

Miss LENROOT. The programs would be developed under this section in close cooperation with the rehabilitation services of the Federal Board for Vocational Education.

I want to call your attention to the fact that the appropriation for vocational rehabilitation, totaling approximately \$1,100,000 per year, is for persons 14 years of age and over, chiefly those who are employable. The amount in this section would be not so limited, and undoubtedly would be directed mainly to the younger-age groups. But we would hope to work out the program in very close cooperation with the rehabilitation services. The money made available in this section would be used primarily for restorative care, medical care, hospital care, and after-care, for diagnosis, and for locating the children in need of care. There would be some services which we certainly would have to work in close cooperation with the rehabilitation services, but the main feature of this would be the restorative and preventive care. We would hope to be able to help the States to develop means of getting in very quickly to children suffering, for example, from infantile paralysis, so that the causes that might lead to a serious crippling condition would be arrested at the earliest possible stages.

Because of the great need in rural areas and the difficulties of getting to these areas, this section of the bill again emphasizes the development of plans which would include special attention to rural areas; and similar provisions as to cooperation with medical and health groups and other agencies are incorporated in this section of the bill.

I think that completes my statement.

Mr. TREADWAY. Miss Lenroot, when I came to Congress, the gentleman from Wisconsin, Hon. Irving L. Lenroot, was one of the leaders of the House in both constructive legislative ideas and ability to express himself most eloquently, forcibly, and clearly on the floor. I can well see where you have inherited his great qualifications for public service.

Miss LENROOT. Thank you very much, Mr. Treadway.

The CHAIRMAN. I concur in the remarks of my colleague. Mr. Lenroot was in Congress when I arrived and remained here a great many years. Since I first came here I have not seen a more capable or a better Member of Congress than he.

Miss LENROOT. Thank you very much.

Mr. McCORMACK. Miss Lenroot, on page 53, under the title "Maternal and Child Health", and on page 55, under the title "Care of Crippled Children", appears this language, in relation to the character of State plans necessary to comply with the requirements in this act, which, of course, would be Federal law [reading]-

A State plan must include * * * cooperation with medical, health, and welfare groups and organizations.

Just what does that language mean?

Miss LENROOT. It means that the work that would be carried on would have to be so planned as to be very closely coordinated with other services. For example, if we have a child-health program in a local community which has available a general public-health service, the exact way in which the child-health nursing and maternity nursing would be developed in relation to the other public-health nursing services would have to be set out in the plan so that there would be no duplication or overlap.

With reference to physicians, it would be very important to be sure that the county medical societies, for example, were being informed and being consulted with reference to the work that was to be undertaken, and that so far as possible the fullest cooperation was being obtained from the private physicians, as well as the agencies—such as the Tuberculosis Association or a society for crippled children or a privately financed visiting nurses association—to be sure that their work was being brought into the picture and that nothing that was developed would impair or detract from the very great service being done by these other groups.

Mr. McCORMACK. Who is going to determine what medical, nursing, or welfare groups and organizations the States will have to have in this set-up, assuming there are various groups? Who is going to determine that?

Miss LENROOT. The Children's Bureau would examine the plans that were submitted under the act and through the visits of the staff—certainly we want to get in personal touch with the States, as well as keep in touch through correspondence—would be able to determine whether the other existing agencies in the State had been brought into consultation and whether the available services in the State were being utilized. With reference to the local community, it would have to depend mainly upon the effectiveness of the State administration.

Mr. VINSON. As I read this, this plan is submitted by the State.

Miss LENROOT. The plan is submitted by the State.

Mr. McCORMACK. Yes; but it is a direction by the Federal Government to the State as to what the State shall do.

Miss LENROOT. The Federal Government is responsible for the approval of the plans submitted by the State.

Mr. McCORMACK. I know, but this is a direction by the Federal Government. If the State does not submit a plan that meets with the approval of somebody in Washington, relating to private activities entirely out of the scope of governmental activities, then somebody in the Federal Government can disapprove that plan. That is true, is it not?

Miss LENROOT. Yes; it would be true.

Mr. VINSON. Then I suggest that that same condition will obtain in respect of old-age pensions and unemployment insurance, where the administration of that law is left with the States.

Miss LENROOT. Yes, sir.

Mr. VINSON. The Federal Government has that power of reviewing the plan and seeing that it comes up to the general standard outlined in the bill; is not that correct?

Miss LENROOT. Yes, sir.

Mr. McCORMACK. I know, but there is nothing in the unemployment insurance or the old-age pension which directs the State in its set-up to go into the field of private activity, is there? This is a direction to the State as such as to what its plan must be in its own capacity.

Miss LENROOT. It would seem to me very reasonable to expect that in passing on a plan the Federal Government should take into consideration whether the funds available were reaching primarily areas that were poorly supplied with private services, whether they were used to supplement certain types of need that the private services did not supply, because we are not going to have enough

money to take care of the whole job here, or whether it was being unintelligently planned to duplicate services that were already given. That was the only intent of this particular phraseology.

Mr. McCORMACK. Of course, this language contemplates going into the field of charitable organizations, for example.

Miss LENROOT. Only insofar as they are brought into the general plan.

Mr. McCORMACK. But it does contemplate that, does it not? Are you not going to assume that the State is going to cooperate in every way possible, without the use of such language, with medical, nursing, and welfare groups, and organizations of a private nature?

Miss LENROOT. It seems to me very helpful to set forth in the bill, Mr. McCORMACK that—

Mr. McCORMACK. Do you not think that this language is unnecessary, and that is capable of a construction that the Federal Government is indirectly trying to dominate and control private charitable activities?

Miss LENROOT. No, sir. I would feel that it would rather assure private charitable activities that their functions were to be taken into consideration without any intent to dominate.

Mr. McCORMACK. This calls for the cooperation of the State with the private agencies.

Miss LENROOT. It is optional. If a private agency does not wish to cooperate, there is no way you can possibly coerce it. It is felt that the public agency must take into consideration what the private agencies are trying to accomplish, but there would be nothing that would impose any right on any State or the Federal Government to dictate or dominate in any way a private agency.

Mr. McCORMACK. This is the only part of this bill, is it not, that enters directly into the field of private activity?

Miss LENROOT. I do not think this does.

Mr. VINSON. I would like to suggest that on page 3, on your old-age pensions, you have a State plan submitted by the State to the Federal Government, and we have been told that there are many private institutions that have set up reserves for old-age pensions. You are going into that field under the old-age-pension plan just as much or more, as I see it, as here.

Mr. McCORMACK. Where is it? What is the language? Show me the language.

Mr. VINSON. Take section 4 [reading]:

A State plan for old-age assistance, offered by the State authority for approval, shall be approved by the administrator only if such plan (a) * * * (b) * * * (c) * * * (d) * * * (e) * * * and (f) * * *.

We have all those sections with a broad comprehensive foundation—

Miss LENROOT. Yes.

Mr. VINSON. That States must recognize in order to have uniformity and universality in the operation of the plan. It seems to me that the charitable institutions and organizations that the gentleman has referred to would be happy indeed to have the Federal Government come in here and cooperate with them somewhat in that work.

Mr. McCORMACK. Where is there on page 3—I am not discussing the authority of the Federal Government to approve reasonable management—with relation to old-age pensions any language that the State shall submit a plan of cooperation with any private charity?

Mr. VINSON. The Federal Government will approve it only if such plan [reading]:

(a) Is State-wide, includes substantial financial participation of the State, and if administered by subdivisions of the State, is mandatory upon such subdivisions; and

(b) Establishes or designates a single State authority to administer or supervise the administration of the plan and insures methods of administration which are approved by the administrator

Subsection (b) is the one that particularly fits.

Certainly that enters the field of private endeavor in respect to private industry, setting up funds for old-age pensions.

Mr. McCORMACK. Yes; but that calls for the establishment and designation of a single State authority. That does not call for the State authority to include in its plan to the Federal Government, under direction from the Federal Government, cooperation with any charitable activity.

Mr. VINSON. As I see it, it is all inclusive, when you say that this single State authority is going to be set up to administer or supervise the administration of the plan, and it insures methods of administration which are approved by the administrator.

Mr. McCORMACK. I cannot agree with my friend. We could argue all day, but I cannot agree with you.

Do you think this is necessary?

Miss LENROOT. I do not think it is necessary, but I think it is advisable to assure the medical profession, for instance, or the nursing profession, that these plans—

Mr. McCORMACK. Please get my thought in mind. I am not entering into any controversy about the practical advisability of it.

Miss LENROOT. No; I understand.

Mr. McCORMACK. I am discussing whether or not you think it is necessary to have incorporated in the bill that language.

Miss LENROOT. I should prefer that it be incorporated, but I do not think it is essential.

Mr. McCORMACK. It is not essential. I think you get my point.

Miss LENROOT. I get your point.

Mr. McCORMACK. Suppose, for example, there are seven different organizations in my State in the same field of activity. Suppose the State plan recommends cooperation with one, and the other six demand that they be recognized. There is likelihood of controversy there. Suppose that the State plan recommends one and somebody down here does not approve that one, but approves somebody else, because we know that charitable organizations, many of them, are disguised. They have objectives with which some people could not honestly agree with.

Miss LENROOT. Yes.

Mr. VINSON. What language does the gentleman refer to as not being essential?

Mr. McCORMACK (reading):

and cooperation with medical, health, and welfare groups and organizations.

Outside of that language, everything else is a direction to the State in the performance of its duty as a sovereign body. That is true, is it not?

Miss LENROOT. Yes, sir.

Mr. McCORMACK. This is the only language in the entire bill which goes beyond that proper sphere and makes a direction to a State with reference to a worthy, deserving, but private field of activity. That is true, is it not?

Miss LENROOT. If you interpret the language that way. Of course, Mr. McCormack, as I pointed out before, it seems to me very important that this go on record that we are not going in to upset the whole tradition of medical practice, for instance. We are going to take into account the contributions and views and the services available through private physicians, through private nursing groups, and through other groups.

Mr. McCORMACK. That is true, and I am in harmony with it in its practical operation, but when you put the specific language in there, it is establishing a policy which we have never established before.

Miss LENROOT. I can only repeat that I do not think it is essential language. I should greatly prefer to see it left in, but I do not—

Mr. McCORMACK. But you have no objections to it?

Miss LENROOT. I say the bill could be administered without it.

Mr. VINSON. I would like to suggest that the policy of allowing this credit to separate industrial units on the old-age-pension plan after the reserve is built up is certainly going into the field of private endeavor.

Mr. McCORMACK. Mr. Vinson, that is an entirely different proposition.

Mr. VINSON. I know; but you are making a broad statement that this language here is the only place in the bill where there is any invasion of the field of private industry, as I get your statement, and I just cannot agree with my good friend on that point.

Mr. McCORMACK. All right. On the old-age pensions themselves, the bill directs the State as to the broad essentials of its legislation. Within its broad essentials, it says to an employer: "You build up a 15-percent reserve after 5 years to meet the unemployment provisions, and you can thereby lower your production costs." We are going to recognize the field of private initiative. That is the purpose of it, is it not, and properly so?

Miss LENROOT. I presume so; yes.

Mr. McCORMACK. In other words, instead of throwing me in with the inefficient employer, if I am able to conduct my business where I can build up a reserve, my production costs would be less than 3 percent, and I stabilize my employment, I am going to receive the benefit of that.

Mr. VINSON. Thereby permitting the goods to be manufactured at lower cost to go in competition with the neighbor across the street who has not that preference. Is that correct?

Mr. McCORMACK. The theory of that is to prevent standardization, is it not?

Miss LENROOT. I presume so.

Mr. McCORMACK. Yes; and regimentation, in a sense. That is true, is it not?

Miss LENROOT. I am not qualified to speak for the old-age and unemployment sections of the bill.

Mr. McCORMACK. But that is a direction to the State as to what is contemplated as a public activity, a public duty, a public responsibility. That is true, is it not?

Miss LENROOT. Yes.

Mr. McCORMACK. And by State law. That is true, is it not?

Miss LENROOT. Yes.

Mr. McCORMACK. The private charities are organized in the main outside of State law, are they not?

Miss LENROOT. Yes.

Mr. McCORMACK. Deserving though they may be, and meritorious, you would not want by any language in this bill to put private charities directly or indirectly under the domination of the Federal Government, would you?

Miss LENROOT. No, sir.

Mr. McCORMACK. Do you not recognize that there might be that possibility under the language employed there, although the framers of it never so intended?

Miss LENROOT. I still do not see it, sir; but as I said before, the language is not absolutely essential.

Mr. VINSON. When you strike it out, though, you may prevent this Federal fund from cooperating with these worthy organizations and thereby limit the beneficial effect?

Miss LENROOT. You might at least create an apprehension.

Mr. McCORMACK. This Federal fund is for those organizations who cooperate?

Miss LENROOT. Yes.

Mr. McCORMACK. They will cooperate anyway, in all probability, will they not?

Miss LENROOT. The only thing this was intended to do was to make sure that the public effort was not directed in a way that would upset or jeopardize the general community services, which must include both public and private to be complete.

Mr. McCORMACK. Suppose there are several organizations and one is given the preference. That would upset it, would it not?

Miss LENROOT. Presumably the one that was given the preference would be the one that was really rendering service.

Mr. McCORMACK. But who is going to pass on that? The other 6, if there are 7, will say that the one who determined that is wrong.

Miss LENROOT. It seems to me that this language of cooperation is very general language, and would not require a State to submit exact details as to all of the agencies. For instance, in some cities there are as many as 60 or 70 or 90 agencies in a council of social agencies. You would not expect a State plan to list all those agencies, to single out this agency and that agency, but you would expect them to say that a welfare or health organization, for instance, was cooperating and joining in with the community plan being carried on by the council of social agencies.

Mr. McCORMACK. Under this is a possibility of what somebody might term "discrimination." In other words, I do not see the necessity of this language, but I can see where, if it is permitted to remain in there, it is likely to do an awful lot of harm. You want to remember that there are various groups. This is a country of various nationals, various issues, various emotions.

Miss LENROOT. I appreciate your concern, sir.

Mr. McCORMACK. You have to be very careful when you go into the social field and undertake to have the Federal Government

directly or indirectly inject itself in there and affect those who are working in the social or the charitable or the medical fields.

Miss LENROOT. I appreciate it, sir. If the committee feels that the disadvantages of the language outweigh the advantages, I should certainly accept the judgment of the committee.

Mr. McCORMACK. My questions are not hostile, because I am friendly to it.

Miss LENROOT. I appreciate your attitude.

Mr. McCORMACK. I think I am making a constructive suggestion with reference to the future.

Mr. KNUTSON. I want to say at the outset of this that I also served with your father and concur in everything that has been said as to his ability.

Miss LENROOT. Thank you; I certainly appreciate that.

Mr. KNUTSON. I think there is considerable merit to the point that is made by the gentleman from Massachusetts. We know that there are a great many private agencies that are now engaged in this relief work, conducting orphanages, homes for crippled children, and so on. It would seem that we should throw ample safeguards about these organizations so that there would be no danger of their being discriminated against either intentionally or through prejudice. I think it can be done without seriously affecting the objects that are sought to be obtained by the bill.

Miss LENROOT. Yes, sir.

Mr. KNUTSON. What percentage of crippled children are cured or helped through treatment?

Miss LENROOT. May I ask Dr. Eliot that? Do you have that, Dr. Eliot?

The CHAIRMAN. Certainly, certainly.

Dr. MARTHA ELIOT. I cannot give you the exact figures in answer to that question. I know that in a recent report from Michigan there were a large number of children reported as cured, I think about 3,000 out of some 11,000 that had been under their supervision in the past 5 years.

I am giving those figures from memory, so that I cannot give you the exact figures.

Mr. VINSON. I do not know what the general practice is in regard to the surgeons throughout the country in this work on crippled children, but I do happen to know something about it in my own State of Kentucky.

Miss LENROOT. Yes.

Mr. VINSON. I just wondered if the surgeons throughout the country were generous in the contribution of their skill and services in this work? I know that is eminently correct in my State.

Miss LENROOT. I would say they were very generous. Would you not say so also, Doctor?

Dr. MARTHA ELIOT. Yes; very decidedly so.

Mr. KNUTSON. Miss Lenroot, how does this country rank in the matter of deaths of mothers from childbirth?

Miss LENROOT. It has a very poor record. There are almost no countries for which we have accurate information that have as high a death rate. We have a report in press on comparability and trend of maternal death rates in the United States and in other countries

The figures had been challenged on the basis that the procedure in ascribing deaths of women to causes connected with childbirth was not comparable as between the United States and different countries. Quite extensive study was made by the Children's Bureau in cooperation with the Bureau of the Census and in connection with the White House Conference, and the results show that in general, although there would be some changes if methods in use in certain foreign statistical offices were followed, the United States would still have one of the highest rates.

Mr. KNUTSON. How does the number of deaths compare in States and in countries where midwives are permitted to practice, as against States and countries where they are not permitted to practice?

Miss LENROOT. Will you permit Dr. Eliot to answer that question?

Mr. KNUTSON. Have you that information?

Miss LENROOT. Doctor, can you answer that?

Dr. MARTHA ELIOT. I can submit to the committee a table showing the trend of maternal mortality in the United States and in certain foreign countries. Certain of these foreign countries have, of course, a larger proportion of the deliveries done by midwives, and in a number of them, especially the Scandinavian countries, the maternal mortality rates are lower than in the United States.

Miss LENROOT. May we have this table introduced?

The CHAIRMAN. Without objection it may be inserted in the record.

(The table above referred to is as follows:)

TABLE XIV.—Trend of maternal mortality in the United States and certain foreign countries

Country	Maternal deaths ¹ per 10,000 live births																		
	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933
Australia.....	43	53	56	47	47	50	47	45	51	55	56	53	59	60	51	53	55	56	51
Belgium.....					72	60	57	53	56	58	50	61	57	60	62	52	49	48	
Canada.....							51	55	54	60	56	57	56	56	57	58	51	50	² 50
Chile.....	66	73	72	82	88	75	79	80	74	61	61	58	58	59	78	68	75	71	
Czechoslovakia.....					37	40	37	34	32	31	33	34	36	40	43	41	41	43	² 48
Denmark.....						16	20	26	23	24	27	31	27	32	38	40	35	36	
England and Wales.....	42	41	39	38	44	43	39	38	38	39	41	41	41	44	43	44	41	42	² 43
Estonia.....									45	40	38	41	41	50	46	49	43	34	
Finland.....		36	38	44	40	36	33	30	31	35	29	32	² 30	² 30					
Germany.....									53	50	49	52	55	55	54	51			
Greece.....							73	72	85	88	67	59	61	66	71	58			
Hungary.....		42	40	52	29	32	29	30	28	31	29	32	30	34	34	36	37	37	
Irish Free State.....	53	57	49	48	47	49	50	57	48	48	47	49	45	49	41	48	43	46	
Italy.....	22	27	30	37	29	28	26	25	27	32	28	26	28	28	20	27	28	30	
Japan.....	36	35	35	38	33	35	36	33	34	31	30	27	28	28	28	27	27	25	
Lithuania.....											59	56	60	50	57	60	62	55	61
Netherlands.....				29	33	24	23	25	23	24	26	29	29	34	34	33	32	30	² 32
New Zealand.....	47	59	60	52	51	65	51	51	51	50	47	42	49	49	48	51	48	41	44
Northern Ireland.....	56	50	51	47	46	69	52	47	49	45	44	56	48	52	49	53	51	53	
Norway.....	27	28	30	30	34	26	22	25	28	29	27	32	25	30	36	30	27	26	
Salvador.....						57	57	46	50	57	50	56	63	58	53	49	56		
Scotland.....	61	57	59	70	62	62	64	66	64	58	62	64	64	70	69	69	59	63	59
Sweden.....	29	27	25	26	32	27	27	25	23	24	26	29	28	33	38	35	37	² 27	
Switzerland.....		54	56	51	57	56	55	51	46	48	43	44	37	44	46	43	44	44	46
United States ³	61	62	66	92	74	80	68	66	67	66	65	66	65	69	70	67	66	63	62
Uruguay.....	22	29	32	30	23	34	33	27	27	25	25	30	22	24	24	31	24		

¹ Deaths assigned to pregnancy and childbirth.

² Provisional.

³ The United States expanding birth registration area. In 1915 it comprised 10 States and the District of Columbia; in 1933 the entire continental United States.

Figures from official sources.

Mr. KNUTSON. Miss Lenroot, how many bulletins on prenatal care and care of babies does your Bureau put out each year?

Miss LENROOT. We have one bulletin on prenatal care and one on infant care, and then dodgers and shorter leaflets on subjects connected with prenatal and infant care. The distribution of those bulletins varies from year to year. In 1933 the free distribution of Infant Care totaled 404,602 copies, and of Prenatal Care 161,701. In 1932 more copies were available—567,288 of Infant Care, and 228,828 of Prenatal Care.

Mr. KNUTSON. We put out a great many more bulletins on how to raise turkeys than that.

Miss LENROOT. We certainly do, and we never have enough to meet the need on infant care.

Mr. DINGELL. Regarding the medical profession in this instance, has the committee received any inquiries from the American Medical Association, for example? I know that they are intensely interested in the possibility of some so-called "regimentation." The reason I ask that question is that before I left Detroit the medical fraternity of Wayne County wanted to know something in connection with my personal views and the possibilities insofar as the Government's policy in the future was concerned. There has been some discussion or some mention made of nationalizing the medical profession. I am wondering whether in any set-up your committee has considered in connection with child welfare in the care of the infant immediately after birth, the care of the crippled child, or any other phase of this social-security program, there was any consideration given as to the possible regimentation of the medical profession so far as concerns taking this care out of the hands of the medical profession individually and placing it on some sort of a socialized basis.

Miss LENROOT. Yes, sir; there was consideration given to the policies with reference to the medical profession. A report was worked out in consultation with an advisory child welfare committee, which included in its membership Dr. Adair, professor of obstetrics at the University of Chicago; Dr. Grulee, professor of pediatrics at the Rush Medical School; and Dr. Grover Powers, professor of pediatrics at the Yale University Medical School. Next week I hope there are going to be hearings before this committee at which some of the physicians interested in the passage of this bill will appear to present testimony as to their belief that it is needed and that the provisions incorporated in this bill are sound.

There have been a great many letters and telegrams coming to the Secretary of Labor from public health officials and from physicians in various parts of the country urging the incorporation in the security program of provisions for public health and maternal and child health services. I am, of course, aware of the differences of opinion in medical groups as to policies of this character.

The American Medical Association has taken no action with reference to the provisions of this bill as yet so far as I know.

Mr. DINGELL. The traditional and ethical practice of the medical profession so far as individuality is concerned is fully protected, as you visualize the operation of this bill?

Miss LENROOT. Yes. That was one reason we wanted to leave in this clause about cooperation with medical and nursing groups.

Mr. DINGELL. In other words, there is no provision or interpretation of any sort in this bill whereby private initiative of the medical profession is to be at all disturbed?

Miss LENROOT. It does not seem to me so, sir. I may illustrate by a type of activity that the Bureau has carried on for years in having a professor of obstetrics at Emory University, Georgia, give refresher courses to physicians in active practice as to the best methods of obstetric care. He goes into a State on the invitation of the State board of health and the State medical society, which arrange with county medical societies for groups of doctors to be brought together and given instruction as to the best methods of obstetric care. We have had hundreds of letters from private physicians in areas covered by this service expressing their great appreciation of its value.

Mr. DINGELL. What I am driving at is this, particularly, Miss Lenroot, that the fear on the part of some medical men in this country today is that the medical profession is going to be taken over by the Government is without foundation.

Miss LENROOT. Yes, sir; I know that fear exists.

Mr. DINGELL. The medical profession will function on the same basis as heretofore.

Miss LENROOT. Yes, sir.

Mr. DINGELL. And that they will take care of the health services. I am just wondering, inasmuch as this is probably the first consideration given to the extensive service of the people from a Federal standpoint, as to child welfare, the care of mothers, prenatal and postnatal, and the care of crippled children, if there is any semblance of danger of any contemplated move on the part of the committee to bring about such regimentation as the medical profession fears.

Miss LENROOT. No, sir; I think not. I think the services in the bill will be mainly for strengthening the resources of the community, for education of mothers as to the importance of going to private physicians if they can possibly do so, and any plans that are developed with reference to any of the features of the bill will be developed with a close cooperation and after consultation with the medical resources in the community.

Mr. DINGELL. I send out very religiously all of my prenatal and infant-care books. I have fought with the Department for more books; I have traded my year books and the books on the care of hogs, and so forth, for baby books; and I have tried to get those out to my people as far and as widely as I could. But we have had an avalanche of births in my district. I do not know whether it is as a result of this depression or in spite of it. But at any rate, I have not enough books. I am anxious to get an expression here now of record, because I hope to be able to get an increase in appropriation for these valuable baby books. I think we are overlooking a bet. I am wondering whether the Department has made any effort to increase the appropriation for bulletins on prenatal care and infant care.

Miss LENROOT. Yes, sir. The appropriation bill pending before Congress carries some increase in the Department of Labor printing fund. Some of that increase is intended to make available a somewhat larger number of bulletins on infant care and prenatal care than we can now distribute. This is about our lowest point. Our funds are very short, and the printing costs have gone up very materially in the

Printing Office. Our estimates for this year as sent in to the Bureau of the Budget would have provided for enough money to about come back to our distribution of 2 or 3 years ago.

Mr. DINGELL. What was that, do you remember, Miss Lenroot?

Miss LENROOT. I think there were about 560,000 bulletins on infant care at the peak, distributed free of charge.

Mr. DINGELL. My quota is 75 a month. I need 450. I swapped with some of my rural friends. But the number I have is insufficient.

Miss LENROOT. You might get in touch with the Appropriations Committee.

Mr. DINGELL. I would be glad to do that, but I would like to get some official support from your department.

Miss LENROOT. We should like very much to be able to distribute them more widely.

Mr. BROOKS. In the first map that you showed us here——

Miss LENROOT. Infant mortality.

Mr. BROOKS. There is quite an outstanding record there in the State of Washington.

Miss LENROOT. Yes, sir.

Mr. BROOKS. Is there any reason that you know of or cause for that? Is there any activity there that might cause that?

Miss LENROOT. Washington has always had a low rate. It is partly the climatic conditions. Those Western States seem favorable. I suppose it is partly the character of the population and partly the services that have been made available. Washington has always been very low.

Mr. DUNCAN. Miss Lenroot, in your direct statement you mentioned something about the administration by the F. E. R. A. Did I understand that correctly?

Miss LENROOT. Yes, sir. The mothers' pension part of the bill.

Mr. DUNCAN. That is in the States?

Miss LENROOT. No, in the Federal administration. The State administration would be through established State agencies for administering mothers' pensions. It might be the juvenile court, it might be a welfare department, or some other agency.

Mr. DUNCAN. You do not recommend that the Federal Emergency Relief Administration in the States have anything to do with the administration of this?

Miss LENROOT. No, sir; because it is a permanent not an emergency program. Ultimately all those services should be coordinated, of course.

Mr. DUNCAN. The reason I ask if the Federal Emergency Relief Administration would do that is because it is not particularly popular in my State.

The CHAIRMAN. We thank you, Miss Lenroot, for your appearance before the committee and the very helpful information you have given us.

JANUARY 29, 1935

THE CHAIRMAN. It has been suggested that Miss Lenroot, of the Children's Bureau, would like to make a supplementary statement. If that is the case, we shall be pleased to hear Miss Lenroot.

**FURTHER STATEMENT OF MISS KATHARINE LENROOT, CHIEF,
CHILDREN'S BUREAU, DEPARTMENT OF LABOR**

Miss LENROOT. Thank you very much, Mr. Chairman. I appreciate this opportunity.

I understand that there were some questions raised yesterday morning as to certain administrative features of the bill which I did not cover in my testimony the other day, because I was talking about the need for the types of services provided.

The bill provides that the maternal and child-health sections and crippled-children sections shall be administered by the Children's Bureau in the Department of Labor, the Secretary of Labor having responsibility for making the allotment.

I wanted to explain to the committee that the health work in the Children's Bureau is under medical direction and has always been under medical direction.

The assistant chief of the Children's Bureau is associate clinical professor of pediatrics at Yale University and 1 of 3 women members of the American Academy of Pediatrics. She has a very distinguished reputation among physicians throughout the country. She was formerly director of the maternal and child-health division of the Bureau and was promoted to be assistant chief last month. Her former position will be filled by a physician.

We have 4 full-time medical officers on the staff and 2 temporary medical officers and 2 part-time medical officers.

We have two advisory committees of distinguished experts: An obstetric advisory committee and a pediatric advisory committee, whose names I should like to file in the record, Mr. Chairman.

The CHAIRMAN. Without objection, those names may be made a part of the record.

(The names referred to are as follows:)

Obstetric advisory committee:

Dr. Fred Adair, professor of obstetrics, University of Chicago.

Dr. Robert De Normandie, clinical professor, department of obstetrics, Harvard Medical School.

Dr. James I. McCord, professor of obstetrics, Emory University, Atlanta.

Pediatric advisory committee:

Dr. Richard M. Smith, representing American Pediatric Society, professor of child hygiene, Harvard School of Public Health.

Dr. Julius Hess, representing American Medical Association; professor of pediatrics, Illinois Medical School.

Dr. Samuel McC. Hamill, representing American Academy of Pediatrics; chairman Pennsylvania emergency child health committee.

Dr. Howard C. Carpenter, representing American Child Health Association.

Miss LENROOT. All of the plans contemplated under the bill would be developed under medical direction as the State agencies of health would be the responsible State agencies. It would be the object of the administration to have all of the local plans developed with medical assistance and under medical supervision.

The Children's Bureau for many years has had continuing contacts and experience with the State directors of child hygiene in the State departments of health.

As I pointed out the other day, our physicians during the course of the last year have visited every State in the Union and conferred with the State directors as to problems concerning the health of children, and some of them have been visited several times.

We have had, of course, actual administrative experience in developing cooperative relationships with the States during the period when the maternity and infancy act was in operation, from 1922 to 1929. And, since that act terminated, we have been in continuing contact with the State divisions. I referred the other day to the work that was being done with the family physicians and the country doctors in isolated rural areas who have obtained a great deal of help, in several of the Southern States, particularly, and in one or two other States, in having brought to them the most recent information as to methods of obstetric care.

In addition to its contacts with physicians and health officials, the Children's Bureau has, of course, a very large constituency of women who look to it for health advice in dealing with problems concerned in the welfare of their children.

There is, of course, a very close relationship between the health and welfare services. The provisions with reference to crippled children, for example, involve a very close integration of health services and social-welfare services to determine need and to see that the children's homes are such that they can get the kind of care they need after the delicate operations have been performed that their conditions may require.

The Children's Bureau is a bureau which has contacts with both the health and welfare agencies of the States.

I want to call to the attention of the committee also the fact that the plans incorporated in this section of the bill were developed in consultation with an advisory committee of which one member was Dr. Abercrombie, of Georgia, who is the president of the Conference of State and Provincial Health Authorities; and also, the recommendations were gone over with the technical expert serving with reference to the development of the public-health sections of the bill.

The public-health advisory committee in its report to the Cabinet committee recommended an appropriation of \$3,000,000 for administration through the Children's Bureau; \$1,000,000 for research and demonstration and \$2,000,000 for cooperation with the State agencies of health.

When we came to review the needs of the States and the impossibility of the States matching all of the sums made available, we added an appropriation of \$1,000,000, of which \$800,000 is to go to this discretionary fund to help the poorest States in enabling them to take advantage of the act.

The technical expert on the public-health side of the measure stated to me that these recommendations were in entire harmony with the plans of the public-health committee.

I also want to call to the attention of the committee the fact that we recognize very fully the need for coordinating the public-health services of the Federal Government and that the act would be administered with every possible effort made to bring all of the services for the health of mothers and children into very close relation and harmony with the services that would be developed under the public-health sections of the bill.

I thank the committee very much for opportunity to make this additional statement.

Mr. TREADWAY. Miss Lenroot, we are very glad to welcome you back to our meetings.

Miss LENROOT. Thank you, Mr. Treadway.

Mr. TREADWAY. You have been very enlightening in the testimony you have given the committee.

Miss LENROOT. Thank you.

Mr. TREADWAY. I think you were here yesterday when I was endeavoring to get a little line on whether or not there was any duplication.

Miss LENROOT. I was not here in the morning.

Mr. TREADWAY. Perhaps that occurred in the morning—it did. We have, as you have noticed, a bill with eight different titles.

Miss LENROOT. Yes, sir.

Mr. TREADWAY. Quite distinct subject matters being dealt with.

Miss LENROOT. Yes.

Mr. TREADWAY. Of course, I assume that it comes within the general idea of social improvement of the people. But there are two things that have troubled me. First, the parentage of this long bill. Who has furnished all of the material that has been compiled to make up this bill?

As yet I have not been able to find that there is any distinct authorship, except that it is the administration idea.

Of course, I do not know that there is any need of our knowing who the author is. Nevertheless, it does seem to me this ought to be more than a compilation of the various ideas. Here are eight titles. I was quite surprised when I was told that the Public Health Service—that was during the testimony of Dr. Waller yesterday—had nothing whatever to do with maternity, children's care, or the care of crippled children. That is, those matters are out of their jurisdiction and are in yours.

Miss LENROOT. Yes, sir.

Mr. TREADWAY. I am wondering whether you feel that there is a distinct cleavage between what might be done under Public Health and what might be done by your Bureau.

Now, is there a duplication? Is there likelihood of interlocking or overlapping of authority? For instance, your Bureau has authority to send people out into rural areas and look after the children.

Miss LENROOT. Yes, sir.

Mr. TREADWAY. And the Public Health Service has a right similar to that.

Miss LENROOT. Yes, sir.

Mr. TREADWAY. Is there not too much of a set-up for that purpose? Why are we asked to deal with all of these varied subjects in one bill? Can you give us any enlightenment on that?

Miss LENROOT. As to the last question, Mr. Treadway, of course, I would not undertake to speak, as to the policy of the administration in putting the various subjects into one bill. That was a matter that was determined by the Cabinet committee and the President, I assume.

Mr. TREADWAY. That is not the last word for some of us, you know.

Miss LENROOT. But I would like to explain to you, if you would like to have it, exactly what my relationship to this bill has been. I shall be perfectly glad to explain that to you.

Mr. TREADWAY. We shall be very glad to have it. There seems to be a diffidence on the part of some to confide in us.

Miss LENROOT. Last August Mr. Witte, who had been appointed director of research by the Cabinet committee, came to me and said that the committee would like to consider, in the framing of recommendations, matters relating to security of children, because it realized that there were special problems of children that could not be solved by the general measures that were under consideration, such as unemployment compensation and old-age assistance. He asked me if the Children's Bureau could assemble factual data concerning the needs of children and make recommendations to the committee concerning the action that ought to be taken and the measures that ought to be incorporated in this security program.

Accordingly, the Children's Bureau assembled factual data, some of which I put into the record the other day, and an advisory committee on child welfare, to which I have referred, was appointed by the Secretary of Labor, the chairman of the Cabinet committee, with whom we met and discussed the general recommendations which we thought grew out of the data that had been assembled.

Our report was then submitted to the Cabinet committee.

Mr. TREADWAY. What committee was that?

Miss LENROOT. It was submitted to the committee of which Dr. Witte was the director of research.

Mr. TREADWAY. He was acting as secretary of various committees; is that the idea?

Miss LENROOT. Yes; I was called to meet with the technical board to which you referred yesterday when Mr. Leiserson was testifying.

Mr. TREADWAY. That is the second committee on this list.

Miss LENROOT. Yes, sir.

Mr. TREADWAY. I understand.

Miss LENROOT. I met with some of the members of the technical board and went over the general recommendations which are essentially those incorporated in the bill with reference to children, mothers' pensions, and this section of maternal and child health, and so forth.

The technical board then reported the matter to the Cabinet committee and I met with the Cabinet committee, which was under the chairmanship, as you know, of the Secretary of Labor.

Mr. TREADWAY. That is the Cabinet itself?

Miss LENROOT. Yes, the Cabinet committee.

Mr. TREADWAY. And not this advisory committee?

Miss LENROOT. No; it is the Cabinet committee of which the Secretary of Labor was chairman.

Mr. TREADWAY. I did not mean to interrupt. You may proceed.

Miss LENROOT. I met with them and discussed practically the recommendations as to child welfare and child health which I thought and which the advisory committee on child welfare thought should be incorporated in the bill. The committee then recommended that these provisions be incorporated.

As to the actual drafting of the language, I drafted some suggested language for title VII, which was followed to a considerable extent. Those generally responsible for drafting the bill drafted the mothers' pension section.

Mr. TREADWAY. You say "those responsible for the drafting of the bill"; that is Mr. Witte, primarily, is it not?

Miss LENROOT. The technical staff; yes.

Mr. TREADWAY. He really is responsible for the drafting of it, but he puts the credit or blame for it, whichever it might be, on the shoulders of some committee of some general nature.

Miss LENROOT. I cannot say just what happened after my suggestions went in.

Mr. TREADWAY. We do not want to embarrass you at all. I will say that this is much more of an explanation than we have had from any of the previous witnesses, and I congratulate you. But I would like to ask two other things. You speak of a public-health committee. Is that the committee that is listed on page 43 of this document headed "Public Health Advisory Committee"?

Miss LENROOT. Yes, sir.

Mr. TREADWAY. You have been in consultation with them?

Miss LENROOT. Yes, with Mr. Sydenstricker, of the technical staff, and Mr. Folks, of that committee, who was on our advisory committee, our child-welfare committee, which is listed at the bottom of page 53.

Mr. TREADWAY. The hospital advisory committee?

Miss LENROOT. The committee on child welfare, at the bottom of page 53.

Mr. TREADWAY. But 43 is the last page I have here.

Miss LENROOT. I am referring to this report. Perhaps we are referring to two different things.

Mr. TREADWAY. This is the President's message with the report of the committee appended.

Miss LENROOT. I have the report of the Committee on Economic Security to the President. I do not have the message right at hand. But the committee on child welfare would follow very shortly after that public-health advisory committee.

Mr. TREADWAY. And Mr. Folks—

Miss LENROOT. Mr. Folks was a member of both committees.

Mr. TREADWAY. And also on this committee on child welfare is Mr. Kepecs, president of the Child Welfare League of America.

Miss LENROOT. Yes, sir.

Mr. TREADWAY. You spoke of Dr. Abercrombie.

Miss LENROOT. Yes, sir.

Mr. TREADWAY. You have been in touch with practically all of that group?

Miss LENROOT. They met with us in Washington for a day to go over the recommendations.

Mr. TREADWAY. For 1 day?

Miss LENROOT. Yes, all except Mr. Murphy, who was not able to be there, but I have been in touch with him by correspondence.

Mr. TREADWAY. That is the committee, then, that has been chiefly advisory?

Miss LENROOT. Yes.

Mr. TREADWAY. Just one other thought: How much does the language, as submitted to us in the bill, increase either the responsibilities or appropriations of the Children's Bureau, of which you are the Chief?

Miss LENROOT. It increases them very materially. We have no funds available for cooperation with the States in this type of activity

at the present time. We had \$1,240,000 a year authorized for 7 years, from 1922 to 1929, under the so-called "Sheppard-Towner Act." Our appropriation at the present time, including the amount made available under a 5 percent restoration of salaries, is approximately \$353,000.

Mr. TREADWAY. And where is that carried?

Miss LENROOT. In the regular appropriation act for the Department of Labor. That is our regular appropriation.

For the current year our appropriation amounts to about \$350,000.

Mr. TREADWAY. When the Sheppard-Towner bill was in operation, you had \$1,240,000?

Miss LENROOT. We had the responsibility for an authorization of approximately \$1,240,000, of which all but the 5 percent allowed for administrative purposes was for allotment to the States, mostly on a matching basis, for maternal and child-health work.

Mr. TREADWAY. And how much do you estimate is carried in this bill?

Miss LENROOT. The total amount carried in this bill, which would be administered through the Children's Bureau, is eight and a half million dollars.

Mr. TREADWAY. How much?

Miss LENROOT. Eight and a half million dollars. That includes \$4,000,000 for maternity and child health, \$3,000,000 for crippled children, and \$1,500,000 for aid to welfare services.

Mr. TREADWAY. In other words, the total of the three activities in which you are interested makes eight and a half million dollars?

Miss LENROOT. Yes, sir.

Mr. TREADWAY. Let me locate those definitely. Just which items does the amount of eight and a half million dollars cover; title VII?

Miss LENROOT. It covers all of title VII.

Mr. TREADWAY. All of title VII?

Miss LENROOT. Yes, sir.

Mr. TREADWAY. All of your activities are under title VII?

Miss LENROOT. Yes, sir.

Mr. TREADWAY. And that is the title that you and your advisory board have had incorporated in the bill by submitting it to Dr. Witte?

Miss LENROOT. Yes, sir.

Mr. TREADWAY. To what extent did Mr. Witte make changes or corrections, additions to, or subtractions from your original suggestions?

Miss LENROOT. Except for minor things, as to language, title VII is substantially the suggestions that we sent to Mr. Witte.

Mr. TREADWAY. Did you consult, in the drafting of this section, any drafting experts or authorities?

Miss LENROOT. No, sir; because the committee was taking care of that. We just sent in the things that we thought should be incorporated.

Mr. TREADWAY. That raises the very same question, Miss Lenroot, as to who was dealt with and what the details of this drafting were. I am not trying to be unduly critical, but it is very essential that every

detail should be watched carefully in order that there shall be no errors in the language of the bill, that might lead to a misconstruction. This is such a tremendously important piece of legislation that it seems to me every possible care and safeguard should be exercised.

Miss LENROOT. I appreciate your position, Mr. Treadway. I am very sorry that all I can say is that I was not given the responsibility of drafting. I sent my suggestions over to the committee, and I cannot testify as to what happened after they went up.

Mr. TREADWAY. The only reply we have been able to get—at least, the only one I have been able to get—to any of these inquiries about drafting is that it was done in the Treasury. I do not know what that means. There are lots of things that come out of the Treasury of which I do not approve. I would have a great deal more confidence if I felt that the actual language had been suggested through the legislative drafting service of the House, instead of some unknown person in the Treasury. So I hope you will not think I am unduly critical.

Miss LENROOT. No, indeed, Mr. Congressman.

Mr. TREADWAY. I would like to ask one more direct question, and then I shall retire.

On page 57 of the bill, paragraph 2 reads as follows:

The Secretary of Labor shall apportion the remainder among States unable, because of severe economic distress, to match in full the amounts allotted under paragraph (1), for their use in matching such sums, or for special demonstrations of methods of community child-welfare service.

What I am particularly interested in in that paragraph is: What is the yardstick or basis by which an estimate is to be made of when a State is in "severe economic distress"? What is meant by the language "severe economic distress"?

Certain amounts are apportioned. For instance, on the previous page, \$10,000 is allotted to each State.

Miss LENROOT. Yes, sir.

Mr. TREADWAY. And the balance of a million dollars is allotted to States in proportion to their population. But whatever is left is then distributed under somebody's authority on the basis of or for the reason of "severe economic distress."

Miss LENROOT. Yes, sir.

Mr. TREADWAY. Will you give us your understanding of what that language means?

Miss LENROOT. Of course, it is the Secretary of Labor's authority. There is no definition that I know of that has been worked out.

Mr. TREADWAY. That is what I was afraid of.

Miss LENROOT. I think we could only take into consideration what we knew about the extent of unemployment and the general tax delinquency rates and the general impoverishment of the population as determined after a careful review of the plans submitted by the State and a careful inquiry on the part of our representatives in the field as to actual conditions in the States.

Mr. TREADWAY. You will admit that that is pretty broad language.

Miss LENROOT. Yes, sir.

Mr. TREADWAY. "Severe economic distress" is pretty broad language. With all deference to the opinions of the Secretary of

Labor, whom, I assure you, I hold in the highest esteem, it seems to me that it is pretty much blanket authority.

Miss LENROOT. I do not know of any other way that has been devised of handling such a situation. Persons interested in both State and national legislation have been working on the problem, because the States are faced with the same situation exactly, when they realize that there are certain areas in their States that are not furnishing, and seem to be unable to furnish, the health and welfare services that are necessary for children. So they develop State equalization funds and try to apply a certain yardstick to determine how much of those funds should go to this county and how much to that county.

Mr. TREADWAY. Of course, that same rule of thumb, if that is what you mean by "severe economic distress", could be stretched to cover all kinds of imaginary reasons why one State should be favored over another.

Miss LENROOT. Yes, sir.

Mr. KNUTSON. Will the gentleman yield?

Mr. TREADWAY. I yield to the chairman of the committee.

The CHAIRMAN. Miss Lenroot, there seems to be a good deal of curiosity or anxiety respecting the authorship of this legislation. Is it not more important what is contained in the proposed legislation, what the provisions are that will affect vitally the welfare of the country, than the authorship of those provisions?

Miss LENROOT. Well, it does not seem to me that there would be difficulty in ascertaining these facts. I am not a member of the staff of any of the committees set up under this bill. I was asked, as Chief of the Children's Bureau, to work on this section of the bill.

The CHAIRMAN. May I ask you this? As Chief of the Children's Bureau, in your opinion has adequate consideration been given to those provisions in the bill affecting activities, of your Bureau and also let me ask you, do you think that those best qualified to give useful and profitable information have been consulted in regard thereto?

Miss LENROOT. Yes, sir.

The CHAIRMAN. Has there been any neglect, so far as you have knowledge?

Miss LENROOT. Not so far as I have knowledge. I have tried since last August, and Dr. Eliot, my associate, has also been in contact with people who were in a position to advise us.

The CHAIRMAN. As I understand, you say that this bill, so far as it relates to the Children's Bureau and its activities, with minor changes in language, represents your views as to what should be contained in the legislation?

Miss LENROOT. Yes, sir.

The CHAIRMAN. And, further, you say that you would not qualify as an expert in drafting legislation?

Miss LENROOT. No, sir.

The CHAIRMAN. You do not trust yourself with that sort of thing?

Miss LENROOT. No, sir.

The CHAIRMAN. You would not want to assume that responsibility?

Miss LENROOT. And there were, as I said, changes made in the drafting after it left my hands. I just meant that the substantial

content was in accord with my views. I do not qualify in any sense as a drafting expert.

Mr. KNUTSON. Mr. Chairman, I should like to ask the witness a question.

First, let me ask you, this appropriation of eight and a half million dollars is for the next fiscal year?

Miss LENROOT. The year beginning July 1, 1935.

Mr. KNUTSON. I call your attention to paragraph 2 on page 57, which Mr. Treadway touched upon.

The Secretary of Labor shall apportion the remainder among States unable, because of severe economic distress, * * *.

Is it possible that we still have severe economic distress in view of the fact that we have had the "new deal" for nearly 2 years?

Miss LENROOT. I will leave it to the gentleman to answer. Of course, it is known that there is.

Mr. KNUTSON. Is this a statement of fact, or is it overdrawn?

Miss LENROOT. I presume it might be regarded as a statement that if and when severe economic distress is discovered, this money could be apportioned as indicated. As a matter of fact, I am perfectly willing to stand on the statement that there is a great deal of severe economic distress still in this country.

Mr. KNUTSON. And this appropriation does not become available until July first next?

Miss LENROOT. No, sir.

Mr. KNUTSON. So it is not contemplated that the "severe economic distress" will cease by that time?

Miss LENROOT. I am afraid, with all the efforts being made——

Mr. KNUTSON. During the next fiscal year?

Miss LENROOT. There will still be economic distress next year.

Mr. KNUTSON. Severe economic distress?

Miss LENROOT. In certain parts of the country, I should say.

Mr. KNUTSON. That is all.

The CHAIRMAN. It would appear to the chairman that the subject of economic distress would not be one that a number of members would be so very anxious to discuss, if we were to undertake to trace the responsibility or a part of the responsibility for that economic distress. Of course, it would take years to do that, and perhaps the responsibility never would be altogether decided.

But it does appear to the chairman that a bill like this should be discussed without making a political stump speech.

Mr. KNUTSON. I object to the chairman's insinuation that this was a political stump speech.

The CHAIRMAN. It was nothing else.

Mr. KNUTSON. What I want to find out is: Is there severe economic distress in portions of the country, or are the sympathies of the committee being worked upon by the use of language such as we have quoted and that present conditions do not warrant?

The CHAIRMAN. No sane person would expect that a country that was in such dire economic distress 2 years ago, as our country was, would be able in such a short time to completely eradicate that economic distress. That would be an impossibility, as everybody knows.

Mr. VINSON. Mr. Chairman, it is difficult for me even momentarily to believe that a gentleman with the experience and powers of observation possessed by my friend from Minnesota could be unaware of conditions that obtain in his own congressional district, and which we hope to help in part.

Now, referring to this particular paragraph 2 on page 57, and the language "severe economic distress" against which the big berthas of the opposition have been let loose, and speaking seriously, that language is protective of the States who may not have the money to match the Federal money provided in the paragraph immediately preceding.

Miss LENROOT. Yes, sir.

Mr. VINSON. There is nothing mysterious about it.

Miss LENROOT. No, sir.

Mr. VINSON. It is protective of less fortunate States.

Miss LENROOT. Yes, sir.

Mr. VINSON. And particularly the less fortunate areas of those less fortunate States; is not that true?

Miss LENROOT. Yes, sir. That was the intent of the section.

Mr. HILL. Referring again to this paragraph on page 57, Mr. Treadway is very much disturbed as to the language used, and the lack of a yardstick as to what shall constitute "severe economic distress." Is it possible to foresee at any one time just what set of economic conditions may bring about severe economic distress?

Miss LENROOT. No, sir. We have such things as the drought, in addition to other things that are tied up with our economic mechanism, that might enter into the situation at any moment.

Mr. HILL. You could not in this paragraph, without being able to foresee what might happen, draft language to cover conditions, unforeseen now, that may be responsible for severe economic distress?

Miss LENROOT. I think it would be impossible to do so.

Mr. HILL. And so it is absolutely necessary to have language to cover in a general way the economic conditions that might bring about that economic distress?

Miss LENROOT. It seems so to me.

Mr. HILL. That is all.

The CHAIRMAN. If there are no further questions, Miss Lenroot, we thank you for this additional statement and the information you have given the committee.

Miss LENROOT. Thank you very much, Mr. Chairman.

The committee will adjourn until 10 o'clock Monday morning.

(Whereupon, at 12:30 p. m., an adjournment was taken until 10 a. m., Monday, Jan. 28, 1935.)