

# “Right-to-Life” Scores New Victory at AID

*Agency rules bent to accommodate natural family planning groups that oppose “artificial” birth control*

M. Peter McPherson, administrator of the Agency for International Development (AID), has precipitated a new burst of outrage from the family planning community by his decision to make an exception to the agency's “informed choice” policy in order to permit grants to natural family planning groups that oppose all methods of birth control other than periodic abstinence.

The decision was made following several years of heavy pressure from right-to-life groups. The main organization responsible for the pressure is a natural family planning group, the Family of the Americas Foundation, Inc. (FAF), headquartered in the home district of Representative Bob Livingston (R-La.) who sits on the foreign operations subcommittee of the House Appropriations Committee. The foundation is affiliated with the World Organization of the Ovulation Method Billings (WOOMB), which has small programs in 100 countries. Its Guatemalan-born director, Mercedes Wilson, is prominent in the right-to-life movement and is regarded as an extremist even by some other proponents of natural family planning because of her single-minded advocacy of the Billings method, which involves monitoring of ovulation through changes in cervical mucus.

FAF has been trying to get its foot in the door at AID for some time. Last year it was finally given a \$1.1-million grant for teacher training and production of a film. In July it was allocated an additional \$900,000. But until now, it has been ineligible to receive funds for service programs because of its refusal to subscribe to long-standing AID policy requiring that family planning programs provide information on all methods of contraception and referral, if requested, to other programs.

Wilson has lately been campaigning for a change in the referral policy in order to compete for a new \$15 million, 5-year grant covering the gamut of research, training, and services in natural family planning. On 9 July, AID sent out an amendment to the solicitation which stipulated that “organizations receiving support from the Agency which provide only natural family planning services are not required to provide information on or

referral for other methods of family planning.”

McPherson has been heavily criticized for his actions—about which the Vatican received notification before the relevant congressional committees were told. The foreign operations subcommittee of the House Appropriations Committee has put a hold on the \$900,000 award in protest of the policy change.

McPherson, meanwhile, has defended the change as a “sound management decision” which was necessary to promote “greater competition” and “broaden the pool of available contractors.” However, critics, including other AID officials, maintain that there are plenty of natural family planning organizations willing to abide by the old policy. Not only does the new one contradict AID's stand against supporting “single method” family planning (originally designed

---

**Natural family planning is highly controversial for both ideological and practical reasons.**

---

to prevent coerced sterilizations), it also is at odds with domestic family planning policy, runs counter to the declaration put out by the United Nations population conference in Mexico City last year, and violates medical ethics. (The American College of Obstetrics and Gynecology requires that a client be informed of all “medically approved” options.)

As recently as 1983 AID was standing fast to its policy. A memorandum from its research division characterized the proposals submitted by Wilson and John Billings (the Australian physician who developed the ovulation method) as “one-sided and technically inaccurate” and said they reflected an attitude that is “in direct opposition to U.S. Government policy concerning volunteerism and informed choice.” It concluded that support for Wilson “could very well damage the good name and reputation of AID in the field of population and have a negative impact on other forms of family planning. . . .”

But the political pressure subsequent-

ly heated up considerably. Last March, then-White House assistant Faith Ryan Whittlesly wrote McPherson to protest the referral policy on behalf of the Catholic League for Religious and Civil Rights, warning that “it would be unfortunate if any conflict developed between the Administration's pro-life policies and its population assistance policies.” Last June, 14 natural family planning organizations sent McPherson a telegram protesting the policy. Meanwhile Wilson, who has had the strong support of right-to-life members of Congress including Livingston and Representative Henry J. Hyde (R-Ill.), was engaged in vigorous lobbying activities, including a meeting with Vice President George Bush. McPherson reportedly made his decision after receiving expressions of concern both from Bush and from Secretary of State George Shultz. (Wilson could not be reached for comment.)

Natural family planning is highly controversial for both ideological and practical reasons. Long ignored in both domestic and international family planning programs, the methods are getting stepped-up attention by AID thanks to language added to foreign aid legislation in 1981 by Senator Jesse Helms (R-N.C.) and Representative Hyde. The budget for these activities has shot up from \$400,000 in 1980 to over \$7 million in fiscal year 1985. AID's Office of Population is currently awarding \$20 million in grants over the next 5 years for natural family planning projects.

Natural family planning encompasses a variety of methods including the calendar or rhythm method, the basal body temperature method, the cervical mucus method, and the “sympto-thermal” (combination) approach. It is favored not only by religious fundamentalists but by people who feel strongly about breast-feeding and natural childbirth. Claude Lancot, head of the International Federation for Family Life Promotion, says: “The absolute medicalization of family planning is what bothers us.” Lancot (who endorses the “informed choice” policy) and others contend that natural family planning deserves to be on an equal footing with other family planning methods and can make a significant contribution. In Mauritius, which has the oldest

program (20 years) around, he says 15 to 20 percent of families who use birth control prefer natural methods. It has gained a foothold in a few other places such as the Philippines, Peru, Sri Lanka, and the Seychelles. Lanctot says there are reports from Zambia that among rural women it "is improving and changing their relationships with their men."

But in most of the family planning community, natural family planning is regarded as ineffective, unpopular, and expensive. Joseph Speidel of the Population Crisis Committee says the dropout rate from programs is about 50 percent,

and the pregnancy rate for users is about 20 percent. The method requires 8 to 15 days of sexual abstinence a month. Programs take years to become established, and strenuous educational efforts are required because very few people in the developing world are aware of the fertility cycle. Natural methods are practiced by only 2 to 4 percent of contraceptors in the Third World, and by 5 percent in the United States. It is only used by 0.7 percent of those benefiting from federal family planning programs. The per capita cost in these programs is \$473 (largely because of training expenses), compared

with \$31 for other contraceptive users.

The fuss over the policy change is unlikely to aid the cause of family planning efforts in general, which have become increasingly entangled in politics. McPherson has been well regarded by population experts, who believe he is committed to the spread of family planning and doing the best he can in the environment provided by the Administration, which has made curbing abortion the cornerstone of its population policy. However, family planning people have become increasingly dismayed by his willingness to accommodate to pressures

## Contraception Research Lagging

While research on natural family planning is finally getting some long-awaited attention, contraception research worldwide has been stagnant for the past 15 years. The U.S. investment has actually declined in real dollars because of a sharp drop in research by pharmaceutical companies.

The Population Crisis Committee reports that global expenditures—over half of which are made by the U.S. government—totalled about \$175 million in 1984. Most of this was on basic research in reproductive biology. The total devoted to applied research on contraception is estimated at about \$40 million. According to the World Bank, the field could readily absorb a doubling of this amount over the next few years.

Prior to 1970, American pharmaceutical companies led the field in contraceptive research and development, with expenditures of between \$15 million and \$20 million in 1970, according to Carl Djerassi of Stanford University, who formerly also held two positions as director of research at Syntex Corp. But investment has plummeted by about 90 percent. Upjohn and G. D. Searle have recently closed down their fertility research operations (Upjohn had to relocate 28 scientists), and only a few firms remain in the field, according to Djerassi.

Companies have been backing out because of inhibitory federal regulatory policies and the skyrocketing costs of liability insurance. Upjohn has been trying to get Food and Drug Administration approval for Depo-Provera, its 3-month injectable contraceptive, for the past 18 years. Although Depo-Provera is used in 80 countries and has been endorsed by the World Health Organization, an FDA panel last year concluded that the safety evidence was not compelling (*Science*, 23 November 1984, p. 950). The FDA will be reconsidering the matter soon, but there is little reason to expect a favorable decision.

Product liability fears are even more compelling. Court awards for alleged damage from contraceptives are extremely high, in part because they are used by a "healthy" population, says Djerassi, and any negative outcomes are blamed on the drug. The industry as a whole has been shaken by the experience of A. H. Robins, which has spent some \$380 million in litigation over the ill-fated Dalkon shield and which recently filed for bankruptcy. Gabriel Bialy, chief of the contraceptive development branch at

NIH's Center for Population Research, relates that development efforts on Capronor, a new biodegradable contraceptive implant, has been halted because researchers were unable to obtain product liability insurance. Because liability expenses are way out of proportion to the share of the market, no company is coming out with a generic oral contraceptive even though patents are expiring on almost all of them.

There have been no dramatic breakthroughs in family planning practices since birth control pills and intrauterine devices were introduced 25 years ago. Sterilization remains the primary mode of birth control in the developing world, followed by abortions, which are performed at the rate of over 40 million annually.

The hottest development for the near term is Norplant, an implant developed by the Population Council which provides contraception for up to 5 years. Used in Finland (where it is manufactured) and Sweden, it has been studied for the past 3 years in clinical trials in this country, and FDA approval is to be sought before the end of the year. If approval is gained as expected, says Wayne Barden of the Population Council, this will be "the first totally new method since IUD's were introduced."

A variety of long-term avenues of research, including new male contraceptives, an antipregnancy vaccine, and reversible sterilization are being pursued. Since it may take two decades between the development and widespread use of a new method, the likelihood of a major breakthrough before the end of the century is virtually nonexistent. Some of the more promising technologies are postcoital drugs and menstrual inducers, but no Agency for International Development funds can go to research on any alleged or suspected abortifacient agents.

There are some signs, however, of a revival of interest in contraceptive development. The National Institute of Child Health and Human Development, which houses the Center for Population Research, has proposed a 4-year "special initiative on contraceptive development" which would quadruple current expenditures—to some \$29 million—by 1989. And the World Bank, the World Health Organization, and other international bodies are now seeking to form a global consortium to advance cooperation and stimulate funding in fertility and contraception research.

—CONSTANCE HOLDEN

from the far right. "He is giving the program away piece by piece," says Sharon Camp of the crisis committee.

Last year AID, without waiting for congressional prompting, withheld \$12 million from the International Planned Parenthood Federation when it refused to withdraw support from clients that offer abortion services. This year, AID withheld \$10 million of its \$46 million donation to the United Nations Fund for Population Activities (UNFPA). This was done in response to coercive birth control practices in China, even though UN money in China is only applied to

demographic work and not family planning services. An amendment to the foreign aid bill, introduced by Representative Jack Kemp (R-N.Y.), would allow the fiscal year 1986 donation to UNFPA to be eliminated if the President officially determines that China operates "a program of coerced abortion or involuntary sterilization."

The immediate future does not look bright for AID's population program, which is likely to see a budget reduction of \$30 to \$40 million (from \$290 million) in fiscal year 1986. Family planning is likely to get even further sucked into the

political maelstrom as the next presidential election heats up, with Kemp and Bush, now seen as the main Republican contenders, battling for the right-to-life vote (ironic in view of Bush's sponsorship, in 1966, of the original legislation for international population aid). The matter of China will make for additional conflict if the United States withholds funds from the UN while trying to smooth the way for a new nuclear exchange agreement (*Science*, 23 August, p. 737). As a House committee staff member put it, "the overall family planning policy is a mess."—**CONSTANCE HOLDEN**

## Weapons Labs Influence Test Ban Debate

*Professional pride and scientific challenge both play a role in the labs' determination to continue testing weapons*

*Livermore, California.* Situated on the first floor of a large building at the weapons laboratory here, past the barbed wire and the armed guards, is perhaps the world's most sparsely attended yet interesting museum. Arranged in artful displays throughout a series of alcoves are scale models of dozens of nuclear bombs, all designed by Livermore's scientists. Many of them are light enough to pick up, and some can be disassembled to display their inner workings.

Aside from the security precautions, the museum is no different from similar galleries at major corporations throughout the country. The purpose is both to display variations of the firm's principal product and to demonstrate the technical prowess of its employees. Visitors to the museum, chiefly a small group of senior defense officials, typically depart with a sharp appreciation of the fundamental and continuing changes in weapons design, as well as a keen awareness of the laboratory's pride in its own work.

These two factors—the unceasing interest in weapons modifications and the enormous professional enthusiasm of those involved—each play a major role in the stout resistance of the nuclear weapons laboratories to a comprehensive ban on nuclear testing, commonly known as a CTB. For if such a ban were agreed upon with the Soviet Union, life at the laboratories would be drastically changed, and the evolution of modern weapons would probably come to a halt.

In the past, the opposition of the weapons labs has been widely known but rarely openly stated. One reason was

that, officially at least, Presidents Kennedy, Nixon, Ford, and Carter considered the CTB a major foreign policy goal. Under the Reagan Administration, however, the laboratory scientists feel that their views have achieved sufficient stature in Washington for them to be frank.

"A comprehensive test ban is the wrong way to go," says Paul Robinson, the principal associate director for national security programs at Los Alamos National Laboratory. "In fact, testing is not even a proper subject for arms control limitations. It serves as a distraction from the more important business of sharply reducing the number of nuclear weapons." Similarly, George Miller, the deputy associate director for nuclear de-

sign at Livermore, says that "the case for and the value of a CTB, in a political sense, should be overwhelming before entering into it. For us, the situation is exactly the opposite. In terms of maintaining stability, engaging in real arms control, and moving toward a more peaceful world, continued nuclear testing plays a very positive role."

The Reagan Administration's sympathy for this view was demonstrated by its refusal several weeks ago to join a nuclear test moratorium begun by the Soviet Union. Instead, it suggested that Soviet scientists take direct yield measurements at the U.S. test site, thereby enhancing the verification provisions of an existing treaty that limits explosions to 150 kilotons (*Science*, 16 August, p. 631). Al-

*A nuclear bomb is lowered into a hole at the Nevada Test Site. The cables relay detailed information that is then used to modify and improve bomb designs.*

