptive advice," Dr Stone pointed out

The delegates voted to have a yearly regional New England Conference Connecticut will be host to this conference in the spring of 1938

### Mrs Sanger on Speaking Tour

Local birth control centers have been fortunate in securing lectures by Margaret Sanger to forward their work both inspirationally and financially The Pennsylvania Birth Control Federation has arranged a speaking tour by Mrs Sanger early in April On April 2nd, she will be the principal speaker at the Federation's Tenth Birthday Luncheon, in the Bellevue Stratford Hotel, Philadelphia She is scheduled to speak on April 6th in Scranton, April 7th in Wilkes Barre, April 8th in Chester and April 9th in Bethlehem

An address given by Mrs Sanger in February proved invaluable from the standpoint of publicity and of widening financial support for its work, reports the Evanston Center of the Illinois Birth Control League

An audience of more than six hundred gathered in the First Methodist Episcopal Church to hear the pioneer lay leader of America's birth control movement. Many listeners, while theoretically in favor of birth control, needed only to have pointed out to them what its universal acceptance could mean to the national and international scene to be convinced of its value as a social reform.

Invitations were extended to doctors and to the heads of welfare and social agencies to attend a reception which followed the lecture.

### Thrift Shop Aids New York Centers

The reselling of articles in a thrift shop has proved a valuable source of funds for the New York City Committee of Mothers' Health Centers, which maintains twelve birth control centers in settlement houses of Manhattan and the Bronx. The Committee is one of five social organizations which cooperate in running the West Side Thrift Shop.

A novel fashion show was held for the benefit of the shop during the luncheon hour at Sherry's on March 30th. Modern costumes were contrasted with those worn for the same occasions in bygone days. Guests brought packages of rummage as part payment of admission.

New Yorkers who wish to contribute articles for the shop may notify Mrs. Frederic Cromwell, 159 East 62nd Street, who will see that the rummage is called for. In this way they can help the work of contraceptive centers which last year had 16,000 visits from mothers too poor to consult a private physician.

### MEETINGS

A special meeting of the American Birth Control League will be held at 10 00 A M on Thursday, April 8, at the Bank of the Manhattan Company, Madison Avenue at 64th Street, New York City, for the purpose of amending the by-laws. Changes are proposed affecting principally Article III, Section 3a, and Article VI, Section 1.

The spring convention of the American Birth Control League, which was to have been held in Louisville in April, has been cancelled at the suggestion of the Kentucky Birth Control League. We look forward to meeting in Louisville another year.

Though the city is recovering rapidly from the recent disaster, the flood caused postponement until April of the Community Chest Drive. With all social agencies concentrating on the drive, April would not be timely for our meeting, the Kentucky League points out.

As an associate group of the National Conference of Social Work, the American Birth Control League will hold meetings on May 24, 25 and 27 during the week the Conference meets in Indianapolis. Speakers will be announced in the next issue.

## BIRTH CONTROL REVIEW

*Published Monthly by the*

American Birth Control League, Inc  
515 MADISON AVENUE NEW YORK N Y

*Sent to all members of The League  
and of its affiliated organizations*

Vol IV No 7 (New Series)

APRIL, 1937

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## New Florida Center Opens

The Mothers' Health Center of St Petersburg, Florida, has just opened its doors to give contraceptive advice to indigent mothers, and is the first service of its kind in Pinellas County. Complying with the highest clinic standards, the center is welcomed as a member organization of the American Birth Control League.

It was largely through the efforts and enthusiasm of Mrs William DeBeck, chairman of the center, that this much needed service became a reality. A visit to St Petersburg by Mrs Louis deB Moore, chairman of the board of directors of the American Birth Control League, helped to crystallize local interest. A group of distinguished men and women representing many fields of interest serve as the advisory board. Committees on ways and means, membership, publicity, program and investigation have been appointed.

Dr Whitman C McConnell is medical director and the medical staff includes six physicians. Instruction in the technique of contraception will be available at the center to physicians and medical students.

Patients are asked to pay twenty five cents for the first visit and ten cents thereafter. Those who cannot pay receive instruction and supplies without charge. Patients are accepted on the recommendation of physicians, ministers, nurses or social workers. The county health unit is cooperating, and has furnished equipment.

The announced purpose of the center is not only to help parents to plan their families in the interests of maternal and child health, but "to bring to this community an intelligent understanding of the part a maternal health program can play in community welfare."

Room 912  
515 Madison Avenue  
New York, N Y

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APRIL 1937

## Deeds and Dollars

With labored pencil on a postcard this call for help was recently addressed to us

Dear sirs please send me a birth control clinic right away and oblige—

If only we could oblige!

If only we could send a birth control clinic to every one of the hundreds of desperate mothers who appeal to us just as urgently!

But in spite of the 298 clinics already established and in spite of the fact that we have 534 qualified referral doctors throughout the country, our work has only begun

The birth control movement must expand. For the very minimum of work that should be expected of us this year, we have increased our budget fifty seven percent.

To raise the necessary \$66 000 we must have the support of everyone who believes in bringing medical birth control to unfortunate mothers who have only a pencil and a postcard to help them now

Won't you give something for them?

Please make checks payable to  
**AMERICAN BIRTH CONTROL LEAGUE INC**  
515 Madison Avenue New York City

(Or send to us through your own state league)

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