

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

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

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

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

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

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

Mr. HILL. Proceed.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

I should like to emphasize one or two points.

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