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Cambridge
Women's Welfare Association

THIRD
ANNUAL REPORT
1927-1928.

BIRTH CONTROL CENTRE,
FITZROY HALL, WELLINGTON STREET.

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1927—1928.

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THIRD ANNUAL REPORT.

THE BIRTH CONTROL CENTRE established by the Women's Welfare Association is now three years old. Before entering upon the fourth year of our work, it will be both interesting and enlightening to review not only the year just past, but the three years that have elapsed since the Centre was established. For the knowledge and experience accumulated since the opening date, offer a more comprehensive guide to the problems confronting the Association than the isolated activities of any one period. Moreover, the results of those cases attending the Centre during the first year of its existence can now be summarized as the first available evidence concerning the efficacy and limitations of contraceptive methods employed at the Cambridge Centre.

A few facts emerge clearly. The foremost difficulty is the absence of any contraceptive method so simple and so effective as to meet the needs of the over-tired, feckless, under-housed, unintelligent or mentally deficient woman. This lack was mentioned in our previous report, and the experiences of the intervening year have convinced us anew that the class whom it is most desirable to restrain from propagating will not be adequately reached until some new and simpler method of contraception has been devised.

It is encouraging to note in passing that experiments are under way in America, Austria and Germany on contraceptives which may prove more efficient; perhaps before our next annual report is issued these simpler methods will have been made available for general use. Meanwhile, officials of the Cambridge Centre are carefully investigating every method about which information is now available and have adopted the policy of introducing more varied methods than were employed during the first year. But these additional means are designed to offer further safeguards in conjunction with the rubber pessary. No method sufficiently reliable has come to light which will eliminate the necessity for a carefully adjusted rubber pessary and subsequent douching. The sheath of course is an exception to this statement, but its use must depend upon the collaboration of the husband, and is therefore often not practicable.

From the day the Centre was opened, August 5th, 1925, to May 1st of this year (1928) 429 patients have been received: 118 during the first year, 175 the second, and 136 the third. Amongst these 429 patients, there were 1577 pregnancies. Deducting the deaths and miscarriages there remain 1355 living children.

Most of the deaths amongst children occurred in the first year of their life. The average births per family (excluding miscarriages) during the whole period is 3.34 and during the last year 2.76. Thus it is clear that Connor's* estimate of 2.58 legitimate births per

*See last year's Annual Report.

marriage necessary to replace each generation as it disappears is maintained amongst Clinic patients. The total number of visits made by patients last year was 254.

The histories of last year's patients (136) show a total of 55 miscarriages which had occurred previous to the patient's registration at the Centre. The number of miscarriages recorded in the histories of all patients is 142. This figure is probably too low. Many facts, such as self-induced abortions, etc., which are often concealed by the patient on the first visit, come to light later when a friendly call is made at her home.

Thus the case cards of the first year show many alterations, both because of the additional information acquired from patients, and because of pregnancies which occurred among a number of patients after their first visit to the Centre.

Special care has been taken to gather and analyse data concerning these pregnancies which occurred *after* the patient had been taught the use of a contraceptive. Each of the 118 patients who visited the Clinic the first year has been called upon by the Secretary, except those living in the country, and a letter has been dispatched to each of these. About 30% of the first year's cases became pregnant. Of these only six could be found who claimed to have used the pessary as directed followed by douching. But as one of these was the case of a paralytic who already had five children, and another a case with two previous Cæsarian sections, it will be evident how tragic even an occasional failure can be, and how great the necessity of a more reliable method of contraception. Several of the remaining failures occurred because it was impossible on account of some pathological difficulty to continue with the pessary; and in our subsequent experience, the medical officer has examined a certain number of cases which could not be fitted with a pessary at all. In such a case, when it is not possible for some reason or another to recommend the sheath, there remains no alternative method which is sufficiently reliable to warrant its application to a serious case.

The remainder of the pregnancies can be accounted for amongst women who gave up the use of the pessary (in some cases the sheath) for various reasons—it caused her pain, or she had no confidence in her ability to use it, or she found it impossible to attend to the douching in her overcrowded little house, or she was too weary to take the trouble, and preferred "taking a chance," etc. But in view of the pressing need for some method which *can* be successfully applied to these very cases, it appears justifiable to class as failures, all pregnancies occurring from any cause whatever after contraceptives have been prescribed except in cases where the contraceptive was deliberately abandoned in order to bear another child.

Indeed among many women in the working class districts all failures from any cause whatever, *are* laid at the door of the clinic. This is a serious matter, for the idea tends to spread amongst the women we most wish to reach, that birth control is a humbug designed to part foolish women from their money. Women who would like to limit their families and who might well use the methods with success, are deterred from visiting the Centre because Mrs. X. in the same street went to the Clinic and became pregnant just the same. The pregnancy probably occurred because Mrs. X. failed to use her appliance, but the truth of this is never enquired into. The Committee have issued a leaflet for distribution amongst the workers to try to dispel this misconception. The fall in the number of patients attending the Clinic this year, and the increased proportion of patients coming from isolated villages rather than from Cambridge itself, must be explained in some measure by the facility with which gossip flows from door to door and court to court in the crowded Cambridge districts, and the joyful alacrity with which one failure is seized upon by opponents to birth control.

It is interesting to note that most of the early patients who have since become pregnant because they were unable successfully to use the method first advised, are coming back to the Centre again for further advice, and most of them are now turning to the sheath as a method of contraception. This method is always discussed with patients on their first visit, and many use it from the beginning. It has always proved successful when used; but there are some difficulties attending even this method, and in some cases it is seriously undertaken by the husband only when he sees himself threatened by an avalanche of children.

Mention must be made in passing of a very small group of women who must be counted amongst the failures because their husbands would not allow them to use the appliance. One of these is now pregnant for the thirteenth time. But in the main there has been intelligent co-operation on the part of the husbands, and a degree of self control which would be a startling surprise for those who adhere to the belief that there is no such thing among the workers. Numerous cases could be quoted of abstention for periods of one to two years, and several covering a much longer period—in the case of one patient for six years following the birth of two tubercular children. Another couple during six years of married life had indulged in coitus but three times—three children resulting. But in all these cases the wife has come to the Centre asking for help in a state of affairs which was becoming intolerable to both husband and wife and threatening the happiness of the home.

Though we have been obliged to face honestly the difficulties and failures arising from imperfect contraceptive methods, there is another side to the work of the past three years which is extremely cheering. For amongst the early patients are many who come in again and again for fresh supplies, always full of praise and gratitude.

A few brief extracts from letters received will be of interest.

"I have eight children, the eldest 10 years of age, and 3 under two years, twin babies, and I am not strong, and I feel it will be too much for me to have another one. We do not know how to make ends meet now, and with another one, I cannot bear to think of it."

"I do hope I am safe, as I have five children, and my last two babies I had in thirteen months, so I do not want any more as I do not feel I can afford to keep them properly. I work at College and cannot get away for long, so if you would kindly write to me I would be so thankful."

"I am a poor mother of six children in eight years. My baby is two years old. I have been attending — Clinic for six months, but am Tubercular. I have very bad legs any time so I dread the future."

"Of course I am sorry I am pregnant as I already have four children under two years of age, but the other twin has begun to go a few steps this week, and baby is now six months old, so I suppose I shall get through. The six bigger ones are getting useful. I shall certainly pay you a visit when everything is all over, and I wish to thank you and the nurse for your kindly advice."

"I hope, all being well, I shall come to Cambridge in the near future if I can afford it anyhow, that is the chief thing with us, there are seven in family and our wages are only 36s. a week, includes rent, coals, clubs, insurance and everything. The doctor said he wondered however I managed. I've got one of the best of husbands and he is very concerned about me."

At the time of writing, her doctor was about to terminate her seventh pregnancy at eight months. She was suffering from varicose veins, and her condition was precarious.

Inquiries have been made from many parts of the world including such diverse places as Ireland and Japan. The letter from Ireland will be of special interest.

"Your letter to hand for which I sincerely thank you. I need only to look at the name of the President and at the personnel of the Executive Committee of your Association to know that your advice and directions cannot be surpassed for the welfare of men as well as women."

"I am married over thirteen years and have ten children, six boys and four girls. I have only £2 a week earnings which you know is not much for the support and general upkeep of a husband, wife and ten children. However, we are happy if we can stop at that and we expect to pull through alright in the management of the ten with God's help."

"On the 1st November, 1920, my wife had a baby son two months before the natural time, the same baby is weak still; from thence on I tried not to have any more children as I then had six in family. I had only one method to adopt, namely, to withdraw from my wife at the critical moment...I found that distressing and nature was always able to get the better of me with the result, whilst trying that practice, I increased my family by four children, and my wife also had a miscarriage and had to undergo an operation as a result."

"My view on the subject of Birth Control is that it is a great blessing to husband and wife and in particular the wife who is always the real sufferer. It is a terrible thing to have a large family without proper means to support them, and also wasting the strength of a nice wife and also washing away her beauty."

"It is my utmost wish to let you know that the Catholic clergy are entirely opposed to Birth Control but I need not state here they are not the sufferers and even I do not see where religion comes in. If there is any sin it is on those that have large families and unable to support, clothe and educate them properly. I know privately that the people of this country in general of all creeds and classes are for Birth Control and I am fully certain that a good many husbands carry on the practice of withdrawing at the critical moment."

His children were born in 1915, 1916, 1917, 1918, 1919, 1920, 1921, 1924, 1925, 1926, with a miscarriage in 1927.

From Japan came a request for full information on Birth Control methods, clinics, etc., which a former Cambridge undergraduate now teaching in a Japanese University has been asked to place before a high official in the Japanese government. Letters have been received from all parts of England, and patients at the Clinic have scattered to many parts of the globe—India, South America, China, Germany.

The type of patient who visited the Centre during the past twelve months is not essentially different from those discussed in previous reports. Some come after their first or second child with a view of spacing their families—some before there are any children at all with the desire to postpone the family until a house can be secured, etc. A few have abnormally large families, and the physical suffering and mental depression endured by these women confirm the impression that nothing is so important as reaching the mother of the small family before this tragedy of unwanted children and needless suffering is endlessly repeated.

A considerable number of doctors in town and county continue to send patients to the Clinic, and we receive many women suffering from diseases or malformation for whom an additional child would be nothing short of a calamity. As in previous years the medical officer has examined a considerable number of patients whose condition called for special treatment, and these have been referred to the Hospital or Welfare Centre, or to the appropriate specialist. A number of women desiring children have also come for advice.

A few of those cases which many times justify the Clinic are summarized below :

Mrs. A.—Age 22. Two children, one born in January and one in December of the same year.

Mrs. B.—Age 38. Ten pregnancies resulting in twelve children (two pairs of twins). Patient frail and anæmic.

Mrs. C.—Age 28. Nine pregnancies resulting in four living children and five miscarriages including twins. Ill continuously throughout pregnancy.

Mrs. D.—Age 38. Husband farm labourer. Nine pregnancies, seven living children.

Mrs. E.—Age 39. Husband labourer. Eight pregnancies.

Mrs. F.—Age 37. Nine pregnancies, ten living children. Pregnant for tenth time on visiting Centre.

Mrs. G.—Age 39. Six pregnancies. Husband just returned from Mental Hospital.

Mrs. H.—Eleven pregnancies resulting in eight living children.

Mrs. I.—Age 33. Husband labourer. Ten pregnancies. Patient badly damaged in child-birth—weak and anæmic.

Mrs. J.—Aged 42. Eleven pregnancies. Very serious confinement in every case. Badly damaged in child-birth.

Mrs. K.—Eleven pregnancies—ten still-births, one living child.

Since the annual meeting of last year the Association has suffered a great loss through the death of Mrs. Agnes Ramsey who was one of the original members of the Executive Committee. Mrs. Ramsey, perhaps more than any other individual, deserves credit for the successful launching of the Birth Control Clinic. Her enthusiasm, her clear-sighted wisdom, and unvarying soundness of judgment will be a permanent loss to the Association.

The Association is fortunate in retaining the services of Mrs. Robson as medical officer. Her sympathy and tact in dealing with patients is of inestimable value. Nurse Newman is completing three years of loyal service. She has been present at every session since the first day the Centre was opened, and it would be difficult to find a more efficient or valuable assistant to the medical officer.

The Association is maintained entirely by voluntary subscriptions. As will be seen in the accompanying financial report, the overhead charges in connection with the Centre are low, all the work being done by volunteers except the actual medical attendance. But the cost of advertising the Clinic is high, and much more propaganda work ought to be done if funds were forthcoming. It is necessary also in many cases to give appliances free of charge. The importance of maintaining and extending the work appears to us amply to justify an appeal for wider support.

BALANCE SHEET at April 18th, 1928.

ASSETS.	£	s.	d.	LIABILITIES.	£	s.	d.	
Value of fitting and equipment (estimated) ...	6	0	0	Rent and Light ...	...	12	0
Value of appliances in stock (estimated) ...	10	0	0	Doctor ...	...	3	3
Debt from patients (estimated) ...	5	0	0	Chemist ...	...	7	7
Credit Bank balance at current account ...	39	7	1	Advertising ...	...	1	2
Cash in hands of Treasurer ...	2	16	6	Outstanding cheque not yet paid in ...	...	2	2
				Balance assets over liabilities ...	...	48	16
	£63	3	7			£63	3	7

STATEMENT OF ACCOUNTS from April 29th, 1927 to April 18th, 1928.

RECEIPTS.	£	s.	d.	EXPENDITURE.	£	s.	d.	
Subscriptions and Donations ...	127	14	6	Doctor's fees ...	50	8	0	
Cash collection at Annual Meeting ...	2	10	0	Nurse's fees ...	23	10	0	
Patients' fees ...	6	9	0	Appliances ...	37	4	0	
Patients' donations ...	4	1	4	Printing, stationery and postage ...	18	13	4½	
Payments for teas ...	1	9	9	Rent, light and heating ...	14	12	0	
Sale of Appliances ...	39	0	2	Caretaker ...	7	0	0	
Credit Bank Balance at April 29th, 1927 ...	40	8	1	Repairs and furniture ...	3	11	0	
Cash in hands of Treasurer at April 29th, 1927 ...	2	14	0	Newspaper advertising ...	21	0	0	
				Tea and provisions ...	1	16	0	
				Hire of rooms for meetings ...	...	15	0
				Sundries (including Railway fares) ...	5	5	5	
				Cheque books ...	...	10	0
				Cash in Bank (after meeting 1 outstanding cheque ...	37	5	1	
				Cash in hands of Treasurer ...	2	16	5½	
	£224	5	10			£224	6	10

April 22nd, 1928.

Audited and found correct, P. M. S. BLACKETT.

Cambridge Women's Welfare Association.

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To Mrs. ROBERTSON, *Hon. Assistant Secretary,*
56, Bateman Street, Cambridge.

I enclose.....for £.....

*being a Subscription to the Cambridge Women's Welfare Association, and shall
be prepared to give the same amount annually**

Signature.....

Address.....

**Delete, if this is not desired.*

Cambridge Women's Welfare Association.

To be sent to

Mrs. ROBERTSON, Hon. Asst. Treasurer,
56, Bateman Street, Cambridge.

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I have to-day instructed Messrs.....
to pay annually the sum of £.....in support
of the Cambridge Women's Welfare Association.

Signature

Address

.....

Cambridge Women's Welfare Association.

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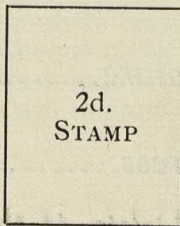
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To Messrs.....

Branch.....

Please to place to the credit of the Cambridge Women's
Welfare Association, at Barclay's Bank, Limited, Bene't
Street, on the receipt of this order, and annually on the same
date, the sum of £.....

£ : :



Signature

Address

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