

Rush to approve Norplant cloaks eugenicist motives

by Linda Everett

On Dec. 10, 1990, the U.S. Food and Drug Administration (FDA) approved Norplant, the long-term implantable contraceptive, for distribution in the United States. While the drug's developers, the Population Council, were celebrating, radio talk show hosts and some newspaper editors were already proposing to have every girl implanted with it at first signs of puberty. Columnist Ellen Goodman complained that this otherwise wonderful drug was being seized by those who want "to cap social problems by getting a lock on the womb."

Norplant represents almost an "ideal" social control technology from the standpoint of the masterminds of the New Age rock-drug-sex counterculture. Any battle to restore a concept of love and morality to sexual activity is given up in advance; youth, especially the socially disadvantaged, who have little hope for a better future, will be encouraged to indulge in drug abuse and sexual promiscuity—because now, society won't have to pay the price of raising the poor and often disabled children who could result from such activity. As an "improvement" on existing contraceptive techniques, Norplant, once implanted, will require no forethought on the part of the woman, no cooperation on the part of the partner, and—in the explicit intentions of certain newspaper editorialists, judges, and the developers of the drug—could leave the issue of conception entirely in the hands of an outside force, an Orwellian "Big Brother."

Medical safety questions persist

Norplant, which will be marketed in the United States by Wyeth-Ayest Laboratories in Philadelphia, consists of six silicone rubber, matchstick-sized rods which release a continual dose of the synthetic hormone levonorgestrel, an active ingredient in some oral contraceptives. Once surgically implanted under the skin of a woman's upper arm using local anesthesia, the rods become immediately effective in preventing pregnancy for almost five years. "Almost as good as sterilization," boast proponents.

Although a half-million women in 46 countries used Norplant, no large-scale, long-term *independent* study exists. The fact that the Population Council spent 25 years and more than \$20 million to develop and market Norplant, makes it all the more appropriate that an unbiased agency without such an investment take up such a study.

The case of another "revolutionary" birth control product, the chemical abortion drug RU-486, underlines the point. In their rush to support it, the American Medical Association, Planned Parenthood of America, and a host of feminist and depopulation groups as well as several city governments and leaders all propagandized the deceptive study results and misrepresentations of its French developer, Roussel-Ulcaf. But after its own studies, the French government sent out warnings to all health facilities regarding the deadly dangers involved (which will be the subject of an upcoming *EIR* article).

Even the National Women's Health Network, a feminist pro-abortion group of 500 member organizations, has criticized the FDA for bypassing the normally required pre-marketing surveillance of Norplant's long-term effects. They opposed Norplant's approval because of the lack of data showing its long-term safety in normal use and use in lactating women. The Council did not follow infants exposed to Norplant beyond three years. Nor are the long-term effects for children who were breast fed while their mothers used Norplant known. Has FDA forgotten how diethylstilbestrol (DES), another "approved" synthetic hormone, caused ill effects to thousands of women who used it, and induced cancer in some of their daughters later as well?

Some groups feel that politically powerful environmentalists will force Norplant's use in "overpopulated" countries to "save the environment." There are also concerns that Norplant will not be removed when women demand it, as was reported to occur in one of the pilot projects in Brazil. Also, with doctors notoriously lacking in undeveloped countries and poor areas of the United States, who is going to guarantee that any physician will be available to monitor the insertion or Norplant's side-effects and potential risks of strokes, blood clots, cancer, liver disease, and bleeding? One is also entitled to doubt that health clinics serving indigent women will insist they be thoroughly screened for their medical history before using Norplant.

Indeed, the slipshod neglect of standard criteria in this rush-to-approve by FDA would suggest to very suspicious minds, that proponents of Norplant would not mind getting rid of a few potential "underclass" mothers along with their future offspring.

Cheap way out

Proposals to use Norplant to temporarily sterilize welfare mothers, drug or alcohol abusers, or teenagers, which cropped up in the *Philadelphia Inquirer* and the *Virginia Roanoke Times and World News*, and elsewhere, all focused on a quick, cheap way out of solving social problems. Thus, when a California judge orders a woman convicted of child abuse to use the implant for three years as a condition for probation, he is really saying society has no intention of helping her, but “offers” the “choice” between forced contraception or four years in prison. Debt-strapped states are considering similar “offers” for women needing costly social programs states intend to cut.

Oregon’s State Task Force on Pregnancy and Substance Abuse, which identifies women with drug-affected babies for treatment, seeks less “financially demanding” pilot projects using Norplant, surgical sterilization, and the chemical abortifacient RU-486. Drug- or alcohol-affected babies make up 8-11% of the 40,000 children born every year in Oregon and are considered “a massive financial cost.”

Jackson Memorial Hospital in Miami is exploring the use of Norplant to cut the number of drug-addicted or premature infants “jamming” its neonatal intensive care unit. Jackson has over 18,000 births a year, the majority of which are to women unable to pay or who are on Medicaid. One hospital director, Peggy Biele, said the program would save millions of dollars. The Dade County Public Health Service is also considering a similar program.

In Kansas, Republican state legislator Kerry Patrick introduced a bill to pay a \$500 incentive to any mother on welfare who uses Norplant—the same proposal made by the *Philadelphia Inquirer* in its recent controversial editorial. Patrick, who has profiled himself in the past as “pro-life,” said it costs the taxpayers of Kansas more than \$205,000 to provide basic public assistance for each welfare child from birth to adulthood. “Something must be done to reduce the number of unwanted pregnancies, and this type of voluntary program, where the public welfare recipient is given a strong financial incentive to use a safe, reversible contraceptive device that has a useful life of five years, represents the best way to prevent them.”

All these proposals say the implantation of Norplant would be completely “voluntary.” Think so? Part of Oregon’s health care rationing plan for Medicaid or uninsured patients would assure that services like abortion, sterilization, and contraception are given top priority. But life-saving or life-sustaining medical interventions for premature infants and chronically ill children—as would likely be needed for children born to crack cocaine-addicted mothers—will not be covered.

Financial coercion

The Population Council cites several organizations such as the Rockefeller Foundation, the United Nations Popula-

tion Fund, and the Population Crisis Committee, which all contributed to the research and development of Norplant. It ought to give pause that each of these groups was involved in Communist China’s horrifying one-child-only program, in which forced abortions (even of late-term fetuses) and sterilizations were central to the “success” of the program. Less overtly gruesome, perhaps, but just as potentially fatal to the life and dignity of the individual, were China’s heavily punitive social and financial “disincentives” to families with more than one baby—where parents faced the prospect that if the forbidden child were born, they would literally not be able to feed it.

Outside China, the Population Council has given such economic coercion an approximation of a “democratic” face—until you look at the real content. The council endorsed programs in Indonesia which rewarded poor couples for not having children, by offering low interest loans (otherwise unavailable) and free trips to Mecca—in some cases the only way they could fulfill the religious requirement of every Muslim to make that pilgrimage during his lifetime.

One member of the Population Council board of trustees, Meechai Viravaidya of Bangkok, Thailand, also plays the card of such economic “incentives,” tantamount to blackmail for credit-starved villagers. In his programs, such as “non-pregnancy farm credits,” if a woman does not get pregnant for the term of the loan, the interest on the loan is cut in half. If the woman is sterilized, the loan is doubled; if the husband has a vasectomy, the loan is quadrupled.

Nazi roots of the Population Council

All of these repugnant procedures are justified on the basis of the preposterous theory that there is an equation between the rate of population growth and a nation’s “carrying capacity,” independent of economic development. Although most of targeted nations are in fact *underpopulated* from the standpoint of population density—compared to any advanced industrialized country, such as Germany—this has not kept this malthusian justification from being vigorously promoted.

A look at the personnel and history of the Population Council, which brought Norplant into the world, points to the sinister motives behind this scientific fraud.

McGeorge Bundy, the self-styled dean of the Eastern Establishment, is the chairman of the Population Council’s board of trustees, and of four of the council’s six committees: the Executive Committee, Finance Committee, Nominating Committee, and Salary Committee. Bundy, as national security adviser in the early 1960s, was architect of the depopulation scheme known as “strategic hamlets” in Vietnam. He went on to head the Ford Foundation, where he funded similar schemes for major U.S. cities, including the “community control” hoax designed to foment race war between black parents and Jewish teachers in New York City during the 1968 teachers’ strike.

The Population Council was founded in 1952 by **John D. Rockefeller III** with several depopulation experts and pre-war eugenicists. Funding from the Rockefeller Foundation, Rockefeller Brothers Foundation, Ford Foundation, and the U.S. Agency for International Development permitted the council to become *the* catalyst in all aspects of international "fertility control."

One of the co-founders was **Frederick Osborne**, then president of the American Eugenics Society. Osborne was the Population Council's first vice president under Rockefeller, and in 1957, succeeded him as president. In the postwar era, eugenics had a bad reputation, and with good cause. Osborne himself had been treasurer of the 1932 Third International Congress of Eugenics which unanimously voted Dr. Ernst Rudin the president of the International Federation of Eugenics Organizations. Rudin was the architect of Hitler's T-4 program and trained the personnel who killed 400,000 mental patients in the first extermination program. If Osborne was not a Nazi, it is hard to imagine who would be.

In no way were Osborne or his wealthy sponsors deterred by the Nazi horrors from pursuing the anti-scientific eugenics ideology under new titles. While setting up Population Council offices, hiring staff, and organizing its demographic and medical programs, Osborne was promoting eugenics in book after book and in speeches before Planned Parenthood conferences. In the preface to his 1951 book, *Eugenics*, Osborne complains that with America's increasing survival rates, "Natural selection by death has almost come to a halt." He wrote:

"The eugenic problem is to find means by which the people with the genetic potential most fit to survive in and contribute to our complicated society will tend to have the largest families, while at the same time those with a poorer genetic potential will have smaller families."

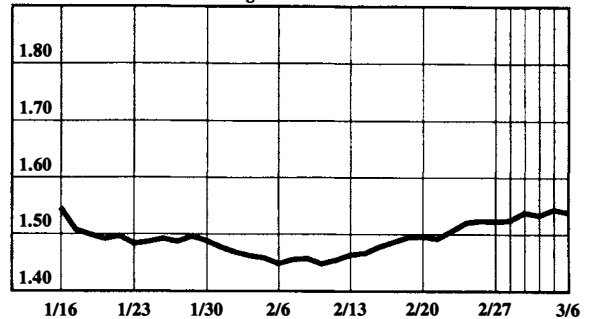
In his book, *Population Control—The Imminent World Crisis*, he reiterated that the "upper level of quality are those men and women listed in *Who's Who* because they achieved something that in our form of society is considered important." The lower levels of quality, he says, are those who are mentally ill, deficient, physically abnormal—and the *poor*, who are bringing about "injurious effects on the quality of the population."

Thus, when the *Philadelphia Inquirer* called for reducing the number of children born into "a dysfunctional family," in its editorial endorsement of Norplant, claiming that poor blacks make up a higher percentage of people who are more or less permanently on welfare, it was merely echoing the Nazi Osborne's complaint of 1962 about "the cost of carrying successive generations of incompetent families on relief rolls." Two years after the Population Council's biomedical research laboratories started research on Norplant in 1966, Osborne was still a board member of the Eugenics Society. Their 1969 meeting focused on . . . *the genetic aspects of race*.

Currency Rates

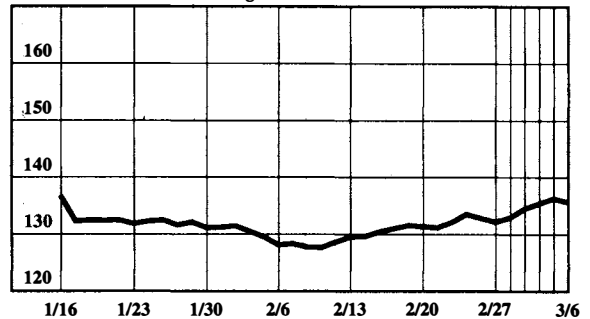
The dollar in deutschemarks

New York late afternoon fixing



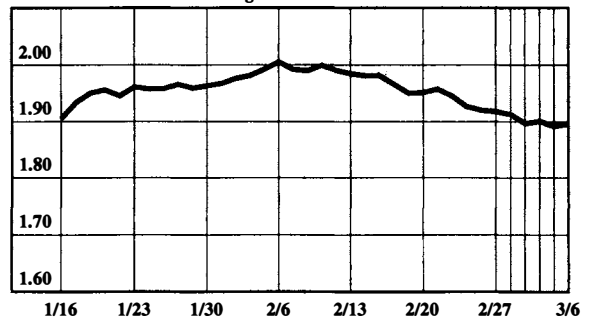
The dollar in yen

New York late afternoon fixing



The British pound in dollars

New York late afternoon fixing



The dollar in Swiss francs

New York late afternoon fixing

