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Population Trends in Relation to
Birth Control, as seen by

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Contemporary Population Changes in Relation to Birth Control

CHANGES are taking place in one of the most important areas of national life in the United States, which, if their importance were generally understood, would be topics of earnest conversation wherever two or three Americans are gathered together. After three centuries of growth of population at a rate probably never equalled on a comparable scale in human experience, the population of the United States is now manifesting a rapidly diminishing rate of growth, with a balanced population indicated in the very near future. Whether the present trends will continue beyond that point, and we shall find ourselves entering an era of actual population diminution, there is no way of knowing. There is nothing in the present figures themselves to indicate any slackening in the rate of decline, or to provide any guarantee that we shall not witness a reduction of numbers for an indefinite period.

Certain spectacular facts will serve to illustrate these points. In 1935 there were 1,600,000 fewer children under ten years of

age in the United States than five years earlier. When the census of 1940 is completed, it will show that for the first time in our national existence, except for the war decade 1910 to 1920, the numerical growth of population for the decade has been less than that of the preceding decade. In point of fact, the increase between 1930 and 1940 will probably be not much more than half of the growth between 1920 and 1930.

These remarkable changes are statistically attributable to the closing of the spread between our birth rate and death rate. For half a century and probably more both of these rates have been declining, and the drop in the death rate has been sufficient to offset to a considerable degree the drop in the birth rate, leaving a significant net increase. But within the past dozen years the death rate has leveled off, and there is every reason to believe that within the next two decades it will show a notable rise. The birth rate, however, has continued to fall, and there is no statistical evidence of any check in the tendency.

Behind these statistical pictures there must have been going on certain great changes in human behavior, and in the personal motivation that lies back of that behavior. As to what these changes are, we have no precise and comprehensive knowledge, but there can be no doubt that one of the most influential factors among them has been the spread of the knowledge of birth control and the availability of contraceptive devices. Birth control must accept a large part of the responsibility for the situation in which we now find ourselves—it cannot escape the responsibility for helping us to deal with the situation intelligently and constructively.

The prospect of a stationary population need cause no alarm in a country as large and rich as the United States. On the contrary, our hope may well be that this condition may spread as rapidly as possible to all the countries of the world. Indeed, a moderate decrease in population in many countries, including possibly our own, would probably have many beneficial effects. But the prospect of a serious and continuous diminution in numbers is sure to arouse consternation in almost any country, and is likely to lead to unfortunate consequences quite apart from the quantitative considerations themselves.

It is now, therefore, both possible and desirable for the birth control movement to divert its attention in the countries of Western civilization from purely quantitative matters, and to concentrate on cooperating with other agencies to promote the eugenic objectives of society. This will involve the intensification of its efforts to extend contraceptive facilities to the less fortunate elements of society, and should also include a marked expansion of sterility services in clinics and elsewhere.

HENRY PRATT FAIRCHILD

A Two-Fold Challenge

EXPERTS in population trends have contributed to this special number their views on the responsibilities and the future course of the birth control movement.

They present, first, the challenge to spread contraceptive information to families and to areas having low economic opportunity. This challenge the movement has been meeting to the limit of its resources, by serving through its clinics only the underprivileged. During the past year, decided gains have been made in extension of birth control service to rural areas, where birth rates are disproportionately high.

The second challenge—the need for a positive program—we shall attempt to meet through encouragement of planned parenthood, by increasing attention to sterility problems and closer cooperation with the eugenics movement. The articles in this issue offer timely guidance toward the goal of positive, as well as negative, control of human fertility.

Clinic Service in 1937

PATIENTS at birth control centers last year desperately needed information on child spacing for economic as well as health reasons. Forty nine per cent of the new patients were mothers of families on relief, according to the reports for 1937 which 170 centers submitted to the American Birth Control League.

Growth of cooperation with social agencies was a most encouraging trend of the year. Seventy six of the reporting centers received free space or financial aid from public or private social agencies, including city and county governments, Community Chests and public relief agencies. More than 50 per cent of the patients advised at 163 centers were referred by social agencies, physicians and nurses.

The Importance of Population Trends to the Birth Control Movement

By Frank W. Notestein

*School of Public Affairs,
Princeton University*

THIS country, and the other leading countries of the West, appear to be nearing the end of a three century epoch of population growth unparalleled in the history of mankind. Reductions in mortality, which quadrupled the world's population in three hundred years, recently have been more than compensated by declining fertility. In this country birth rates were falling by the first decade of the nineteenth century and they have continued downward virtually without interruption ever since. By 1930 the average woman was bearing 2.2 children instead of 7.8 as in the decade 1789-1799.

The decline was not simultaneous throughout the various sections of our population. In fact a lag in the spread of the small family from community to community and from class to class accounts in part for the present differences in fertility of our important population groups. These differences are large. During 1930 to 1935, fifty-five per cent of the nation's excess of births over deaths was contributed by that third of the population living in the principal agricultural areas. Within these areas the largest contributions came from the poorest sections. In 1930 the fertility of the population in the agricultural problem areas was 76 per cent above the permanent replacement level. On the other hand, in cities with 25,000 or more inhabitants, fertility averaged only 85 per cent of that necessary for permanent maintenance of the population and in one quarter of those cities it was less than 75 per cent of that level. Within each city fertility was highest among the poor

and unskilled and lowest in the business and professional classes.

There are a few signs that the differences in fertility are beginning to narrow. Recently, in the native white population, birth rates have declined most rapidly in the high fertility areas of the South and have tended to level off in the Northeast where they are very low. There are also some indications that differences are narrowing in the upper income groups. It seems likely that this trend will continue for some time.

While birth control has not been the underlying cause of these trends in fertility, it has been the principal means through which they have come about. We must credit contraception with permitting us to avoid a population so dense that low death rates would be impossible. But we must charge it with a large part of the existing differences in fertility which are resulting in a population drawn heavily from sections and classes with the least economic opportunity. If that process continues indefinitely, serious damage may be done. There is no proof that the damage will be genetic, for substantial innate differences between large sections and classes have not been shown to exist. The damage may be none the less real, for we are recruiting our population from families whose incomes provide inadequately for the healthy development of children, and from areas whose slender economic resources afford wholly inadequate educational opportunities and restrict the entire cultural life of the community.

Modern contraception is needed but is not available to the population of the poorest communities. The birth control movement deserves high praise for its resolution to meet this need. If it succeeds it may eliminate some of the most dangerous differences in fertility, but the result almost certainly will be a further reduction of the nation's birth rate.

A further serious reduction of the birth rate will do much to stimulate the already incipient underpopulation scare. For the country as a whole, fertility is already slightly below the level required if one generation is to replace itself with equal numbers in the next. Actually our population will continue to grow for some time because the high birth rates of the past have left us with a large proportion of the population in the childbearing ages. Soon these large groups will pass out of the fertile ages to be replaced by smaller groups already born. Death rates will rise, birth rates will fall and our natural increase disappear. Current trends suggest that we shall approach the turning point between 1960 and 1980 unless there is a real rise in fertility.

Changes that the decline in fertility are bringing in the age composition of the population are perhaps even more important. Between 1920 and 1930 the number of children aged six to nine, roughly those eligible for the first three years of school, increased by about one million. Between 1930 and 1940 they will decrease by about one and a half millions. On the other hand, during successive decades following 1930 the number of persons over age 65 will increase by about one and three quarters millions, two and three quarters millions, and three and two thirds millions. These changes already are attracting the serious attention of educators, students of old age security, and certain industrialists. They will receive na-

tionwide attention when the results of the 1940 census begin to flood the press and popular journals.

What students of population think of these trends is not very important. What the public will think and how it will act may be very important for the birth control movement. In Western Europe, where birth rates have dropped even more rapidly than in this country, a number of countries have introduced new restrictions on the dissemination of contraceptives, taxes on the single, marriage loans, bonuses for large families, and wage scales adjusted to the size of the family.

In this country the reaction may be even more severe. Growth, development, and expansion are concepts so deeply ingrained in our national temper as to be thought of as peculiarly American. The dwindling numbers of young people and the increase of the old may become symbols of stagnation and decadence to an aroused public. A public aware of its population problems offers a unique opportunity for the birth control movement to secure a hearing for its program. But unless that program is intelligently conceived and ably presented, a national cry for action may lead merely to repressive legislation against the dissemination of contraception. If such legislation comes it will yield a higher birth rate, principally by exacting more children from the classes least able to bear the burden and to equip their children to become effective citizens.

For our present demographic situation the birth control movement is, I believe, too single mindedly occupied with one aspect of its proper field, the limitation of fertility. It has failed to realize perhaps that a self-replacing population, even under favorable mortality conditions, would require the birth of four or more children to about 40 per cent of the married women. At pres-

ent we are obtaining nearly enough large families to maintain a stationary population only because adequate contraceptive service is withheld from large groups in our most poverty stricken areas. If the service is extended to these groups, fertility will fall sharply below the replacement level, unless there is a compensating rise in other sections of the population.

Meantime there are many couples who want children and could have them if they had proper medical attention, or if parenthood entailed less severe economic penalties. The situation clearly points to the need for more emphasis on the positive aspects

of the freedom of parenthood. Freedom of parenthood that means freedom to prevent but not to bear children is at best hollow freedom. Both kinds are essential to a democratic society that intends to maintain its stock and culture through the voluntary acceptance of the obligations of parenthood. In the face of current demographic trends, movements that wish to retain the right to extend voluntary limitation of parenthood to all classes should also accept the responsibility of fostering positive freedom of parenthood. The need for an extension of programs in this direction is real and the time is strategic.

Who's Who in the Next Generation?

By Frank Lorimer

Secretary, Population Association of America

THE survival of most human beings from birth through the reproductive period is now ensured through an effective combination of natural and social conditions. The economy of nature provides that breakdown from organic disability does not ordinarily set in before the end of the reproductive period. Modern political organization and medical science supply food and prevent infection to such a degree that deaths of infants and youth through malnutrition, accidents, and infectious diseases have been sharply reduced. Therefore, according to calculations relating to the female white population of the United States in 1930, the force of reproduction is reduced only 11.6 per cent by all deaths, from birth through the childbearing ages.

In this situation, variations in the birth frequencies of different groups largely determine the composition of new generations. These variations are very wide at the present time. Some large groups in American life have net reproduction rates that are two

and three times as high as those of other large groups. Which are the groups that carry the greatest responsibility in this respect for replenishing the nation and transmitting through their family traditions the patterns of American civilization? Who's who in the next generation?

Clearly the major relative contribution to the next generation is not coming from the broad middle classes of American cities—shopkeepers, clerks, skilled manual workers, technical, and professional workers. These classes at the present time are having only about three fifths the number of children sufficient for permanent population replacement. Professional, and skilled manual workers now seem to be having slightly larger families than the business and clerical groups, and families with moderately high incomes, rather more children than those with low average incomes. The evidence to this effect in Table I is confirmed by more extensive census data relating to children under ten years of age in families

TABLE I Differential Natality in American Cities Births per Thousand Native White Married Women in the Year 1935*

Occupation of head		Family income per year		Education attainment of wife	
Semi skilled	116	\$3,000 and over	88		
Unskilled	137	2,000 2,999	73	College	97
Professional	101	1,500 1,999	77	High School	98
Business	93	1,000 1,499	94	7th 8th grades	114
Skilled	101	Under \$1,000	137	Under 7th grade	140

*Standardized rates per 1,000 native white wives of native white husbands, National Health Survey data Newark, Fall River, Grand Rapids, St Paul, and Oakland samples combined From Clyde V Kiser, "Variations in Birth Rates According to Occupational Status, Family Income, and Educational Attainment," in *Milbank Memorial Fund Quarterly*, January, 1938

Applying Life Tables, 1929 1931, white females, and marital condition for native white females of native parentage in the urban United States, to the age-specific fertility rates for income classes reported by Kiser, the following net reproduction ratios per generation are obtained families with incomes over \$3,000, 65 per cent, families with incomes of \$2,000 to \$3,000, 55 per cent, families with incomes under \$1,000, 101 per cent

classified by rental value of home in the East North Central Division But the differentials between various middle and upper class groups in American cities are very small, whether comparison is made on the basis of occupation, family income, or educational attainment

The only native white urban groups that are distinguished by birth rates far above the usual level for city families are the unskilled workers, the very poor, and those with meager schooling They now have slightly more than enough children to replace the parent stocks in the next generation (see Table I) The foreign born in American cities still have more children on the average than the native white, but this contrast can be resolved into economic and other social factors Although fertile Negro families are apt to be large, the high frequency of childlessness among urban Negroes keeps the reproductive tendency of this group at a low level The only urban groups who as a class will be fully represented in the next generation are then the unskilled, needy, and unschooled native and foreign born white families

When we turn from urban to rural areas, we encounter much higher reproduction rates, but the differences in relation to economic and social status are even more striking

Here the most convenient index of fertility is the ratio of children under five years to women aged 20 44 years According to life table data for the white population of the United States, 1929 31, 444 children to 1,000 women at these ages are enough to supply permanent population replacement The variations in the fertility of the rural population in all counties in the United States, except those that are entirely urban, is shown in Table II Here we see that among the counties with the highest plane of rural living (Class A), nearly 60 per cent have moderately low ratios of children to rural women (though usually above the replacement level), and only three per cent have extremely high ratios By contrast, among the counties with the lowest plane of rural living (Class D), only three per cent have relatively low ratios of children to rural women, and over 50 per cent of these counties show ratios that are twice as high as the ratio sufficient for population replacement Obviously the heaviest levies for the replenishment of the nation's population now fall on the white and Negro families in the poor rural areas The children who grow up in these areas are often badly nourished, they receive meager schooling, and as they

TABLE II Distribution of Counties in Each Rural Farm Plane of Living Class by Ratios of Rural Children to Rural Women, 1930*

Plane of living	Ratios of children under 5 per 1,000 women aged 20-44 years				Total
	300-590	591-684	685-782	783-1,250	
Class A 141 290	395	205	53	23	676
Class B 84 140	208	230	169	83	690
Class C 35 83	50	164	249	191	654
Class D 5 34	23	83	191	369	713

*Data from Works Progress Administration, Division of Social Research. Total, 2,733 counties, exclusive of counties with no rural population. The plane of living index used here, developed by Professor C. E. Lively, includes six items: value of dwelling, telephone, auto, electricity, running water and radio.

reach maturity they must migrate in large numbers, seeking employment in more progressive communities.

Some of the differentials in reproductive tendency among American groups positively reflect differences in economic and social conditions favorable to the bearing and rearing of large families. This is true, for example, of the differential between middle class urban families and farm families in prosperous rural areas. The only significance of such a differential for social policy is that if a large proportion of the nation continues to live in urban areas, as seems inevitable from an economic standpoint, definite measures must be taken to establish economic conditions and cultural ideals more favorable to family life, child bearing, and population maintenance.

In many cases, differentials in reproductive tendency among individual families reflect differences in personal characteristics affecting readiness to assume responsibility for the nurture of moderately large families. It is interesting to find that the American Eugenics Society affirms that such self selection for parenthood, in a society in which all parenthood is truly voluntary, may provide the key to eugenic progress. "Eugenists believe that the good social order must provide conditions and motivations such that

parents of sound heredity will of their own volition have more children than at present, whereas parents of inferior heredity will have fewer children."

The largest differentials in reproductive tendency now in force in American society are entirely different in character. The highest birth rates, both within urban and rural areas separately considered, are not found where conditions or motives are most favorable to family life, but where ignorance, poverty and isolation make effective control of reproduction impossible at present.

This analysis suggests that the first principle of sound population policy, both in the interest of immediate human values and in the interest of the progress of civilization, is the elimination as rapidly as possible of those differentials in reproductive tendency that are the expression of poverty, ignorance, isolation, or incapacity. Along with efforts in this direction, earnest attention must also be given to the creation of new economic and social conditions and new cultural values that will invest the responsibilities of parenthood with greater security and joy. Such measures alone can result in voluntary population replacement of a sort that is favorable to the maintenance and progress of the highest values in American civilization.

Birth Control and Living Standards

By Guy Irving Burch

Director, Population Reference Bureau

SOME of the best friends of the birth control movement speak of contraception as a two edged sword I suppose all good swords have two edges, but one edge is generally blunt, while the other is a keen cutter The birth control movement, as I understand it, cuts in only one direction, and that direction is a good one for the welfare of human beings

The objective of the birth control movement today is to democratize the knowledge of contraception In countries that have passed the optimum or "right number" of people for the best interests of society, a democratic knowledge of contraception will decrease the population to some extent And this is as it should be But such knowledge will in no way endanger the adequate growth of population It can, on the other hand, make possible the largest population that is consistent with a given standard of living This is amply demonstrated in Holland, which is increasing faster in population than any country in the world with a comparable standard of living

In the first place, as Professors Thompson, Whelpton, Ogburn and Groves have pointed out, knowledge of birth control makes for more and earlier marriages This,

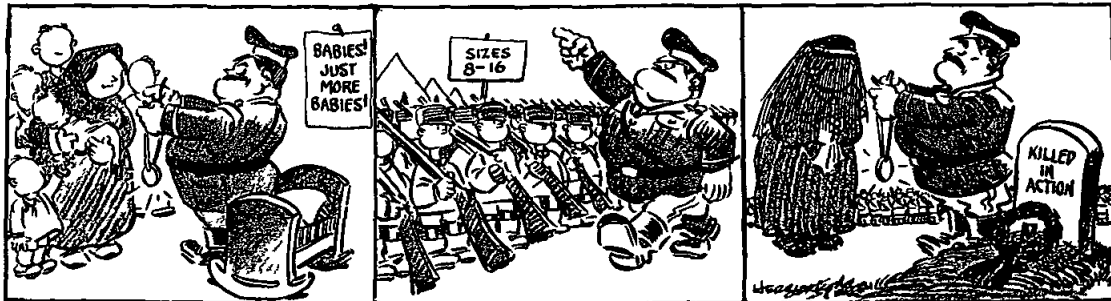
in turn, makes for a more even distribution of children among the adult population Population grows not only more evenly, but more efficiently and economically A comparison of the vital statistics of Ireland, which bans birth control knowledge, with those of Holland and the Scandinavian countries, is significant In Ireland, married people have overly large families, but a very low proportion of the population is married

As regards population growth, Holland and the Irish Free State have about exchanged places since 1840, the inhabitants of Holland increasing from three millions to eight millions, while the population of Ireland has declined from more than six millions to less than three millions It may be noted that Holland's most rapid increase began about the time she took up the practice of birth control, since 1880 her population has doubled Of course, emigration carried away a great many people from Ireland, but it also carried away almost as large a proportion of the population of Sweden, which country has doubled its inhabitants since 1840

Frequently we hear the warning that when birth control knowledge becomes

LIFE IN THE DAY OF A DICTATOR

Cartoon by Herblock courtesy NEA Service



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democratic, our population will "die out" The population of the United States is now 130,000,000 That it will increase ten to twenty millions more is almost a certainty Then the chances are that it will decrease to some extent, if birth control knowledge has become democratic And it is likely to continue to decrease slowly until economic opportunity makes possible an increase in the birth rate

We are told that if the population begins to decrease, it will be difficult to stop its falling We are told also that, when the small family system becomes the custom, it is difficult if not impossible to change that custom It is, indeed, difficult to change the small family system as long as economic and population pressure grips the fathers and mothers of the nation But if there were economic opportunity — of the natural kind that comes from the land—I believe we would see how quickly the small family system is modified

From many sources we learn that the disappearance of the geographical frontier has added to our economic, social and political woes Then why narrow the natural economic opportunity still further by increasing the population? Why not do something about the fundamental problem, instead of trying to pull ourselves out of an increasingly unfavorable natural condition by various trick experiments? The United States had no trouble about an abundant population increase until the descendants of those who settled the "great open spaces" began to flock back to the cities from the dust bowls where too many people had cut down too many trees and plowed up too much grazing land

True, compared with war threatened Europe and prostrate China, America is still a "virgin land" But who wants to emulate those parts of the world? We are always talking about how many people we "could

support," instead of how many people could be supported at the best standard of living In 1929, at the so called "peak of prosperity," about 40 per cent of the people were living near the subsistence level We have been so accustomed to thinking in terms of a standard of living that is relatively good when compared with that of other nations, that it is quite possible we have not the slightest conception of what is a good healthful standard of living

One of the arguments that seek to put a double edge on the birth control sword is that the poor and ignorant would not practice contraception even if they knew all about it This has been disproved repeatedly by studies in this country, and the case of Stockholm and certain other localities where birth control knowledge is democratic, furnishes definite evidence In Stockholm, for example, the upper income groups and the best educated are now having the largest families

Another argument or statement, that comes even from the friends of the birth control movement, is that no country where birth control knowledge is widespread is reproducing its population By this statement it is not meant that the population is not increasing, or will not continue to do so for some time The meaning is that women are not having enough children to produce an equal number of women thirty years hence (The difference in the number is very slight in the United States)

One might point to Sweden as an example of such a country There the birth rate was geared to an out flow of emigrants, and when emigration was stopped, Sweden had to find employment for those who would "normally" have left the country Under such circumstances, is it surprising that Sweden's birth rate has fallen very low? France or the United States might also be mentioned But can anyone show that eco

conomic opportunity in France or in this country warrants a further increase in population? On the contrary, there is good evidence that a smaller population could be living more prosperously and happily

Then there is the talk about a stationary or slowly decreasing population making us a nation of oldsters who cannot be adequately supported by those in the productive ages. But, as a matter of fact, it is characteristic of both a stationary and a slowly decreasing population to have a larger proportion of persons in the productive ages and a smaller proportion in the dependent ages than has an increasing population.

Today the United States has an excellent opportunity to slow down its population growth, become stationary, and perhaps slowly decrease to an optimum population in keeping with a high standard of living. But if we continue to increase too far past the optimum, we may encounter a really sharp drop in the birth rate, which will upset economic and social conditions, and the proportion of our age groups. Then the alternative would be to inflate the population still more, until we reached the fighting stage of Europe and ultimately the prostrate stage of China.

The Southern Regional Conference

BOTH inspiration and practical discussion will be found in the program for the Spring Convention of the American Birth Control League, to be held in Louisville, Kentucky, on Monday, April 25th, and Tuesday, April 26th. At least seven states will be represented. The Kentucky Birth Control League joins the American Birth Control League in extending a cordial welcome to you and your friends.

The high point of the conference, the luncheon on Tuesday, will have as its theme "Planned Parenthood." Dr. Richard N. Pierson, president of the American Birth Control League, will act as chairman. The

principal address will be given by Norman E. Himes, professor of sociology at Colgate University, and author of "Medical History of Contraception." A dynamic speaker, Dr. Himes is an outstanding authority on the birth control movement and its relation to social and population problems.

"Birth Control as a Public Health Measure" will be the topic of the Monday morning session, under the chairmanship of Mrs. Charles G. Tachau, president of the Kentucky Birth Control League. Dr. Woodbridge E. Morris, director, Division of Maternal and Child Health, Delaware State Board of Health, will speak on "The Public Agency" and Miss Geraldine Graham, executive secretary of the Children's Agency, Louisville, on "The Voluntary Agency."

Problems of clinic organization and administration will be discussed at a round table Monday afternoon. Marguerite Benson, executive director of the American Birth Control League, will preside. Physicians will meet on Monday evening for a symposium "Modern Medicine and Birth Control."

The Tuesday morning session on "Urban and Rural Maternal Health" will be under the chairmanship of Mrs. Louis deB. Moore, chairman of the Board, American Birth Control League. Speakers will be Mrs. James M. Todd, vice chairman of the Maternal Health Committee, Lexington, Kentucky, and Mrs. Marion Post, American Birth Control League field nurse.

The Negro family—and the relation of birth control to its problems—will be considered at the Tuesday afternoon session, to be held at the Negro Y. W. C. A. Dr. M. O. Bousfield, director for Negro health, Julius Rosenwald Fund, Chicago, has accepted an invitation to speak.

Teas and informal luncheons and dinners will afford further opportunities for delegates to meet and exchange ideas.

The Citizens Committee for Planned Parenthood

As a first step in a campaign to expand the nation-wide activities and services of the American Birth Control League, the Citizens Committee for Planned Parenthood will conduct a fund-raising campaign for \$263,990 this Spring in metropolitan New York

Never before has so distinguished a group of men and women come forward to back the League's effort of sixteen years to democratize knowledge on child spacing. The list given below of the Citizens Committee is further evidence of a rapidly awakening public realization of the social and economic implications of family planning.

THE COMMITTEE

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DR JAMES I RUSSELL
DR GEORGE H RYDER
REV GEORGE PAULL T SARGENT
REV THEODORE F SAVAGE
MRS WILLIAM JAY SCHIEFFELIN
JOHN M SCHIFF
MISS ROSE SCHNEIDERMANN
MRS LEOPOLD K SIMON
REV MINOT SIMONS
MRS F LOUIS SLADE
MRS JOHN SLOANE
JAMES SPEYER
DR CHARLES R STOCKARD
MRS JESSE ISIDORE STRAUS
MRS NATHAN STRAUS, JR
MISS ETHEL GRAY STRINGFELLOW
MRS DIEGO SUAREZ
MISS NELLE SWARTZ
MRS GERARD SWOPE
DR KENNETH TAYLOR
MRS FELIX M WARBURG
DR WILBUR WARD
MISS CONSTANCE WARREN
FRANCIS MINOT WELD
DR ALLEN O WHIPPLE
GEORGE WHITNEY
MRS ARNOLD WHITRIDGE
GEORGE D WIDENER
ALBERT EDWARD WIGGAM
DR HERBERT B WILCOX
DR EDMUND BEECHER WILSON
DR C -E A WINSLOW
MRS WILLIAM WOODWARD
MISS MARY E WOOLLEY

(IN PROCESS OF FORMATION)