

# The Population Council in the Decolonizing Caribbean

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# I. Introduction

In the post-WWII world, a growing consensus emerged among demographers, philanthropists, activists, and world leaders that populations were increasing too quickly in the “developing world” of Africa, Asia, South America and the Caribbean. Pointing to stable/rising birth rates and declining death rates across a number of countries, commentators warned that population growth would, at best, slow the process of economic development, and at worst, fuel poverty, conflict, and/or a turn to communism. This panic over population growth became the central focus of newly created population think tanks and university courses, while also fuelling a wave of state-run family planning programs supported by an expanding international aid apparatus. By the mid-1960s, the study and control of population had become a billion dollar, transnational endeavour.<sup>1</sup>

These programs fuelled a wealth of research and spread new contraceptive technologies more widely than ever before, but controversy soon erupted. Women in several countries reported being offered a limited range of choices (usually long-lasting methods such as IUDs and Depo-Provera), while others were sterilized by compulsion, in return for cash payments or as a precondition to receiving social benefits. In her 1987 book *Reproductive Rights and Wrongs*, Betsy Hartmann argued that these abuses were a direct result of the logic of population control, which prioritized the reduction of birth rates over women’s

health and wellbeing.<sup>2</sup> More recently, historian Matthew Connelly has mined the archives of international organizations to vividly illustrate the eugenic foundations and ideological limits of postwar population advocacy, critiquing how leading figures “reduced differences in wealth and power to a question of differential fertility,”<sup>3</sup> thereby justifying interventions in the bodies of poor/ “Third World” women to reach demographic targets.<sup>4</sup>

These works provide a powerful critique of the population control discourse; their global sweep also allows us to see how quickly and widely the language and mentalité of the movement traveled to create an international community of like-minded population experts. But to what extent did this shared discourse and the interests of these transnational actors actually shape practice on the ground? Historians exploring twentieth century family planning programs from local sources, for example, have tended to highlight how experiences were intimately shaped by the interventions of local politicians, doctors, nurses, family planning advocates and even, at times, the women targeted by these programs. These actors had their own motivations for getting involved in the field of “population” which sometimes replicated and sometimes departed quite significantly from those they reached out to for funding; in some cases, local work on family planning also preceded international intervention by decades.<sup>5</sup> These studies suggest that understanding the story of twentieth century population control in full will require attention not only to the logic and discourse of the movement, but also to the complex interactions, intersections, and conflicts that shaped programming on the ground.

The records of the Population Council (PC) held at the Rockefeller Archive Center provide us with one lens through which to explore these relationships in more detail. Created by John D. Rockefeller 3rd in 1952, the PC was a fairly direct outcrop of the postwar population panic described above, although it evolved significantly in logic and strategy over time. In its early years, the Council's Demographic Division provided grants for research studies and fellowships on fertility and population growth, while the Biomedical division conducted research on the development, safety, and effectiveness of different contraceptives. By the 1960s, the PC was a key player in the international population establishment, sponsoring demographic research, funding and overseeing studies of new intra-uterine and injectable contraceptives, providing technical aid to government family planning programs, and conducting experiments in health education across Africa, Asia, South America and the Caribbean. In the mid-1970s, the organization shifted gears in response to both internal and external critique, placing increased emphasis on the importance of broader economic and social development (beyond mere fertility decline) and the empowerment of women in comprehensive maternal and child-health based family planning.<sup>6</sup>

Records of the PC are held in two collections at the Rockefeller Archives, "Accession 1" (pre-1967) and "Accession 2" (mostly post 1966), which differ somewhat in organization. Both collections have a variety of sources including internal memorandums and reports, correspondence with other aid/philanthropic organizations (such as the Conservation Foundation, USAID, and the International Planned Parenthood Federation), grant applications and

decisions, reports on research activities, and field notes of PC staff (including some quite extensive daily work diaries documenting the travels of PC consultants abroad). As Beth Baron notes in her study of the PC's work in Egypt, these sources are often incredibly rich in detail on the work of the PC, organizations it partnered with, and local political and social dynamics in the countries visited, allowing us to see aspects of the movement that might be missing in other collections.<sup>7</sup>

While I am interested more generally in the evolution of the PC and in particular the role played by its international fieldworkers and consultants, I've decided to limit the discussion here to the context I currently know best, the Anglophone Caribbean. Upon arriving at the Rockefeller Archive Center, I had just completed a book on the history of reproductive politics and state family planning based on sources located in four islands (Jamaica, Barbados, Trinidad, and Bermuda), as well as colonial archives in the UK and the personal papers of international advocates like Margaret Sanger and Edith How-Martyn.<sup>8</sup> Having already examined these case studies with the use of rich local sources allowed me to see more clearly both the value and potential limitations of approaching the story of international family planning through PC records. Indeed, while the records can provide fresh insight on local political dynamics, vividly illustrate the hurdles and compromises shaping collaborations between foreign and local actors, and allow us to see how linking funds to research outcomes could limit services in practice, there is a real risk that relying on these sources alone (whether due to a lack of local sources or as a methodological approach) could lead scholars to exaggerate

the importance and impact of international organizations. Below, I trace the PC's records relating to the Anglophone Caribbean chronologically, focusing on their early support for a fertility study in 1950s Jamaica before moving on to the organization's contraceptive research studies and health education promotion in Barbados, Jamaica, and Trinidad in the 1960s.

## II. The Politics of Research: The Population Council and Fertility Studies in the 1950s

The PC's involvement in the Anglophone Caribbean appears to have begun in 1955, when R.G. Snider of the New York-based Conservation Foundation (CF) appealed to the organization to support field research on family planning in Jamaica. Three studies launched in 1953 were already nearing completion (a preliminary study on attitudes towards family size by J. Mayone Stycos and Judith Blake, a study by Peter M. Stern on the resource base in Jamaica, and a study by George Roberts on the demographic history of Jamaica), and the CF hoped to move forward with a new project exploring attitudes towards family limitation based on a much larger sample size while also testing different types of educational materials.<sup>9</sup> The proposal arrived at a contentious moment in the island's history. Although Jamaica remained a British colony, labor and nationalist unrest in the 1930s and 1940s had forced the Colonial Office to grant more power to elected members of the local legislature and begin preparations to

federate the region and grant it “Dominion” status within the British Empire. Recognizing the complicated political situation on the island, in his appeal to the PC Snider attached letters from both the colony’s British-appointed governor, Sir Hugh Foot, and the locally elected premier, Norman Manley, indicating their personal support for the project. However, Snider noted that they had failed to obtain a formal government request, based largely on the known opposition to birth control of Manley’s main political opponent, Alexander Bustamante.<sup>10</sup>

The files relating to the CF proposal provide us with a glimpse into the behind-the-scenes negotiations that shaped research projects in these years. Snider documented in detail his meetings with a range of local ministers and stakeholders, many of whom confessed their personal support for the cause and explained that their official silence was due solely to fear of political backlash, vividly illustrating the gap between public and private discourse during these years. One can also see the additional complications created by the evolving political situation in the Caribbean. While Snider did meet with Manley, he worked much more closely with British Governor Sir Hugh Foot, who also took an active role behind the scenes trying to influence local Jamaican politicians. As Snider admitted, Manley was “a little piqued” by this reliance on the Governor, indicating the friction inherent in working within a decolonizing state.<sup>11</sup>

Snider’s reliance on Foot also appears to have bothered some members of the PC. An (unnamed) advisor, for example, initially cautioned against investing in the CF’s proposal in a letter to CF head Fairfield Osborn, on the grounds that:

We feel strongly that effective action programs will have to develop on the initiative of the people or governments of the people in the area concerned. The interest of the people and of their governments can be stimulated by local studies, even if done by outsiders; but particularly they can be stimulated by the studies and writing of well trained local professionals. And in the long run if there is no well trained indigenous personell [sic], an action program is likely to be thrown out as being the work of “foreigners”.<sup>12</sup>

PC Demographic Director Dudley Kirk put it a bit more explicitly, noting to Snider his concern that “interest in the project seemed to come chiefly from outside or white sources. Would there not be a danger that the project would run afoul of colonial and racist sensitivity?”<sup>13</sup> In the end, Snider was able to convince the PC that American staff for the project would be welcomed as “consultants,”<sup>14</sup> with Don Mills, “a dark native Jamaican”<sup>15</sup> providing legitimacy as the official Resident Manager, supported by a “Population Research Foundation of Jamaica” to be created locally with membership “between 60% and 75% Negro.”<sup>16</sup> Although the PC retreated from full support for the study, they did provide a grant of \$10,000 (with the remainder ultimately being made up by funds from the British Colonial Office and the UK-based Nuffield Foundation).

The speed at which the appointment of a few nominal local leaders assuaged fears suggests the PC’s commitment to working on requests from local groups was, at least for some members in these years, based more on political considerations rather than a genuine belief in the importance of local initiative. Viewing these

local actors solely through the lens of CF and PC officials, however, also risks giving us a skewed understanding of their participation. Indeed, if the members of the Population Research Foundation of Jamaica appeared to be no more than token figures from the perspective of the CF and PC – chosen primarily on the basis of their skin color rather than expertise – in fact a number of actors on the committee (like Dr. Lenworth Jacobs and Dr. Roy Levy) were fervent local birth control activists who had played a pioneering role in opening private clinics and spent the 1950s publishing articles, giving speeches, and visiting Jamaican politicians on a constant basis to push for a change in policy. Even Premier Norman Manley himself had been an outspoken advocate of birth control in the 1930s, before his party decided to distance themselves from the issue.<sup>17</sup> It was thus somewhat surprising to me to see how readily PC directors attributed an increasingly favourable climate towards family planning in Jamaica to the individual work of Snider, particularly his ability to “hand-educate” local politicians (like Manley) about the importance of the population problem.<sup>18</sup> It also reminded me of the danger of taking organizations’ own assessment of their work too seriously; as local sources make clear, Manley hardly needed educating on this issue and the shifting politics of family planning in the mid-1950s was driven as much – if not more so – by the hard work of local activists.

If the PC records left out a great deal of the story, however, they did provide several nuggets of information that I had not come across in my local research. For example, Snider discussed a certain Jamaican businessman’s interest in the development of Animopterin, a drug being developed in the United States at the

time that caused abortion in the first or second month of pregnancy.<sup>19</sup> Although Snider noted this in passing, it could be interesting to follow up on this inquiry (since the personality in question was not a known birth control advocate, he had completely escaped my purview). The PC's exploratory reports on new areas of potential research also provide us with some sense of the contraceptive landscape in different areas. A 1956 inquiry into birth control methods sold in different pharmacies in Barbados, for examples, produced stock supplies of "Ramses" diaphragms, Ortho-Gynol A and B, Preceptin A and B, and tubes of Volpar Paste, figures which I had not seen in local records of the Barbados Family Planning Association.<sup>20</sup> In addition, the PC records occasionally include locally produced documentation sent to the organization by local family planning associations, such as a 1960 report tracing a Jamaican fieldworker's encounter with over a dozen villages.<sup>21</sup> These sources do not always survive in local archives, and can provide us a small but fascinating glimpse into the work of family planning on the ground.

### III. The Ethics of Research: Targets and Incentives in the 1960s

In the 1960s, PC work in the Caribbean – in keeping with general organizational shifts – seems to have focused primarily on research into the effectiveness and safety of Intra-Uterine Contraceptive Devices (IUCDs). The PC provided funding

to local hospitals, family planning associations, and health ministries to conduct research studies on the Lippes Loop while also providing stocks of the product for free. In both Barbados and Trinidad, the IUCD studies were accompanied by pap smears testing for cancer. In the case of Trinidad, this appears to have been at the insistence of local Dr. Harnarayan of the Family Planning Association of Trinidad and Tobago (FPATT), in part because he hoped to establish a cytological screening center in Trinidad (which did not have one at the time) and in part because “he felt that intra-uterine foreign bodies may well be associated with, or precipitate, uterine cancer and was unwilling that they should be placed in the Trinidad population without careful cytological control.”<sup>22</sup> In Barbados, where cancer deaths were estimated to be about twice the rate in the United States, the project appears to have been initiated by the Population Council, which came to the island to conduct an experimental study on the role of the IUCD and the incidence of cervical dysplasia. The “uterine cancer eradication campaign” and IUCD program in Barbados also incorporated a comparative study of insertions by nurse-midwives versus doctors. The study found no significant statistical difference in pregnancy, expulsion, removal or infection rates between the two types of practitioners, and noted that “[a]lmost no patients objected to being treated by a nurse-midwife, perhaps because they were accustomed to having their babies delivered by nurse-midwives.”<sup>23</sup>

I found the linking of the IUCD program to cytological screening very interesting, in that it seems to suggest the organization was already thinking more comprehensively about women’s health in the mid-1960s; the recognition of the

important role of local nurse-midwives in health care also seemed somewhat surprising considering the general tendency in the mid-1960s to stress the importance of highly trained doctors. However, tying the provision of contraceptive supplies and ontological screening services to research projects could prove problematic when local actors were unable to gather enough participants to make the study scientifically valid. By April of 1967, for example, it was evident to PC staff that Barbados would not meet its original plan of getting 10,000 IUD wearers over a three year period for the joint Lippes Loop/cytological study; indeed, even the reported 4000 new users obtained in the first two years appeared to be an overestimate, with the real figure sitting closer to 2500-2600.<sup>24</sup> According to PC consultants, this was due primarily to the refusal of the local Barbados Family Planning Association (BFPA), main hospital, and private doctors to “emphasize the use of IUDs” above other methods, and their willingness to remove loops “for any and all complaints.”<sup>25</sup> Despite recognition that the clinic was run by well-trained and highly competition professionals who were providing “good examinations and treatment,”<sup>26</sup> the PC decided in June of 1967 to abandon the project within a year and move somewhere else where they could more easily get the 15,000 IUCD users required for the study to serve “some worthy purpose.”<sup>27</sup> A 1969 proposal for a Jamaican study of possible links between cancer and the oral pill and a 1971 proposal to launch an integrated maternal and child health program in Jamaica were also abandoned when PC staff realized they would not be able to gather enough participants, despite the obvious enthusiasm of local Jamaican doctors for both initiatives.<sup>28</sup>

The desire for a certain number of participants in these projects does not seem to have been driven solely (or perhaps even primarily) by a desire to reach certain demographic targets; the primary concern seemed rather to be about medical/scientific value, above or beyond a narrow population control logic. Still, it seems somewhat problematic to measure the “worth” of a project based solely on its scientific merit (rather than its value to women) and cut funding for otherwise beneficial services when they fail to meet that criteria, especially in countries which lacked significant local resources to continue projects on their own. Some locally-based consultants do appear to have been sensitive to the issue. Frank Shubeck, the PC’s representative to Barbados for many years, for example, pushed to have the organization continue to support the pap smear program, arguing that: ““It would be inappropriate to establish such a beneficial service without leaving a means for its perpetuation. Since we originally agreed to a 3-year program, leaving behind 2 adequately-trained cytologists paid through June, 1968, is the least we can do.”<sup>29</sup> Although it is unclear from these records whether the PC followed through on this proposal – or exactly what happened after they pulled out – these experiences draw our attention to the sometimes fickle nature of international aid, particularly when tied to specific research projects.

Although I have not yet looked in depth at the PC’s IUCD research program, some of the sources I encountered in the Caribbean files also suggest the studies may have been compromised by their desired outcomes: namely, to prove that IUCDs *were safe*. Indeed, in a letter to Jamaican doctor Herbert W. Eldemire in

1964, Frank W. Notestein noted that the Medical Advisory Committee's primary goal for the studies was to counter practitioners' reservations about the method, particularly in the wake of an impending assessment by the US Food and Drug Administration. Although recognizing that IUCDs *might* exacerbate latent cases of pelvic inflammatory disease, Notestein appears largely dismissive of concerns over side effects, attributing complaints instead to the obstinance of doctors and patients.<sup>30</sup> This was true of many local actors as well; one Jamaican doctor, for example, put forward a proposal in 1969 to study the relationship between the pill and the incidence of cervical cancer with the explicit purpose of combatting "the rumors concerning the pill which are beginning to cause a rather large number of drop-outs."<sup>31</sup> This made me wonder how researchers desire for positive findings might have shaped the collection and publication of research data; how, for example, would they have dealt with findings that showed a significant amount of side effects?

The Caribbean records also provide us with a very small glimpse into the promotion of incentives in state family planning programs, a practice often criticized for exploiting the vulnerability of poor populations who might agree to an IUD insertion or sterilization procedure solely to obtain financial rewards or state benefits. PC consultants were quite insistent on the importance of incentives in advising Barbados on an "Information and Education" campaign launched in 1967, arguing that "without incentives this program will fail, and there will be no significant and dramatic rise in the level of loop acceptors."<sup>32</sup> However, the "incentives" they advocated were promotional give-away items like

buttons, car stickers, shopping bags, balloons, and match box-lipstick for anyone who visited the clinic, rather than significant financial resources that could have swayed an otherwise unwilling patient to accept a method.<sup>33</sup> In other cases, cash vouchers appear to be focused more on addressing very real structural barriers rather than persuading the unconverted. For example, the program in Jamaica noted that many women who wanted sterilizations or IUDs did not have the financial resources to get to Grade I or II health centers on their own, such that “by the time the woman has accumulated sufficient money to get to the nearest clinic, she has already become pregnant.”<sup>34</sup> These experiences perhaps remind of us of the need to distinguish between using financial rewards to push someone to accept a method, versus providing token giveaways to increase publicity for a program or support for those who could not otherwise obtain the methods they desired, rather than seeing the use of “incentives” as a uniform – and uniformly coercive – process.

Looking at the PC records pertaining to specific countries thus provides us with the opportunity to see the diversity of forms population advocacy could take in practice, while also exposing some of the tensions created by research programs that operated in colonial contexts and/or prioritized scientific validity over other concerns. The records can also provide us with glimpses of local political and social dynamics not contained in other collections and/or clues to follow up with local research. We must, however, always be mindful of the limits of these sources, which provide only a partial view of what was happening in the region based on the occasional interactions of consultants. While their observations

certainly provide us with insight and clues for further research, they may miss much more than they see.

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<sup>1</sup> See Matthew Connelly, *Fatal Misconception: The Struggle to Control World Population* (Cambridge, Massachusetts: The Belknap Press of Harvard University Press, 2008), also John Sharpless, "Population Science, Private Foundations, and Development Aid: The Transformation of Demographic Knowledge in the United States, 1945-1965," in Frederick Cooper and Randall Packard, eds., *International Development and the Social Sciences* (Berkeley: University of California Press, 1997), 176-200.

<sup>2</sup> Betsy Hartmann, *Reproductive Rights and Wrongs: The Global Politics of Population Control*. Boston: South End Press ((1995 [1987])).

<sup>3</sup> Connelly, *Fatal Misconception*, x.

<sup>4</sup> Connelly, *Fatal Misconception*, 378.

<sup>5</sup> See for example Sanjam Ahluwalia, *Reproductive Restraints: Birth Control in India, 1877-1947*, (Urbana and Chicago, University of Illinois Press, 2008), Beth Baron, "The Origins of Family Planning: Aziza Hussein, American Experts, and the Egyptian State," *Journal of Middle East Women's Studies*, Vol. 4 No. 3 (Fall 2008): 31-57, Laura Briggs, *Reproducing Empire: Race, Sex, Science and U.S. Imperialism in Puerto Rico* (Berkeley: University of California Press, 2002), Susanne M. Klausen, *Race, Maternity, and the Politics of Birth Control in South Africa, 1910-39* (Basingstoke, Hampshire and New York: Palgrave Macmillan, 2004), Iris Lopez, *Matters of Choice: Puerto Rican Women's Struggle for Reproductive Freedom* (New Brunswick: Rutgers University Press, 2008), Johanna Schoen, *Choice & Coercion: Birth Control, Sterilization, and Abortion in Public Health and Welfare* (Chapel Hill and London: The University of North Carolina Press, 2005).

<sup>6</sup> See Connelly, *Fatal Misconception*, "Population Council Records: Biographical/Historical Note," <http://dimes.rockarch.org/FA210/biohist> and "Population Council Timeline": <http://www.popcouncil.org/about/timeline>.

<sup>7</sup> Baron, "The Origins of Family Planning," 34-35.

<sup>8</sup> Nicole C. Bourbonnais, *Birth Control in the Decolonizing Caribbean: Reproductive Politics and Practices on Four Islands, 1930-1970* (Cambridge University Press, 2016).

<sup>9</sup> R.G. Snider to Fairfield Osborn, "Preliminary Memorandum – R.G.S. Jamaica trip, 11-16 August," Conservation Foundation Memorandum, 19 August 1955. "British West Indies - Jamaica Family Life Study, 1955-1957," Folder 70, Box 6, S1, RG1, Acc 1, Population Council, Rockefeller Archive Center, Sleepy Hollow, NY.

<sup>10</sup> Ibid, 5.

<sup>11</sup> Ibid, 8.

<sup>12</sup> [Unknown] to "Fair," Letter, 31 August 1955. ("British West Indies - Jamaica Family Life Study, 1955-1957," Folder 70, Box 6, S1, RG1, Acc 1, Population Council, Rockefeller Archive Center).

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- <sup>13</sup> DK to FO and Files, "Memo: Proposed field research project on voluntary family limitation in Jamaica – conversation with RG Snider, 9/15/55", 19 September 1955, p1. ("British West Indies - Jamaica Family Life Study, 1955-1957," Folder 70, Box 6, S1, RG1, Acc 1, Population Council, Rockefeller Archive Center).
- <sup>14</sup> DK to FO, "Memo: Bob Snider's proposal re. Jamaica study," 28 October 1955. ("British West Indies - Jamaica Family Life Study, 1955-1957," Folder 70, Box 6, S1, RG1, Acc 1, Population Council, Rockefeller Archive Center).
- <sup>15</sup> Robert G. Snider to Dr. Dudley Kirk (CF), Letter, 12 January 1955. ("British West Indies - Jamaica Family Life Study, 1955-1957," Folder 70, Box 6, S1, RG1, Acc 1, Population Council, Rockefeller Archive Center).
- <sup>16</sup> Robert G. Snider to General Frederick H. Osborn, Letter, 24 April 1956 ("British West Indies - Jamaica Family Life Study, 1955-1957," Folder 70, Box 6, S1, RG1, Acc 1, Population Council, Rockefeller Archive Center).
- <sup>17</sup> See Bourbonnais, *Birth Control in the Decolonizing Caribbean*.
- <sup>18</sup> FO to VHW and file, "Memo: Talk with Bob Snider October 14<sup>th</sup>," 15 October 1957. ("British West Indies - Jamaica Family Life Study, 1955-1957," Folder 70, Box 6, S1, RG1, Acc 1, Population Council, Rockefeller Archive Center).
- <sup>19</sup> R.G. Snider to Fairfield Osborn, "Preliminary Memorandum – R.G.S. Jamaica trip, 11-16 August," Conservation Foundation Memorandum, 19 August 1955. "British West Indies - Jamaica Family Life Study, 1955-1957," Folder 70, Box 6, S1, RG1, Acc 1, Population Council, Rockefeller Archive Center.
- <sup>20</sup> "1959 General Correspondence, Barbados," Folder 1448, Box 77, S3, Acces 1, RG 1, Population Council, Rockefeller Archive Center
- <sup>21</sup> "Report on Short Trips Taken by the Family Planning Unit During the Month of August, 1960," "West Indies: Kirk, Dudly (Dr.) Travel," Folder 1851, Box 195, S2, Acc2, RG2, Population Council, Rockefeller Archive Center.
- <sup>22</sup> Dr. Ralph Richart, "Report on Cytological Consultation with the Family Planning Association, Trinidad, West Indies," p1. ("F.P.A. of Trinidad & Tobago, IUCD Studies," Folder 933, Box 58, S2, Acc1, RG 1, Population Council, Rockefeller Archive Center).
- <sup>23</sup> Henry W. Vaillant, G.T. Cummins and Ralph M. Richart, "The Use of Nurse-Midwives to Insert the Lippes Loop in Barbados, BWI," 3 November 1966, p3. ("Barbados: Correspondence, Reports, Studies," Folder 394, Box 45, S2, Acce2, RG2 Population Council, Rockefeller Archive Center).
- <sup>24</sup> HLL to Files, "Trip to Barbados, April 13, 14, 15 = suggested "A HAPPENING"," 25 April 1967, p1. ("Barbados: Correspondence, Reports, Studies," Folder 395, Box 45, S2, Acce2, RG2 Population Council, Rockefeller Archive Center).
- <sup>25</sup> HLL to Files, "Trip to Barbados, April 13, 14, 15 = suggested "A HAPPENING"," 25 April 1967, p1. See also SJS to Barbados Grant File, "Office Memorandum: Barbados Meeting, June 1, 1967," 1 June 1967, p1. ("Barbados: Correspondence, Reports, Studies," Folder 395, Box 45, S2, Acce2, RG2 Population Council, Rockefeller Archive Center). These assertions are also found in Bernard Berelson to The Files, "Trip to Barbados, March 26-29," 4 April 1967. "Barbados: Population Council Research Project," Folder 400, Box 45, S2, Acce2, RG2 Population Council, Rockefeller Archive Center.
- <sup>26</sup> RKA Diary, 15 February 1966, p4. "Barbados: Correspondence, Reports, Studies," Folder 395, Box 45, S2, Acce2, RG2 Population Council, Rockefeller Archive Center
- <sup>27</sup> Bernard Berelson to The Files, "Trip to Barbados, March 26-29," 4 April 1967. ("Barbados: Population Council Research Project," Folder 400, Box 45, S2, Acce2, RG2 Population Council, Rockefeller Archive Center). See also: SJS to Barbados Grant File, "Office Memorandum: Barbados Meeting, June 1, 1967," 1 June 1967, p1. ("Barbados:

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Correspondence, Reports, Studies," Folder 395, Box 45, S2, Acc2, RG2 Population Council, Rockefeller Archive Center).

<sup>28</sup> Howard C. Taylor to Dr. A.W. Patterson, Letter, 3 January 1973. ("Jamaica", Box S117, S4, Acc2, RG 2, Population Council, Rockefeller Archive Center). FS to CAP, "Memorandum: Kingston Cytology Program," 23 July 1969. ("Jamaica: U.S. Agency for International Development," Folder 937, Box 98, S2, Acc2, RG2, Population Council, Rockefeller Archive Center).

<sup>29</sup> Frank Shubeck to Dr. Sheldon J. Segal, 16 May 1967, p3. ("Barbados: Correspondence, Reports, Studies," Folder 395, Box 45, S2, Acc2, RG2 Population Council, Rockefeller Archive Center).

<sup>30</sup> Frank W. Notestein to Dr. Herbert W. Eldemire, Letter, 3 March 1964. ("Jamaica: Correspondence, Reports, Studies," Folder 928, Box 98, S2, Acc2, RG2, Population Council, Rockefeller Archive Center).

<sup>31</sup> Nancy Dammann to Dr. Clifford A. Pease, Letter, 8 July 1969. ("Jamaica: U.S. Agency for International Development," Folder 937, Box 98, S2, Acc2, RG2, Population Council, Rockefeller Archive Center).

<sup>32</sup> HLL to Files, "Trip to Barbados, April 13, 14, 15 = suggested "A HAPPENING"," 25 April 1967, p8. ("Barbados: Correspondence, Reports, Studies," Folder 395, Box 45, S2, Acc2, RG2 Population Council, Rockefeller Archive Center).

<sup>33</sup> HLL to Files, "Trip to Barbados, April 13, 14, 15 = suggested "A HAPPENING"," 25 April 1967, p6. ("Barbados: Correspondence, Reports, Studies," Folder 395, Box 45, S2, Acc2, RG2 Population Council, Rockefeller Archive Center).

<sup>34</sup> "Family Planning in Jamaica," [n.d.], p7. ("Jamaica: Ministry of Health," Folder 932, Box 98, S2, Acc2, RG2, Population Council, Rockefeller Archive Center).