

something like that, and you would all be wrong, because the second largest cause of death of women between the ages of 15 and 45 in this country, in every part of the country, is childbirth.

That is a very shocking thing to think about. More than heart disease, more than cancer, more than pneumonia, more than any other cause but one, is childbirth, and the troubles and difficulties that arise in connection with it.

But can you do anything about it? Yes. Within the last 2 years there has been the most searching study by the Academy of Medicine of New York City of what happens in each death of a mother in New York City over quite a long period of time. It covered more than 2,000 cases. They sent a doctor to talk with the doctor and somebody to go into the home and find out all the circumstances directed to the express question, Why did this woman die, and could it have been prevented?

Something can be done about it, because those doctors themselves, the best men in the city, acting as a group, reported that something over 60 percent of all those deaths of mothers under those circumstances could have been prevented. There is nothing new in this program so far as New York goes. It is just better and more of it; and we are for it.

Mr. HILL. The time of the gentleman has expired.

Mr. KNUTSON. Just one question. Were most of the deaths due to infection?

Mr. FOLKS. I would not like offhand to answer that.

Mr. KNUTSON. I should think that is very important. It is not enough to ascertain that they died through childbirth, but just why did they die.

Mr. FOLKS. Well, they give all that, but I would not like, as a layman, to undertake to explain it.

Mr. KNUTSON. Is there anyone here who can give us the information?

Mr. FOLKS. I have no doubt those who appear later can do that. Dr. Adair, of Chicago, particularly, can do that.

Mr. HILL. If there are no further questions, we thank you for the information you have given the committee, Mr. Folks.

The next witness is Mr. Jacob Kepeks, of Chicago, Ill., representing the Committee on Child Welfare.

STATEMENT OF JACOB KEPECS, REPRESENTING THE CHILD WELFARE LEAGUE OF AMERICA, CHICAGO, ILL.

Mr. KEPECS. Mr. Chairman and gentlemen, I am representing the Child Welfare League of America, which comprises in its membership approximately 160 agencies, private and public, from every part of the country.

We are in favor, heartily in favor, of the child-welfare portions of the bill, of all the four child-welfare measures, and I am not going into a detailed discussion of the reasons why. Miss Abbott and Mr. Folks have done that.

I should like to emphasize one or two points.

In connection with the provision for care of crippled children, it seems to me that the provision should be broadened to include opportunities for special education and vocational training as well as for medical care.

Mr. HILL. If there are no further questions, we thank you, Miss Abbott, for the information you have given the committee.

The next witness is Mr. Homer Folks, secretary of the State Charities Aid Association.

STATEMENT OF HOMER FOLKS, SECRETARY, STATE CHARITIES AID ASSOCIATION, NEW YORK CITY

Mr. HILL. You understand, Mr. Folks, you are allowed 5 minutes to make your formal presentation.

Mr. FOLKS. My name is Homer Folks. I am secretary of the State Charities Aid Association, which is a State-wide organization in the State of New York.

As to the time limitation, I am not going to talk for the record, but talk to you directly for a few moments, if I may.

Mr. HILL. Proceed.

Mr. FOLKS. I had nothing whatever to do with the early stages of these bills on this whole subject, but I had the honor of being called in as a member of the Advisory Committee, both on child welfare and also on public health.

I am deeply interested in these subjects, and have been for a long time wondering what they would produce, as a result of the study of all these experts during the past summer, and I examine with a great deal of care and with a great deal of satisfaction what has been reported, and I unhesitatingly endorse and approve their findings.

I would like to register this idea, if I may, that when you come to children, economic security does not mean merely money. It does mean money, it takes money, but it also means everything that tends to keep their home in order, and a going concern; and everything that tends toward their benefit; normal care and training that a father and mother are supposed to give.

The most direct form of economic security, as was suggested by a question over here a little while ago, is not that which puts a bit of money into the home for children when 1 of the 2 parents is gone. It is that which looks ahead and protects those parents from hazards to which they are liable and from which they cannot wholly protect themselves.

That is the feature of this program of economic security which particularly appeals to me.

I wish to speak a moment, very briefly, on two or three particular phases of it, and I hope I will not say anything that has been said before. I do not think I will.

Miss Abbott spoke of the care of the child in his home; the young child, the baby. I want to speak a moment about the care of the mother. Every one of you, no doubt, has known of a particular instance in which some younger woman, a woman young or in middle age, has lost her life in connection with the process of giving birth to a child. If one gave just the total figures, it would not mean so much. I want to ask you to take all the women in this country between the ages of 15 and 45, and take those who die in a given year. What do they die of mostly? What is the great cause of maternal mortality? The first one you might guess correctly. That would be tuberculosis. When you came to the second one, I think you would probably think of cancer, or pneumonia, or accidents, or

In connection with mothers' aid, I should like to say that it would be advisable to raise the age limit from 16 to 18 because of present conditions, and it seems to me also that the administration of mothers' aid should be placed in the Federal Children's Bureau rather than in the Emergency Relief Administration, which is a temporary organization. The Children's Bureau, as you know, has had considerable experience with mother's and through studies over a long period of time in that field. It has established very excellent working relationships with State departments of public welfare which administer mothers' aid.

One word only about the care of the homeless, dependent, and neglected children. The Child Welfare League is particularly in an advantageous position to know the conditions of these children. It has evidence that many agencies throughout the country had to curtail their activities, that they have strained their financial resources to the limit. They are, of course, going to go on with their program, but they cannot possibly meet the needs of all these children.

From several States come reports of malnutrition, medical and dental neglect, irritability and nervousness, retardation in school, and other evidences of hardship which the children endure prior to their admission to the institutions and foster-care agencies.

The officers of the league are quite confident that the private agencies will continue to do what they can to the utmost of their ability in providing care for neglected children, but we are very glad to see included in the bill a provision which will encourage State and local governments to extend their support on behalf of homeless and neglected children.

We are very glad to support that particular provision of the bill.

A few more words about the bill in general. It seems to me that all of the provisions of the bill are directly or indirectly related to child welfare. We are in favor of all the provisions of the bill, with certain reservations. I certainly should like to see the provisions considerably liberalized.

I am somewhat disappointed in the many limitations and inadequacies of the provisions of the bill. I am particularly disappointed about two omissions, one of which has to do with administration.

It seems to me that there should be established a Federal Department of Public Welfare or a Federal Administration of Public Welfare in which would be coordinated and unified all of the Federal welfare activities which could then deal with similar departments in the States or other local units.

Mr. HILL. The time of the gentleman has expired.

Mr. KNUTSON. Mr. Chairman, I should like to know what the gentleman's other recommendation is, if it is agreeable to the committee.

Mr. KEPECS. The other omission that I refer to is a provision for Federal grants-in-aid for persons who do not come under any of the categories specified in the bill. It will be necessary for these people to go back on local provisions, local relief; and it does not seem to me that local governments are now ready to accept that responsibility.

I am of the opinion that many thousands, perhaps hundreds of thousands of people, will be left stranded if no Federal provision or Federal grants-in-aid are made to them. The bill does not provide that.

Mr. KNUTSON. Have you in mind now the helpless?

Mr. KEPECS. No. I have in mind all people who will not be able to find jobs on Public Works and all people who do not fall in any of the categories mentioned in the bill.

Mr. KNUTSON. It is your idea, then, that we should report out a sort of a Mother Hubbard that shall cover everybody?

Mr. KEPECS. You are doing that now in the Federal Emergency Relief Administration.

Mr. HILL. If there are no further questions, we thank you for the information you have given the committee, Mr. Kepecs.

(Mr. Kepecs filed the following extension of his remarks:)

The Child Welfare League of America, composed of some 160 member agencies and institutions from every part of the country and representing both the private and public field is in agreement with the provisions in the economic security bill which relate specifically to child welfare, namely, Federal aid to dependent children in their own homes, aid for maternal and child health, for the care of crippled children, and for child welfare services. The members of the league know only too well the limited resources which exist for these categories of children and particularly is this true of the rural counties throughout the United States. The appropriations proposed, while far from adequate to the need, should serve as great stimulants to the States and counties in extending protection and assistance to the various classes of needy children. We of the league can testify to the needless and preventable mortality among infants and mothers in rural areas due to lack of facilities and medical and nursing skills as well as on account of economic distress. Likewise we can testify to the neglect of crippled children in many sections, particularly in rural sections of the United States. In this connection I should like to see the provision broadened to include opportunities for special education and vocational training. That would, of course, require a larger appropriation of funds than the \$3,000,000 in the bill.

The mothers' aid section, as it now stands, falls short, in my opinion, in two respects. Because of prevailing economic conditions the top age for children should be extended from 16 to 18. The 16-year limitation will work a hardship on many a family. And I question the wisdom of placing the administration of mothers' aid in the Federal Emergency Relief Administration, which is a temporary organization. The Children's Bureau is thoroughly familiar with the problem, through the many studies which it made in various States and it has developed excellent cooperative working relations with State Departments of Welfare. I should like to see mothers' aid administered through the Children's Bureau along with the other children's aid provisions.

In no phase of child welfare is the league more competent to offer testimony than in connection with the care of homeless, dependent and neglected children. The league office is in constant touch with this situation and has conducted special studies in this field in recent months. A number of agencies in various sections of the country were forced to curtail their services to homeless children. Most agencies find themselves carrying additional responsibility in the care of children of working age which in the case of some institutions means inability to accept new children. In answer to a question regarding the health and behavior of children upon admission during recent years, 35 of 49 agencies replied that there has been a marked change for the worse in these respects. From several States come reports of malnutrition, medical and dental neglect, irritability and nervousness, retardation in school, and other evidence of hardships which the children endured prior to admission to institutions and foster care agencies. That the agencies and institutions in the field have been under severe financial strain is evident from replies regarding the use of capital funds and legacies. Every one of 31 agencies replying to this question has made heavy inroads into such funds. Invariably the funds are used to meet deficits. Nearly every agency experienced a decrease in its income from endowments and contributions. Many agencies experienced a decrease of income from community funds where these have failed to reach their goal. The officers of the league are confident that the private agencies and institutions are doing all they can and will continue to carry their responsibility to their utmost ability. But they cannot meet the whole need and children are being neglected. Here again the situation is worse in "down-State" counties where resources are limited and where skilled services are not available to the same extent as in cities. In Illinois, my own State, de-

pendent and neglected but otherwise normal children are committed from rural counties to State institutions for the feeble-minded and to reformatories because of lack of local facilities, services and money. I am sure that what is true of the enlightened State of Illinois must be true of the more backward counties of the more backward States.

A few remarks about the old-age and unemployment-insurance provisions. After all, these are directly or indirectly related to child welfare. I am naturally in favor of social security measures but I am inclined to support the provisions in the bill only with some important reservations. I believe that they require considerable liberalization. I am disappointed in the many limitations and inadequacies of the provisions in the bill. I consider the benefits provided inadequate for decent standards of living. I believe that the contributory features and particularly the omission of contributions by State and Federal Governments are unwise if not unjust. It is to be regretted furthermore that the effectiveness of these measures depends entirely upon State legislative action and administration. I am equally disappointed in the omission from the bill of provisions for Federal grants-in-aid to assist people who do not fall in any of the categories specified and who will not get on public works. Probably hundreds of thousands of such people will find themselves disinherited through no fault of their own. To abandon them to the empty coffers of local governments is unjust. Local responsibility may sound nice in theory but you cannot make it work in practice—not in these times. I consider it a mistake to place the administration of old-age pensions in the temporary Emergency Relief Administration. I think that it belongs in the Labor Department. Finally, I am disappointed over the omission to provide for a permanent Federal welfare department or administration, which would unify and coordinate all of the Federal welfare activities.

The bill can and should be improved along the lines suggested by Mr. Green of the American Federation of Labor and by Senator Black. And the two omissions I referred to should be inserted.

JACOB KEPECS,
*President, Child Welfare League of America
and Superintendent Jewish Home Finding Society, Chicago.*

The next witness is Dr. Alfred Walker, of Birmingham, Ala.

**STATEMENT OF DR. ALFRED WALKER, CHAIRMAN OF THE
BOARD OF HEALTH OF THE JEFFERSON COUNTY MEDICAL
SOCIETY**

Mr. HILL. Dr. Walker, will you give your name and address and the capacity in which you appear?

Dr. WALKER. Mr. Chairman, I would like to correct the statement that is in your calendar, that I am here from the Alabama State Board of Health. My name is Dr. Alfred A. Walker. I am chairman of the board of health of the Jefferson County Medical Society.

Mr. Chairman, I appear before you as a physician who has spent practically all of his life in the care of children, not only in private practice but in many public and charitable clinics, and who has always been keenly interested in child welfare and has appreciated the enormous needs of our children, especially those from rural areas.

I come from the State of Alabama, where through its health department and other agencies dedicated to maternal and child welfare it has always been keenly conscious of its obligations. The State has set up the necessary legal machinery to carry out the purposes of that portion of the bill under consideration today. The only thing lacking at the present time is the means to carry out those programs.

From my contacts and observations, the same conditions exist in most of the other Southern States. It must be realized that we come from a part of the country with approximately one-third of its popula-