

less hold to the opinion that the Federal Government as such should not be a direct party to either old-age pensions or unemployment compensation on the grounds that such matters should be handled strictly by the States or subdivisions thereof. Through no other means does there seem to be much chance of assuring nonpolitical allotment of money or distribution which in the eyes of local people is strictly fair and justified from the standpoint of both the receivers of benefits and the real donors thereof (taxpayers). Of course, it is not hard to believe that political considerations will cause certain of the poorer States to be anxious to draw social benefits for their people from the people of those States which are able to amass greater composite profits. In fact, the danger in this regard seems so great that it at least seems vital for business men and publishers to make every possible effort toward seeing that the Federal Government does not become the sole contributor to either old-age pensions or unemployment compensation, but only a participating contributor; provided, that the major load is carried by State governments or political subdivisions thereof and by employees. It also seems to me that there are many advantages in seeing that Federal contributions to such ends are not based on income taxes or pay-roll taxes, but upon a sales tax.

Hope to have a visit with you in the near future.

Sincerely,

RAYMOND BILL, *President.*

[Air mail]

RADIO MANUFACTURERS ASSOCIATION,
Chicago, Ill., February 6, 1935.

Mr. RAY V. SUTLIFFE,
Radio retailing, New York, N. Y.

DEAR RAY: I am sorry about the delay in attending your telegraphic request which was due to my absence from the city, consequently I hope that this air-mail letter may arrive in time to attend your needs.

Unfortunately I am not in a position to give you a typical or industry viewpoint on the Social Security Act, consequently I am offering my personal views which should not be construed as representative of R. M. A.

The social service program of the President as proposed in the bills now before the Senate and House, will undoubtedly be beneficial to the general public; provided, there are cooperative measures between the State, the employee, and the employer in order that the additional burden to industry may not increase prices to the extent of retarding sales. The cooperative payment plan between these three elements would in my opinion, keep the cost to industry down, as well as create a responsibility with the employee that should be beneficial to the labor relations of business.

All of the elements of this program should improve the mental attitude of the employee and as a result of this assist business to the extent of this improved confidence.

While I do not fully agree with all of the percentages and elements in the program, I feel confident that after it is pushed around to both the Senate and House, the modified form resulting will be the most economical method for offsetting the rather numerous other forms of pensions, dole, and employment insurance that will be presented to Congress this year.

I also feel that it is definitely necessary for the President to present something of this type in order to avoid the highly burdensome radical plans which would have a reasonable chance of approval in the absence of the social security program.

Sincerely yours,

LES.

The CHAIRMAN. *Rachelle Yarros, M. D.*

STATEMENT OF DR. RACHELLE YARROS, HULL MOUSE, CHICAGO, ILL.

Dr. YARROS. Mr. Chairman: In connection with title VII in your bill dealing with maternal and child health I am particularly interested in representing to you a certain phase of health protection as far as the mother is concerned.

Reading over very carefully the statements made by Miss Grace Abbot and Dr. Adair at the hearing on this bill before the Ways and Means Committee in the House of Representatives I wish to say I agree with them thoroughly that the danger to the mother from birth is still far too high ; it is alarmingly high. Now I have been in practice for 40 years, and I was associate professor of obstetrics of the medical department of the University of Illinois. In that connection I had a great many cases. I, myself, brought into the world about 2,000 babies among the poor people, and I had a great deal of experience in watching the situation personally, realizing what the dangers were.

Strange as it is, with all the efforts that the schools have made to prepare their physicians better for maternity wards, and with all the methods that have developed to improve the nursing service, the mortality rates remain very high.

Now, in my opinion, we haven't gone deep enough into the subject. There is no doubt that a great deal of child care is lacking on the part of the mother, because she has not the information, but a good deal more is due to the fact that she, herself, is not in any condition physically to continue the repeated efforts of her body resulting from childbirth. In my opinion, and in the opinion of those who have watched women bringing forth children in rapid succession, we have found that the health of the mother deteriorates. It is a tremendous physical effort, and now we know that all the endocrine glands make a special effort during that time and it takes at least 2 or 3 years to make a recovery.

Therefore I think, and many of those of my colleagues who have watched the situation feel, that if the mothers among the poor could face the number of pregnancies and childbirth as they are faced among the more fortunate, the mortality among them would decidedly decrease. These mothers would be in better shape to face the additional effort. They practically have very little rest .

It is in that work that I first became deeply interested, in the problem of spacing, limiting the number in the family, among not only the poor but those of our workers who have a rather low wage, and constantly, as I watched them, I have seen that if they have a chance actually to learn how to space the children and they have a rest that they do better for themselves.

Now at one place the question was asked of Miss Abbott about the mortality, this high mortality in childbirth, and she said there is no doubt it is due to the lack of care during childbirth and during pregnancy. To a great extent she is right, but to some extent she has omitted a very important part, and that is that even with the best of care a woman cannot recover rapidly enough to do her job well and to do justice to herself if she keeps on having those frequent pregnancies and childbirths.

Another point that was made by Dr. Adair, and the point that we must consider very carefully, is the fact that women all through the ages, with the encouragement of their husbands, and now particularly, feel that they cannot continue to carry the child and often the result is abortions. Now, abortions are highly prevalent. In these United States we haven't the exact estimate, but approximately it is stated between half a million and a million women abort. Now a good many of them are not self-induced abortions, but the mortalities from self-induced abortions is extremely high. They continue to do it,

not because it is a pleasure, because on the whole most women are against such procedure, they are very unhappy about it, but they resort to it as the lesser evil, and those of us who have come across hundreds of those women feel that it is extremely unfair in modern society not to give those women a chance to have the scientific information that the contraceptive clinics could give.

A study has been made by the Children's Bureau of the women who have had a certain number of births and it is quite clear from that study that the more children that a woman brings into the world, the more pregnancies, the more her life becomes endangered. Now, this is a thing that we must consider with the prevalence of abortions, self-induced or criminal abortions, to which these perfectly fine people have to resort or are resorting, and the fact that it is dangerous to their health to continue these pregnancies and childbirths.

It seems absolutely necessary now, in this new undertaking, which is such a marvelous thing for women, to save their lives and to save the children that are born, it is absolutely obvious that we must begin to face this fact: Instead of letting women induce abortions on themselves, with great danger to themselves, and having thousands of abortions criminally induced, that we ought to begin to take this remedy that we have before us, which many of the more intelligent women and men take advantage of, and that is the methods of contraception. It is practiced in this country very extensively. Most of our educated people, professional people, have small families. The mortality among the women is lower, the morbidity is lower, the death rate among children is lower, and consequently the advantages we have reached from this knowledge ought to be included as a part of this great health protection that is going to be given to the women and the children of those who are less privileged. On the whole, by doing that we would give the mother a chance to do better for herself, better for her children, and there would be a lower mortality among the women, there would be a lower mortality among the children. They would be able to have a better education, a better upbringing.

We hope that we will not always have to protect those people by this extra grant. We hope that in the future the situation will be such that they will be able to do it for themselves, but I am very sorry to say that because of tragedies and because of fear we have not included this remedy, or this phase of protective work, which is the prevention of conception, regulation of the number of children born, spacing the children, in our work among the women and children of those who claim our protection., particularly in these days.

It has been estimated recently in two very important studies, that the birthrate is much higher, between **50** and 60 percent higher, among those who are unemployed than it is among those who are partially employed. That in itself is a tragedy. It is a tragedy because those families are already exposed to the highest strain. There is tremendous discord among them, there is friction, and to add to that the strain of pregnancy and childbirth, with all the uncertainties, is almost cruel.

It seems to me in this emergency, where we are facing so many things and have tried to see facts, we ought to clear our minds on that subject. It is a perfectly decent thing. It is practiced by the finest! most enlightened, educated people. Instead of destroying life after it is born, which is dangerous, it is simply to prevent conception.

We have learned from long experience that there is no danger of the race dying out. A hundred thousand histories that have been carefully studied, prove that a great many women and couples that space their children have had more children, they have regulated their families. Those who have the knowledge of birth control very likely are going to have children, because they know they stop at any moment and there is not this fear that exists and produces psychosis.

One can go on and talk about these things that are so important to bring out in connection with the protection of women and children. The only tragedy, it seems to me, is the lack of courage even among thoroughly enlightened physicians and enlightened social workers, philanthropists and thinkers, to link this problem of the lack of conception with the whole scheme of health and protection to women. If you did that adequately, I think it would soon be recognized as just one of our preventive measures, which should be a perfectly legitimate one, just as many others are legitimate.

The **CHAIRMAN**. I would be very glad, if you want to elaborate your views, to incorporate your statement in the record.

Dr. **YARROS**. Thank you very much.

**SUPPLEMENTARY STATEMENT TO THE COMMITTEE ON THE SOCIAL SECURITY ACT,
BY DR. RACHELLE YARROS, HULL HOUSE, CHICAGO**

As previously stated a number of distinguished men and women have already appeared before a Congressional committee and have expressed their views concerning that part of the Economic Security Act which deals specifically with maternal and child welfare. The statements made by Miss Grace Abbott, Dr. Adair, and other authorities in this field have been very significant. We must indeed provide the mothers and children of this country not only with economic security but with the best medical and nursing care. If our work is to be at all effective and constructive and of permanent value to the family and community, adequate maternal and infant medical care is essential. There is one vital measure, however, which has thus far not been mentioned by the other speakers, a measure of tremendous significance for the health and protection of motherhood. I have reference to the dissemination of scientific and adequate knowledge concerning contraception. It is this aspect of maternal health conservation that I should like to stress before this committee. In this great crisis it is even more important that we should face all facts courageously and realistically.

In what way will the dissemination of contraceptive information conserve maternal health? First, it will give the opportunity to every woman to space the births of her children according to her own physical, psychological, and economic status. It has been amply proven time and again that too rapid successive childbearings has a deleterious effect upon the general health of the mother as well as upon the survival rate of the offspring. A great many deaths of mothers during childbirth can no doubt be ascribed to the fact that they had not had sufficient time to recover and recuperate from the previous delivery. Dr. Walter Timme, an outstanding endocrinologist has recently said that every woman should have at least 2 summers of sunshine between childbearings if she is to retain her physical, mental, and emotional balance. When the period between childbirths is too short, the mother's resistance is low and she is, consequently much more subject to the infections and complications which are responsible for so large a percentage of our maternal death rate. Obviously then, if the mother is to properly space the coming of her children and at the same time retain her normal marital relations with her husband she must be provided with adequate contraceptive information.

Secondly, contraceptive information for mothers will tend to reduce the infant mortality. Dr. Woodbury of the Children's Bureau has shown statistically that the infant death rate is definitely related to the period of time which elapses between childbirths. The shorter the period, the higher the infant mortality. According to his report; children born 3 years apart are subject to a death rate of 86 per 1,000 births; when the period is 2 years, the infant death rate is 98; when children are born only 1 year apart! the rate rises to 146. Clearly, then, contraceptive advice for the spacing of children is of vital importance to infant welfare.

Thirdly, contraceptive information will remove the recurrent anxieties and uncertainties of the mother. The repeated fear lest she conceive before she is ready for it physically and economically is a source of serious mental and emotional strain to every mother. This anxiety is responsible for an amount of family unhappiness, misery, and maladjustment which we are only now beginning to realize. Anyone who comes in contact with the intimate problems of married life, realizes that thousands upon thousands of marriages are broken up and disrupted primarily because of a lack of sufficient knowledge concerning the regulation of births in the family. There can be no doubt that efficient scientific contraceptive advice will contribute immensely to the physical and mental well-being of millions of families.

Fourthly, contraceptive advice will reduce the number of illegal abortions. It is a well-known fact that a very large number of our women resort to abortions for the purpose of controlling the size of their families, and that nearly 1,000,000 such operations are performed annually in this country. Abortion is an ancient method of population control, but it is a brutal, cruel, dangerous, and costly method. The death rate from abortions is high, and the amount of physical illness and mental injury to which it leads is untold. Yet statistics show that 1 out of every 3 or 4 pregnancies in this country is terminated by abortion. Can anyone calculate the amount of misery, chronic sickness, and even premature loss of life which this practice leads to? The only way to effectively reduce the number of abortions is to provide women with safe, scientific, and reliable contraceptive information. Those of us actually familiar with the problems of maternal and infant health and welfare feel very strongly that the greatest contribution which can be made toward the conservation of the health of mothers and children would be to provide contraceptive advice to the women who come for aid and relief to the Government and State agencies. We appeal to you to face this problem frankly, openly and realistically.

When you appropriate money for maternal and child health you must see that it is used wisely. I am very sure you do not wish to pour water into a bucket that leaks. Money spent for prenatal and postnatal clinics is indeed worth while but it is futile to encourage births when common sense tells you deaths will be the result. Therefore it is important that "other aspects of maternal and child health service", as mentioned in this bill, definitely include contraceptive advice and I respectfully suggest, gentlemen, that on page 51, line 12, after the words "child health service" you specify "including the establishment of clinics giving birth-control information to those who desire it."

I also submit a resolution adopted at a meeting held in Washington last night, representing every State in the Union, and attended by approximately 800 people. The resolution reads as follows:

"Whereas in the present crisis confronting the American people, the national purpose to relieve suffering and conserve human life finds expression not only in a Nation-wide relief program, but also in steps toward a comprehensive program of social security; and

"Whereas proposed Economic Security Act contemplates among other features, the special protection of dependent mothers and children: therefore, be it

Resolved? That we urge that such protection include, as a basic feature, making available to all families on relief, information as to where they may obtain contraceptive medical advice, so that they may properly space and limit the number of their children according to their ability to provide for them; be it further

Resolved, That this group recommends the creation in the Federal Government of a population bureau or department for further scientific study of the trends and problems of population, based on primary considerations of public health and racial conservation, to the end that a sound and permanent policy may be formulated in the interests of protected motherhood, healthy children, better family life, and greater economic and social security."

I thank you.

The CHAIRMAN. Mr. Filene.

STATEMENT OF LINCOLN FILENE, BOSTON, MASS., **WILLIAM FILENE'S SONS CO,**

Mr. FILENE. I should like to say, Mr. Chairman, before I read this very short paper, that I am in very deep sympathy with the general purposes of this legislation, and any criticism that I have to make I simply am making in the hope that it may be constructive.