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A TALK TO CATHOLIC WIVES

BY

A CATHOLIC WOMAN DOCTOR





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A TALK TO CATHOLIC WIVES AND MOTHERS

BY

A CATHOLIC WOMAN DOCTOR



Revised Edition

1955

LONDON

CATHOLIC TRUTH SOCIETY

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FOREWORD

WHAT is 'Birth Control' ? A sin against God and humanity, both collectively and individually. This is a terrible indictment, but it is an inevitable one. Yet, while birth-control is a 'sin', surely no sin has ever had more specious arguments brought forward in its favour.

Your own personal health ; the well-being of your few as contrasted with the hard life of your many children ; the peacefulness of a household where the struggle for daily bread is not intensified by the multitude of crying mouths ; the danger of 'over-population', which, so it is claimed, is at the root of all social disorders and inequality—these and similar arguments are, alas ! being made familiar to every married couple by an insidious and persistent propaganda.

Yet how specious it all is ! For it is the body and the present that these enemies of the human race have alone in view. The soul they forget or ignore : the future, the hereafter, they practically deny.

St Paul tells of 'Marriage, honourable and undefiled' ; does that description apply to the married life which is the disgrace of our vaunted civilisation ? Can such married life produce saints and children of God, men and women who realise that 'we have here no abiding place' and who 'desire a better, that is to say, a heavenly country' ?

How instructive is the Church's threefold distinction : virginity or chastity for those consecrated to God ; chastity for all who are not married ; conjugal chastity or mutual self-restraint in the married life. 'Restraint'—there is the 'stone of stumbling' to the present age ! People demand freedom from all self-restraint, and yet at the same time would repudiate the responsibilities arising from self-satisfaction. Marriage, we must remember, is good, and

instituted by God. Its use is good and often an act of virtue. But that use must be directed to the fulfilment—not to the thwarting—of God's purpose. We were taught as children that 'we should eat to live' and not 'live to eat.' It is the same with married life : we must not live to use matrimony, we must use matrimony that the world may live.

It is sometimes urged that it is impossible to demand self-restraint of married people. Yes, certainly it is hard to deny oneself—can self-denial be anything else? But is it impossible? When we read the special pleadings of advocates of cheap divorce we might almost imagine that happy marriages were the exception and not the rule. When we read the insidious vapourings of those who advocate 'birth-control', with their stockyard phraseology, we might be led to suppose that purity and chastity were things unknown in the modern world. But we unhesitatingly affirm that they are the rule rather than the exception.

We referred to the 'stockyard' phraseology of some writers on this nauseous subject—yet what an insult to the stockyard, the cattle-breeder, and the cattle themselves! For these there is nothing contrary to nature, which is merely assisted to produce the best natural results.

Lastly : we might well retort upon the advocates of these so-called 'modern' devices: would you like to think that your own parents lived as you would have us do?

The writer of this pamphlet, a woman doctor, is well known for her fearless work in the truest interests of maternity. She is, however, but one out of many noble-hearted Catholic women who in these last years have fought a strenuous and by no means a losing fight against the 'enemy in our midst'. To such women, and to the Catholic Women's League in particular, the Catholic England of the not-distant future will owe an immense debt.

HUGH POPE O.P., D.S.S.

A TALK TO CATHOLIC WIVES AND MOTHERS

I WANT to speak to my readers very simply and humbly about the difficult and painful subject of birth-control. I have perhaps been brought more in contact with it than most people, as for many years I have worked as a woman doctor amongst women and children, and the confidence and sympathy that exist between my patients and myself have enabled me to realise the great difficulties that a mother in every class of society has nowadays to face, both in bearing children and rearing them. These difficulties have increased tenfold since the first World War, owing to the higher cost of living, the scarcity of houses, and the difficulty of finding employment on the part of the breadwinner of the family. So, as a lover of women and little children, and as a Catholic who thanks God for the gift of Faith, I will try to deal with this question.

Father Hugh Pope has shown in his foreword that the moral law condemns all methods of birth-control—although she does not teach that 'an avalanche of children should be procreated without prudence and forethought both as regards the child and the health of the mother.' The only method of birth-control allowed to husband and wife by the Church is the abstaining (by mutual consent) from the married relationship for a time, or by entering it only at certain periods when there is less likelihood of conception taking place.

Contraceptive methods are condemned because they are against God's natural law, or, as the saying is, 'against

nature'. The moral law teaches that God has created men and women with bodily instincts which serve His ends in Creation. Thus the sex-instinct is a natural one which has for its direct object the peopling of the earth with the human race, as a result of marriage. In the case of men and women, God had other objects also in mind, in implanting this instinct in them, such as the developing of enduring love and affection between man and wife by the use of marriage. But the chief end of marriage is the maintenance of the human race on the earth. Now men and women differ from the animals in having immortal souls and free wills. They alone of all earthly beings can hinder God's purposes in Creation and disobey the natural law.

When contraceptive methods are employed the sex-faculty is used, whilst at the same time mechanical measures are taken to defeat its chief end, viz., the maintenance of the human race. This is against natural law and is therefore condemned by the Church.

Now as a doctor I have come to realise that there are a number of quite ordinary married women of all sorts and conditions who are not Catholics, but who have an instinctive dislike for those methods of birth-control as being 'against nature'. I do not say that such women may not at last resort to them, driven thereto by dread of frequent additions to their families or by poverty. But I have found that in the first instance their natural instincts are against such practices. Others of wide experience have found the same.

Effects of Contraceptive Methods on the Mother

I should like to begin by showing that, just as the Law of God, laid down in the Old Testament for the manner of life of the Jews, is in striking harmony with the laws of health that have been discovered in modern times, so is the

teaching of the Catholic Church on birth-control in harmony with much of the teaching of the best doctors and social economists of the present day.

Let us hear what some great London Specialists on diseases of women have said about the effects of contraceptive methods on certain women who practise them. Some years ago a number of these Specialists had a discussion on sterility at the Royal Society of Medicine in London. Three of them, Dr Giles, Dr Gibbons and Dr Herbert Spencer, unanimously condemned contraceptive practices. They agreed that the women who resorted to them in early married life were sometimes unable to bear children later on, when they had changed their minds and wished to do so.¹

The late Lady Barrett M.D., M.S., gynaecological surgeon to the Royal Free Hospital, London, in her book *Conception Control* also spoke of the evil effects of these practices after they had been resorted to in early married life. She says: 'There are a large number of married couples who would give anything to have children, but have postponed it until circumstances should seem quite desirable, and then, to their grief, no children are given to them. It is very unfair to teach people that they may safely postpone the natural tendency to bear children in youth and rely upon bearing them later in life.'

More recently still, other distinguished Specialists have said the same thing. Dr T. C. Rubin M.D., the well-known professor of gynaecology at Columbia University in the United States, writes: 'Contraceptive methods undoubtedly affect fertility for longer or shorter periods after their uses have been stopped.'²

¹ See *The Lancet*, 14th May, 1921, p. 1024.

² *Bulletin of New York Academy of Medicine*, August 1942.

Mr Green Armytage, the well-known London gynaecologist, who is not a Catholic, speaking at a discussion on sterility at the Royal Society of Medicine in 1942¹, described some research work carried out by himself and Professor Silberstein at the West London Hospital which seemed to show that the use of contraceptives in early married life might hinder the full development of a woman's child bearing organs that should normally take place after marriage and might prevent their functioning later on when she desired a baby. He is of the opinion, too, that changes take place in the neck of the womb, due to the use of contraceptives, which may have a similar effect.

I was discussing this subject only lately (in 1955) with a well-known London Specialist, and he pointed out to me that the above warnings have been issued from time to time for over thirty years by various distinguished doctors who knew what they were talking about, and he added: 'At the present time, I have five women under thirty years of age under my care in Harley St. who used contraceptives in early married life and now seem unable to conceive.'

The 'Safe Period'

There are times, of course, when a married couple find themselves in very real difficulties as regards having another addition to their family. They may be living in one room, with two little children and are finding it impossible to get better accommodation, owing to the housing shortage. Or, take another case where the husband is temporarily incapacitated owing to an accident or serious illness, and his wife is having to do part-time work to make up his unemployment or accident pay, so that it is really too difficult to risk another addition to a family of several children, perhaps. Again, a wife may be in poor health

¹ *Proceedings of Royal Society of Medicine*, January 1943, p. 103.

owing to her babies having come rather quickly, one after the other, and it is really necessary as regards her health to have a rest from child-bearing till she gets up her strength again. In such varying circumstances it may become advisable for a Catholic couple to resort to the use of the 'safe period' (or 'the infertile period', which is a better phrase). A priest should be consulted as to whether, in a particular case, the reasons alleged are serious enough. Advice should then be sought from a good Catholic doctor with experience in this matter. Space does not permit me to enter into further details on the subject, nor is this the place to do so, but there is a pamphlet written by Dr John Ryan with a foreword by Father Alan Keenan O.F.M., which gives full details.¹

Some might argue that to confine the use of the marriage act to the infertile period is not lawful for Catholics. I would refer them to the Holy Father's address to Midwives in October 1951. The Catholic Truth Society have published this under the title *Marriage and the Moral Law* (price 6d.) and I will quote the part which deals with the infertile period:

'The marriage contract which gives the spouses the right to satisfy the inclinations of nature established them in a state of life, the married state. Nature and Creator impose upon the married couple who use that state by carrying out its specific act, the duty of providing for the conservation of the human race. Herein we have the characteristic service which gives their state its peculiar value—the good of the offspring. Both the individual and society, the people and the State, and the Church herself, depend for their existence on the order which God has established

¹ *Family Limitation, Modern Medical Observations on the Use of the 'Safe Period'* by John Ryan M.B., B.S., F.R.C.S. Sheed & Ward, price 2s. Obtainable from C.T.S. Bookshop, 28a Ashley Place, London, S.W.1 or C.T.S. Provincial Depots.

on fruitful marriage. Hence, to embrace the married state, to make frequent use of the faculty proper to it and lawful only in that state, while on the other hand, always and deliberately to seek to evade its primary duty without serious reasons, would be to sin against the very meaning of married life.

Serious reasons, often put forward on medical, eugenic, economic and social grounds, can exempt from that obligatory service even for a considerable period of time, even for the entire duration of the marriage. It follows from this that the use of the infertile periods can be lawful from the moral point of view and, in the circumstances which have been mentioned, it is indeed lawful. If, however, in the light of a reasonable and fair judgment, there are no such serious personal reasons, or reasons deriving from external circumstances, then the habitual intention to avoid the fruitfulness of the union, while at the same time continuing fully to satisfy sensual intent, can only arise from a false appreciation of life and from motives that run counter to true standards of moral conduct.'

The reader will perhaps say at this point: 'But what am I to do? I can never have another child as I had such a bad time when my last baby was born.' I would answer her, with much sympathy but with full conviction, that it does not follow because she has had one bad confinement that the next one need necessarily be bad too. There has been of late years much study of these difficult cases by doctors who are specialists, with the result that great improvements have been made in the methods of dealing with them, both before and at the time of birth, so that in the case of a woman who has already had one bad confinement, most of these difficulties can be foreseen and prevented if only she will consult a specialist in good time beforehand. If the mother is poor there are now a number of maternity

hospitals in London and the provinces where she can go and see a specialist on midwifery free of charge; he will give her advice and treatment beforehand, and will also, if necessary, attend her in the hospital at the time of the birth, so that the very bad time which she dreads may not occur. Therefore I will urge any mother who fears that she can never bear another child with safety not to give up hope until she has consulted a specialist.

There are others of my readers who may say: 'But I dread so much the long months of weary waiting before another baby comes, for I always suffer so from sickness or other complaints during the whole of that time!'

There again I would advise her to attend an ante-natal clinic or a maternity hospital, where practically all of these complaints can be cured or greatly relieved.

In concluding this section of my subject I should like to deal briefly with two statements often made by advocates of contraception: that it is better to have two or three healthy children than several unhealthy ones, and that a high birth-rate is the cause of a high death-rate amongst babies.

These statements were discussed very fully by Sir George Newman, Principal Medical Officer of Health, in his Annual Report for 1925. He said that the whole question was a complicated and difficult one, but he came to the conclusion that nobody was justified in saying that the great reduction in the number of infant deaths during the first 25 years of this century was due to the steady fall in the birth-rate that had been taking place at the same time. For instance, he showed that in England the birth-rate began to fall slowly but steadily in 1876, whereas the death-rate amongst the babies did not begin to fall steadily until 1902. In France, the birth-rate was falling, steadily too, during

that same period of 25 years. But on the other hand, the infant death-rate was gradually rising during all that time. In other countries, such as Holland and Sweden, the falling birth-rate in recent years seemed at first sight to be the cause of the falling death-rate amongst the babies. But Sir George Newman pointed out that the infant welfare movement which has spread so widely throughout Sweden, Holland, and England in recent years was largely responsible, probably, for the great fall in the infantile death-rate in these same countries.

Effects of Birth-Control on 'The Only Child'

In the infant welfare centres nowadays we doctors are beginning to see the harm that is caused to a child's bodily and mental development when it is deprived of the companionship of brothers and sisters. There are such a number now of these solitary little people who are brought to us by most careful and anxious mothers. Such a mother will give as her reason for not having more children that 'I cannot bring up more than one child as it ought to be brought up.' But is she really doing her best for the child? The little thing may have pretty clothes and be beautifully cared for, but it is often of a very nervous disposition owing to the attention of both its father and its mother being concentrated on it unduly. Its appetite suffers and both height and weight remain at a standstill, perhaps for a long time. The mother's anxiety increases in proportion, until a state of affairs is sometimes reached when the child gets into a state of 'negativism' and refuses to do anything that it is told.

Sir Robert Hutchison M.D., the great children's specialist, gave a lecture some time ago on the solitary child, and described how he (or she) gets into such a condition. 'He becomes nervous and thin and restless, and eats, digests,

and sleeps badly and tires easily. Mentally he is excitable, emotional, precocious, and introspective. Morally he is disobedient and often ill-tempered.

'Out of nine children brought to me recently for lack of appetite, eight were solitary. Meal times become a nightmare for mother and nurse, and all kinds of attempts are made by coaxing and bribing the child to eat, but without success. The more sensible mother makes an attempt to overcome this by pathetic devices such as 'having the little cousins in to tea.' But such remedies partake of the nature of pills for earthquakes. The child in most of these cases is not over-indulged but over-studied'.¹

Sir Robert Hutchison's remedy is healthy neglect of the child or sending him to boarding school. But what an alternative! Surely it is small brothers and sisters that the poor little one needs!

'I would like a tiny sister,' said a little solitary child to his mother the other day.

The Effects on the Nation

Having shown the evil effects which contraceptive practices have on the individual, I should like to refer briefly to the evil effects they have on a nation. In France, where such practices have been indulged in, by a larger proportion of the population and for a longer period than in England, the number of babies born each year has fallen considerably and the nation has greatly diminished in numbers. Thus, while in 1831 the average number of children in a French family was about four, in the year 1913 it was about two. These figures speak for themselves.²

The defeat of France by Germany in 1940 was not only

¹ *The Lancet*, 28th January, 1922.

² See the *Dublin Review*, January, 1922, p. 67.

due to military unpreparedness and to treachery in high places, but was also caused by the lack of sufficient Frenchmen to defend their country when it was attacked by overwhelming masses of German soldiers. Marshall Pétain referred to this fact very movingly when announcing the fall of France. 'Too few children' was one of the reasons he gave for her defeat.

In certain parts of south-west France, where birth control had been widely prevalent for many years, the population was so diminished that there were not enough peasants to cultivate the land there. In consequence, labourers had to be brought in from Switzerland and Belgium; and also from other parts of France such as Brittany, where the population were mostly devout Catholics and the population had not been diminished by contraceptive practices.

Professor Meyrick Booth B.Sc., Ph.D., in an article in the *Hibbert Journal* for October, 1914, said: 'Much information exists, tending to show that heredity strongly favours the third, fourth, fifth, and subsequent children born to a given couple, rather than the first two who are peculiarly apt to inherit some of the commonest physical and mental defects of their parents. (Upon this important point the records of the University of London Eugenics Laboratory should be consulted.) A population with a low birth rate thus naturally tends to degenerate. It is the normal, not the small family that gives the best children.'

To the mother, determined not to have a family of more than one or two, I would say: 'Do you realize that you may be preventing some children from coming into the world who might have been specially lovable, beautiful, and intelligent? Are you not in danger of depriving yourself of some dear sons and daughters who might be such a happiness to you, in later years, when your present diffi-

culties are over?' Is it just an idle fancy which in fairy stories so often depicts the youngest child of a large family as exceptionally loving and beloved?

I am fully aware of course, that the Royal Commission on Population declared, in 1949, that on the average the majority of intelligent children come from small families and the majority of dull children from large families (p. 154). This sweeping assertion was based on the series of intelligence tests, carried out on the same day, in 1947, in Scotland (over 70,000 eleven years olds being tested) as well as on the other series of similar tests in England and America.

I have discussed these tests with a number of experienced teachers who think very poorly of them. The slick, precocious only child, always with grown-ups, is the one who passes them successfully, whilst the children of a large family, more in contact with each other than with adults, may not do as well in the tests, especially when opportunities for quiet study are lacking if the home is overcrowded; yet a Headmistress of a Grammar School of wide experience, tells me that the child who does less well in an intelligence test than the precocious child, often overtakes the latter educationally in her school career later on. Most of us have known children who were behind others of the same age in mental development, but who have gone ahead as they grew older and have outdistanced their school fellows.

A famous instance of a slow developer is that great man Sir Winston Churchill. In his book *My Early Life* he relates how he went to Harrow School at the age of twelve and goes on to say: 'I was in due course placed in the bottom form—I was, in fact, only two from the bottom of the whole school; and these two, I regret to say, disappeared almost immediately through illness or some other cause. . . .

I continued in this unpretentious situation for nearly a year'.

Whatever our politics may be, we must all admit that this boy of 12, at the bottom of a famous Public School, developed a marvellous intelligence as he grew older and because of this, and his forceful character, he became Almighty God's instrument in saving our country from Hitler and his German forces. It would seem, therefore, a useless proceeding to label a child of 11 as less intelligent than it should be, solely on the result of one intelligence test. Some Education authorities, indeed, are now omitting these tests altogether from their scholarship examinations and are relying entirely on results in arithmetic and English for passing the children on to Grammar Schools.

I met a most gifted woman the other day, a Headmistress and an Honours Graduate of Oxford University, and she described to me with glee how she and a friend, a Graduate of London University, were confronted for the first time with a set of intelligence tests for children of 11. They puzzled over them together for a couple of hours before they could work them all out, and finally discovered that there was a 'key' with the set, which helped matters considerably.

Difficulties of Motherhood and how to face them

Some do not yet realize the great help they can receive, in bearing the burden of motherhood, by attending the local Welfare Centre. When a woman is pregnant, much useful advice can be given her by the doctor and midwife at the Ante-Natal Clinic and a great deal of ill health, due to her condition, can be overcome or even prevented from arising. From long experience at these Clinics, as a doctor, I have seen how much more comfortable an expectant

mother's life can be made by medical advice and treatment.

After a baby's birth, when the mother is about again and brings the child regularly to the Infant Welfare Centre, she will receive much help when nursing it and after it is weaned. Some of the dread of having another baby is due to the fear that it will be restless and frequently crying, both day and night. There is no need though, for an infant to be restless and irritable. Such a state of affairs is nearly always due to its being wrongly fed or to some bodily ailment that can easily be cured. If the mother will take advantage of the skilled advice and mild treatment given by the doctors and health visitors at the Welfare Centre, the crying or fretfulness will soon cease, most probably, and peace prevail once more in the home.

Other aids to expectant and nursing mothers, regardless of income, which are now available are: a pint of milk daily at half-price, a free supply of codliver oil capsules, and bottles of concentrated orange juice at a very cheap rate. The maternity benefit has also been increased lately and most municipal and local health authorities have a supply of Home Helps who will come in daily and look after mothers who are being confined at home and attend to the needs of their families.

Unfortunately, the number of nursery schools in this country was somewhat reduced, some years ago, as false economists persuaded the Board of Education to do so, against the wishes of its permanent officials. From long experience, as a doctor, of working-class conditions, I say that this is one of the last economies a Government should make. The problem of the toddler, a child of two to five years old, is often a difficult one when another baby arrives and the mother has the care of the home on her hands as well, so that the toddler receives less of her care and

attention than formerly and is apt to suffer in health and spirits. A nursery school, if there is one in the neighbourhood, is then most helpful as the toddler can be cared for and usefully occupied during the day, whilst the mother is able to look after the baby and home in some measure of peace and quiet.

I want to insert a warning here, though, against the practice followed during the second World War of admitting children under the age of two to day nurseries whilst their mothers did war work. However patriotic their motives were in doing so, and however valuable their efforts in helping to defeat Hitler, yet the opinion of doctors who had to inspect these tiny children in war nurseries is, on the whole, against their being away from their homes and mothers for so many hours daily; often ten or twelve hours as against the six that a little child spends in a nursery school. At a meeting of the London Branch of the Medical Women's Federation, Dr Marjorie Back, President of the Child Welfare Group of the Society of Medical Officers of Health, and a most experienced medical officer, spoke strongly against children under two being sent to day nurseries when the war was over. She pointed out that the day nursery did not solve the problem of the mother on full-time work and that the homes of such workers relapsed into squalor. A child from an inefficient home usually improved on entering a day nursery, but a child from a good home often received a check, became fretful, and lost a little weight. Infectious illnesses were frequent in these nurseries, with the exception of diphtheria, against which nearly all had been immunized. Medical women should insist that the married woman with young children was not a suitable person to undertake full-time work. The proper place for the baby under two was *the home*, if it was a good one.

Dr Helen Mackay, one of our most distinguished specialists on children's diseases, spoke at this meeting also and agreed with Dr Back and other speakers. She said that recently she had been conducting an investigation which kept her for long hours in day nurseries and had come to the conclusion that, in spite of much good will and kindness on the part of the staff, there was apt to be a good deal of crying from fretful children and shouting from tired women, and that there was a high incidence of infection and a low incidence of happiness. Many children minded grievously the separation from their mothers; many were bored by the long hours in which they did nothing. During the last three hours most of the children were crying. They were separated from their mothers from 6.30 in the morning to 6.30 at night and it was too long.

Such criticisms do not apply to nursery schools, as children are not admitted to them below the age of two and only spend six hours there each day as against the twelve hours in day nurseries. There is also a staff of trained teachers to keep them happily employed.

Before the World War of 1939, mothers of very young families were often compelled, by force of circumstances, to put their little children in day nurseries and go to work when their husbands were unemployed, and in such cases the temptation to resort to contraceptive methods was often great.

Family Allowances

The *Beveridge Report*, issued in 1942, with its plan for family allowances, brought consolation to all those who had the welfare of the family at heart, and who dreaded what might happen when the second World War should end and a possible trade depression set in, with consequent unemployment. Fortunately, the Government decided

to introduce a measure for giving family allowances without waiting for all the recommendations of the *Beveridge Report* to be brought into force, and this measure was passed in 1946. Thus there is now less need for the mother of a family to go to work if her husband should be unemployed or earning only a small wage. It is interesting to note that the result of introducing family allowances in the factories of Lille, one of the biggest industrial towns in Northern France, was that a great number of married women workers gave up their jobs and stayed at home to look after their families. In the years between the two World Wars the French Government became so alive to the importance of assisting married workers during the difficult years when they were bringing up their families that they granted them all sorts of special concessions. A father of a family always got a reduction on his daily tram fares and tickets on the railways were issued to him and his children at cheaper rates.

British mothers owe a great debt to the late Miss Eleanor Rathbone who worked hard for years to introduce family allowances into this country.

Labour-Saving Appliances

From years of experience, as a doctor, of the difficulties of mothers in every class of life, I can say without fear of contradiction, that the increase in all sorts of labour-saving appliances has made a wonderful difference to their lot as compared with that of their grandmothers. Take the washing machine for instance; there is no need to dread the weekly washing day as Grandma did, for the machine does most of the work and the electric iron completes the job fairly easily without having to use a succession of heavy irons heated on the stove. Similarly, the vacuum cleaner easily removes all dust from carpets, furniture and

curtains, compared with the back-breaking efforts to dislodge it with dustpans and brushes and a succession of brooms and mops as in former days. In spite of the Chancellor of the Exchequer's recent condemnation of buying on the instalment system, I would strongly urge newly-married couples to acquire washing machines (and, if possible, vacuum cleaners) that way, if they can't afford to buy them outright; and to do so rather than spending any available money on television sets however desirable.

Housing Difficulties

The housing problem is still with us in spite of the efforts of successive Governments to deal with it. Some of my patients, nice respectable women, are living with their families in two or three rooms, perhaps, in old-fashioned houses in which other families are living also, and the sounds of the wireless coming from the different floors are apt to be distracting when a mother is trying to get her baby to sleep; to mention only one trial out of many. Hardest case of all, is that of a young couple, unable to get a home of their own, who have to live with their 'in-laws' and it doesn't need much imagination to picture the difficulties that may arise when a young wife has to share her kitchen with her mother-in-law! Again, too, this type of house is often badly in need of repairs which the landlord either can't or won't undertake, and he (or she) often shows a very bad spirit, refusing to let rooms to people with children. As a mother said to me once, 'I might as well lead a wild animal with me when looking for rooms as take a child with me.' Often too, a mother has told me that she has been served with a notice to leave her little home, because the landlord has discovered that she is expecting another baby.

I am sure that such conditions as I have described are

tempting really good women who love children to use contraceptive methods who would never have thought of doing so if houses and flats were still not so hard to get. I fully realize of course, that the plight we are in, is partly due to the two Wars in which our country has been engaged since 1914 when all building of new houses had to cease for the time being and it is only fair to say that our rulers *do* seem to be making a big effort to press on with housing for the working classes. It is a heartening sight when travelling about England to see the new Council houses and flats, springing up everywhere. But there are *still* too many families wanting houses on the housing lists of the various Local Authorities and it *is the responsibility of each one of us, as a voter, to keep up pressure on the Government to give housing the first place in their schemes, even before schools and certainly before road development and space travel!*

In the interests of the upper and middle classes other reforms are needed and should be striven for. For instance, I would urge very strongly that all women voters should press for greater remission of income tax than is at present given for each successive child born in a family. Many people also feel it would be a great help towards educating a family of several children if the mother's income, when an unearned one, were assessed separately from the father's for the purpose of income tax.

Parents in these classes of life have to pay a tremendous financial price for the birth of every child. Frequently, owing to the cramped accommodation, it is not possible to have a confinement at home, and the parents have to pay large fees to a nursing home as well as the doctor's fee. This, again, shows the urgent importance of the housing question. Also there should be more private rooms in maternity homes and hospitals, where mothers of moderate means can go and have their babies at a reasonable cost.

Last, but not least, if any upper- or middle-class Catholic mother is tempted to use contraceptive methods, with the false notion of giving her one or two children a better 'chance' in life, I would appeal to her with much sympathy to reconsider first her standard of living. We have all to learn to be content with a simpler standard of life than that which prevailed many years ago, not only for ourselves but, what is harder, for the children.

Let me describe an experience a few years before the World War broke out in 1939. I frequently used to visit a home in the country where two parents, dear friends of mine in a good position of life, were bravely bringing up a family of five children amidst great financial difficulties. The children's education was a tremendous problem, but the father, an old Wykehamist, sensibly abandoned his former hopes of sending his three sons to his own beloved and famous public school and decided to send them to smaller and not such well-known schools at less expense. Even so, he had to sacrifice some of his small capital to do so. Fortunately, the boys co-operated and worked well. The mother's health was poor and she could not afford much domestic help, but she found time to teach her children religion. In spite of many drawbacks, I was always struck by the happy atmosphere of the home. The whole party was so full of the fun and joy of life and enjoyed simple pleasures with such zest. Indeed a young friend of mine, an only son, who went on a visit to them, said afterwards that he had never realized before what happiness there was in a large family. Incredible as it may seem, he had never, up to the age of 25, visited a home where there were several young people of different ages, as all his friends were either only children or had just one brother or sister.

I went there again in 1943 when the father had gone to his eternal reward, but it was delightful to see the mother

so happy with her grown-up family and looking so young and handsome in spite of her previous hard existence. The two eldest sons, young Naval officers, had distinguished themselves on war service, and the eldest had saved a number of lives at sea through his heroic action. Our country owes much to such fathers and mothers.

Spiritual Remedies

The spiritual remedies for dealing with the difficult situation in which many good Catholic mothers find themselves to-day can, I think, be summed up in the words, 'The grace of God bestowed on us by the Sacraments.'

As a doctor, I realise more and more the wonderful effect which the grace of God, habitually bestowed in the Sacraments, has upon people's bodies as well as upon their souls.

And is not this what one would expect? The priest in his Preparation before Communion prays daily: 'Let the partaking of Thy Body, O Lord Jesus Christ . . . be to me as a safeguard and a remedy both to mind and body.' I believe most firmly that it is the habitual receiving of this great 'remedy to mind and body' that enables Catholic wives to bear the burdens of motherhood so long and so patiently, and that great bodily as well as spiritual strength is given to them by our Blessed Lord for this purpose.

I will illustrate this by telling of a woman of my acquaintance, a good Catholic whose case was, perhaps, the hardest of any I know—and I have known a good many hard cases. As a girl she had been brought up in comfortable middle-class surroundings, and before her marriage she had earned her living as a governess in good families. Consequently she was not accustomed to hard household work, and her standard of living was rather high. She and her husband were very badly off and lived in two rooms of an old-fashioned house. She had three children under five; she

could not afford domestic help, her health was not good, and she had to carry upstairs all the water required for cooking and washing from a tap in the basement, two floors below her flat. In spite of these hardships this dear woman was always neatly dressed, kept her children clean and tidy, and found time to teach them their religion. She told me that it was a hard struggle, but she said frankly that it was the Catholic religion and the frequent receiving of the Sacraments that enabled her to live her hard life cheerfully and to defy all temptation to limit her family by birth-control methods.

As her circumstances were so difficult, a friend and I tried to get better housing accommodation for her and her husband, for they had both repeatedly tried to obtain it, but without success. However our efforts, too, proved fruitless owing to the scarcity of houses! Then one day she and her husband decided to set out on a little pilgrimage to a well-known shrine of Our Lady of Lourdes in a church at some distance from where they lived. They took the children, too, and on reaching the church they all prayed there for a suitable house, asking Our Lady especially (for whom 'no room had been found in the inn') to intercede for them with her Son in Heaven. In a few days' time they heard, quite unexpectedly, of a little house that was 'to let' in one of the new London suburbs. It had a garden and was fitted up with labour-saving appliances and they found that the rent was within their means to pay. They are now living there in great comfort.

Results of Fidelity to God

First of all, in regard to the mother herself. Does not the Catholic who has been faithful to the Church's teaching attain to a much happier middle life and old age than do those mothers who have limited their families by the use of methods of birth-control? One has seen the tragedy

that often arises to the mother, in small families, when one or more children are carried off by death or accident, and of how lonely, in consequence, is her life in later years. But the mother who has been faithful in her religion and has a family of several, is loved and cared for by her children around her in later life.

Then in regard to the race. Our faithful Catholic mothers are doing a wonderful work for God. In time, if contraceptive practices continue to prevail amongst Protestants, their number will decrease and the Catholic race will prevail, and thus England might again become what it once was, a Catholic country.

This is no fancy picture. Dr Mary Scharlieb, giving evidence before the National Birth Rate Commission in 1921, showed that the average number of children in Catholic families in England was then six, as against an average number of three in the general community. Whereas in the French part of Canada, where there had always been many practising Catholics, these, in proportion to the Protestants around them, had so increased in number in a few generations that French Canada had become almost entirely Catholic.

The position seems to have changed somewhat in the last twenty-five years or so, if we are to believe the Report of the Royal Commission on Population, published in 1949. When dealing with the problem of the declining birthrate, the Report says (see paragraph 337) : 'The Roman Catholic populations of Eire and French Canada have larger families, but there is evidence that the small family pattern is spreading amongst them too.' I should add that the Report does not give any figures on which such a statement is based, nor can one discover any, either, for the statement made when discussing the declining birthrate in England and Wales (see paragraph 72) 'that the average family size has declined greatly, even amongst *Roman Catholics*'.

Dr Newsholme, Medical Officer of Health for Birmingham, has written an excellent pamphlet entitled 'The Population Report and the Survival of the Christian Family'.¹ In dealing with the problem of the declining birthrate as it affects his fellow-Catholics, he says : 'We must accept it, then, that this is a problem for the Catholic as for the non-Catholic ; though of the several means by which the decline in the size of the family has been brought about, the means applied in the Catholic have not necessarily been identical with those applied in the non-Catholic community.' In other words, it does not necessarily follow that the smaller size of some Catholic families nowadays is due to the use of contraceptive practices. It is possible that the use of the 'safe period' (not condemned by the Church) has resulted in the smaller size of some of the families in question. Undoubtedly, too, in Eire the fashion of late marriages has ended in fewer children being born even to couples who are practising Catholics. I would urge my readers to buy this pamphlet as it shows how these difficult family problems can only be solved by the Christian way of life. The Population Report ignores that side of things entirely.

I will close with some words of St Francis de Sales, which give an incomparable picture of the great work done by every Catholic mother in bringing a child into the world and bringing it up in the love of God. He is writing to a mother who is shortly expecting a child and is feeling weary both in body and soul. He says :

'My dearest daughter, we have at Annecy a Capuchin painter who, as you may think, only paints for God and His temple ; and though while working he has to pay so close an attention that he cannot pray at the same time, and though this occupies and even fatigues his spirit, still

¹ Published by the Catholic Truth Society, price 6d.

he does this work with good heart for the glory of Our Lord and the hope that these pictures will excite many of the faithful to praise God and to bless His goodness. Well, my dearest daughter, your child will be a living image of the Divine Majesty; but whilst your soul, your strength, your natural vigour is occupied with this work, it must grow weary and tired and you cannot at the same time perform your ordinary exercises so actively and gaily; but suffer lovingly this lassitude and heaviness in consideration of the honour which God will receive from your work. It is *your* image which will be placed in the eternal temple of the heavenly Jerusalem and will be eternally regarded with pleasure by God, by angels, and by men; and the saints will praise God for it, and you will also praise Him when you see it there; and so meanwhile take courage, although feeling your heart a little tepid and sluggish, and with the superior part; attach yourself to the holy will of Our Lord, who has so arranged for it according to His eternal wisdom.'

POSTSCRIPT

It has seemed advisable to write a sequel about the practice of abortion as this has become increasingly common in recent years since contraceptive practices have been resorted to. And the reason appears to be that married couples using such measures are apt to find that *they fail*, and the wife becomes pregnant in spite of them. This is by no means an uncommon occurrence, for even the advocates of these methods are forced to admit that none of them are really 'safe', as the term is. In passing, I would point out what a real handicap the little unborn child may be under, who has been conceived *in spite* of such precautions taken by its parents. It is difficult to go into details here, but those readers who know what these methods of preventing conception really are, will not need much imagination to picture the undesirable conditions which may surround a newly conceived baby in its earliest beginnings, when its parents have been living together in this fashion.¹

To continue, then, supposing a mother of two children cannot face coping with a third baby and resorts to contraceptive methods but becomes pregnant in spite of them! Probably she submits reluctantly to such a condition. But there *are* cases, increasingly common in my experience, where she takes drugs to rid herself of the unwanted child. Should these have no effect (and frequently they *don't*), she may resort to the professional abortionist for the child to be removed from her womb. Terribly dangerous as this operation is, in such unskilled hands she may lose her life in the process. Even a highly-qualified surgeon regards this operation as one not free from risk, however skilfully performed, for deaths have occurred from haemorrhage, shock, or septic infection.²

¹ See article by Professor Beckwith Whitehouse, p. 215, Eden & Lockyer's *Gynaecology*, 1935 edition.

² See 'Sociological and Medical Aspects of Induction of Abortion,' by Dame Louise McIlroy M.D., *Journal of State Medicine*, vol. xlv, No. 6.

It should be realised also that, though this operation was legalized in Russia in 1921, it is no longer allowed there except for urgent medical reasons. Hard facts have shown the Soviet authorities how harmful have been its effects on the health of women in Russia.

Catholic theologians teach that the practice of abortion is a grave sin because it is a *deliberate* attack on the life of the unborn child, who is not a mere animal but a human being with an immortal soul. Sometimes a Catholic mother does not realise this, thinking that if she rids herself of an unwanted baby in the first four months of pregnancy she is committing no sin, because, as she says, 'It has no life in it before I quicken.' This is an entire mistake, for it is a scientific fact that a child is alive and is growing rapidly from the moment it is conceived in the womb. Catholic theologians teach, too, that at the moment of conception it is endowed by Almighty God with an immortal soul. Beyond question, therefore, the unborn baby is a human being directly it is conceived. It has the *right* to go on living, therefore, and tremendous possibilities lie before it, just because it possesses an immortal soul that is unspeakably precious to God who created it and His dear Son who redeemed it.

The woman tempted to get rid of an unborn child surely cannot realise what a *cowardly* deed that would be. She would never dream of destroying it after it was born, and would loudly condemn such a shameful attack on a helpless baby. Is it any less cowardly to attack a little unborn creature who cannot even cry out in protest at its life being destroyed by the mother to whom it is clinging for nourishment and protection?

Of course I realise how sorely tempted a mother may be when her life is a desperately hard one and she discovers she is pregnant again. 'I would not mind having another

baby, Doctor, *if only* the kitchen chimney wouldn't smoke,' said a Catholic mother to me after confiding how tempted she was. 'Just as I've cleaned up the kitchen,' she continued, 'a gust of wind will blow the smuts down the chimney and mess up the place so that I have to clean it again.' Now the real trouble there, I discovered, was *not* the unborn baby but the *landlord*, who had refused to put the chimney to rights.

I have lived long enough to see how the unwanted infant sometimes grows up to be the greatest comfort to its parents. Years ago a dear friend, expecting her fourth baby, dreaded its arrival unspeakably, as she felt worn out and unable to cope with another child. When it came it was a sickly little creature, demanding constant care and attention. As years passed by I watched him growing up into a delightful youth: good, unselfish, and so clever, and in time becoming the best-loved of all his mother's children. She said lately: 'I feel as if I ought to apologise to him because I did not want him before he came, and he is *so* dear to me now.'

There are cases, of course, where her health is bad and the prospect of another baby fills a mother with alarm. Much can be done, however, by a doctor to tackle ill-health by treating its *cause*—often a very commonplace one, such as decayed teeth, for example (and particularly those which are said not to ache, when the visit to the dentist is apt to be postponed). At the root of these teeth thousands of unhealthy germs have dug themselves in and are multiplying and passing into the blood of the unfortunate patient, infecting her whole system with their poisons. A pair of unhealthy tonsils, too, may have a similar effect. Small wonder, therefore, that the mother with unhealthy teeth or tonsils is apt to become thoroughly run down and anaemic! But after she has been persuaded to part with

them it is wonderful to witness the change in her health for the better.

Again, take the case of anaemia due to lack of iron in the blood, so common amongst women who are badly off or whose diet is faulty. This condition is apt to cause extreme fatigue and loss of the sense of well-being. Yet it can be cured by proper nourishment and large doses of iron.

There are other and more serious causes of ill-health, though fortunately uncommon ones, which used to be considered prejudicial to the safety of an expectant mother. I refer especially to heart disease, diabetes, and consumption. The doctor in attendance on such cases would sometimes, if a non-Catholic, advise abortion. Owing, however, to the knowledge gained from modern medical research, this operation is not now performed in non-Catholic hospitals so often as it was. The famous gynaecological surgeon, Dame Louise McIlroy, points this out in her article referred to above. She shows, for example, how diabetes, which was thought to be incurable until the discovery of insulin, can now be so successfully treated that the expectant mother suffering from it can continue pregnant to full term without danger. She goes on to say: 'In the same way with heart disease, with more exact methods of diagnosis and treatment, the expectant mother is also enabled to go to the end of pregnancy with much less risk. Indeed, among the working classes, the patient is often only first made aware of her heart-condition at the ante-natal clinic, and probably receives special heart-treatment as a consequence, which is likely to be of permanent value to her general health.'

With regard to the expectant mother suffering from consumption, the position is less serious than formerly, for the poorest person can now receive free open-air treatment at a sanatorium so that the risk of child-bearing can be considerably lessened.

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