Population and Reproductive Health
Oral History Project

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J. Joseph Speidel

Interviewed by
Rebecca Sharpless

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Narrator

http://reprohealth.ucsf.edu/fs/bios/speidel-jjoseph.html

Interviewer

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Restrictions

None

Format

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Transcript

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Audio Recording


Transcript

Today is October 10, in the year 2002. My name is Rebecca Sharpless and this is the first oral history interview with Dr. J. Joseph Speidel. The interview is taking place in the office of the William and Flora Hewlett Foundation, 2121 Sand Hill Road, in Menlo Park, California. These interviews are being sponsored by the Hewlett Foundation and I’m with the Baylor University Institute for Oral History. Okay, Dr. Speidel, thanks for seeing me this afternoon. We are here in the foundation’s amazing new building. It’s beautiful.

We’re on leased land that Stanford is leasing to us for, I think it’s at least fifty years. Stanford was very clever in that they—when Leland Stanford left—created the university, he left a provision that they couldn’t sell property. And this used to be his farm, that’s why they call Stanford the Farm. It’s a huge area—I can’t tell you how many acres. And I am sure that it would have been enormously tempting to sell off bits and pieces over the years as all universities always are seeking money. But I am sure they are doing better by using it for purposes like ours. And by the way, if we ever decided to abandon this building, they would be able to claim it as their own. So—
Sharpless: That’s a good deal.

Speidel: I think it cost us maybe twenty million dollars to build, which, actually, is rather inexpensive for a building that has enough room for over a hundred offices.

Sharpless: And ecologically friendly and aesthetically attractive.

Speidel: We just got a gold award for—by a group that does objective assessments of how green your building is. And if it’s green enough, they give you a different color. They give you gold—platinum is the top and very few buildings ever get that. But anyway, I know you want to hear about me rather than the building.

Sharpless: Well, that’s okay. I am enjoying the building. Let’s start at the beginning. Tell me a little bit about your family and your growing-up years.

Speidel: Okay. Well, I’m a middle child for whatever that means with an older brother and a younger sister and my parents were academics, I guess. My mom’s—they’re both dead, but my mom had a Ph.D. in biochemistry, which was rather unusual for somebody born in 1908. And my father was a professor of orthodontia, and—

Sharpless: Where?

Speidel: Well, we’ll get to where we moved in a minute. (laughter) But he was also unusual in that he was always doing research and teaching, rather than in practice, and that was rather rare also. But I was born in Iowa City, Iowa, and moved successively to Indianapolis, Indiana, about—a little before first grade. And then down to New Orleans, Louisiana, for second through fifth grade. And my father became dean of the dental school at Loyola University...
down there—during that period—at a very young age, by the way. I would have to figure it out. But, that was—I guess he was in his early thirties. And then moved to Minneapolis, Minnesota, where I did junior high and high school, and then headed east to one of the eastern Ivies—went off to Harvard, where I did undergraduate and medical school and school of public health, all three. I was—I started off as a chemistry and physics science major but at somewhere along the way decided that the complexities of advanced mathematics were not really where I was the strongest, and I’d taken a course from Carroll Williams on physiology and a course from E. O. Wilson, who’s one of the giants in the biology field—somebody who has three or four Pulitzer Prizes and is a very profound thinker. And that made me think that maybe the biological sciences were a good place to go. And so I switched over to medicine and was lucky enough to get into Harvard Medical School, which is probably the—well, the hardest thing I have ever done, (laughs) because it is rather selective. But, E. O. Wilson, I think, was something of an inspiration and I felt that I could go into research or even administration or into clinical care of some sort. So, there were a lot of options. I spent a lot of time putting off decisions about final careers.

**Sharpless** What did your mother do with her Ph.D.?

**Speidel** Well, she worked until the first child came along, and then when my father died when I was a junior in college, she went back to work amidst much grumbling about how far she was behind in the field. But she was one of these people who everything came easy to, not like me. I was probably much more a drone who would stick with it. But she was somebody who
found things easy and probably didn’t understand how hard it was for some other people in life. But—

**Sharpless**

How did your family make—you and or your family make a decision for you to head to Harvard for your undergrad?

**Speidel**

I guess my mother thought I should try it, you know, apply. And I found like—my high school years were rather boring because it was a one-size-fits-all high school. And, so if you were a little brighter you were bored; if you were a little less bright you were frustrated. There was very little individualization. This was in the pre-Sputnik era before everybody got worried about academics. And even sadder was that they thought they were pretty good because people actually went on to Ivy League schools. But we were woefully ill-prepared compared to our colleagues who’d gone to Andover and Exeter and other prep schools, and even the best public high schools, the East Denver High School kind of place, or the Evanston High. Those folks were way better off than those of us who came out of Minneapolis’s high school system.

**Sharpless**

So you found yourself having to work hard once you got to Harvard?

**Speidel**

Yeah, the one thing that kind of saved me was that I was a great reader, so, you know, I did great on the SATs because I knew all the words, which was two thirds of the battle, I think, and the science wasn’t too bad. So, I was always—the standardized tests were always a big friend for me because somehow I was—I think I was bright enough to do well and not so bright I saw complexities and got wrong answers. (laughs) But anyway—

**Sharpless**

So, you—
The high school years were one where essentially I had no homework to do. You could do a little bit in—what was necessary in study hall, and so it was fun in that regard in terms of—my brother and I were busy working on our car, and things like that. (laughs)

It must have been a bit of a shock when you got to Cambridge.

Yeah, and everybody said that the high school kids were going to have the first semester in academic shock and then gradually swim to the surface and catch up. So, and that’s probably what happened for me.

When you decided to go to medical school, what were you thinking you would do?

As I mentioned, I was just thinking that there were a lot of different directions one could go with medicine, and it was definitely a way to put off a decision for another four years (Sharpless laughs) so, I guess—one other aspect of my career that may be relevant is, when I went for my interview the person who was interviewing me said that, “Okay, your medical aptitude tests are okay but there is one scale where,” he told me, he said, “you’ve got the highest score I’ve ever seen.” And that was the one on current events. They used to have a section of the MCATs that looked at what you knew about the world and what was going on. So, I guess I was much more tuned in to what was going on around me, and I think that’s one reason I didn’t want to stay a chemistry major where you sat in that lab and worked exhaustively on some—elucidating some little chemical reaction. Not that that’s not important and useful for society, but I think it was not exactly how I wanted to spend my time. I think I’ve always wanted to kind of work
on big issues and try to make something happen, and I—throughout this
interview I guess I will avoid excessive humility and—

Sharpless  
Please do.

Speidel  
—and say that I think I have been able to do that—is to make some
important things happen over my career.

Sharpless  
Different people who have been involved in epidemiology over the years
have said, You know, I could either see one patient and cure their cough or
I can work on the big problems that were causing—causing their
symptoms.

Speidel  
Well, that—as I was going through medical school, I did my internship at
St. Luke’s hospital in New York City, and that’s when it really crystallized
the notion that much of medicine was picking up the pieces of end-stage
degenerative diseases or self-induced problems, like substance abuse or
failure to have a healthy lifestyle. If we all had diets like Bengali peasants we
would essentially not have the number one killer, which is heart attacks. If
we got the same diet and level of exercise they would essen—they would
probably vanish. And yet, the amount of medical effort going into bypass
operations and all of the blood pressure control drugs and on and on would
be avoided if we had—by and large avoided, if we had a different lifestyle.
So, it seemed to me that the most efficient approach to health was doing
preventative medicine. As I was looking around at what issues needed
attention, it seemed to me that population was one that was being ignored.
And that was somewhat health related in that we’ve done a lot of death
control, but because of the controversy around birth control that hadn’t
been brought along. And of course, there is always a kind of trade off between preventive measures where you essentially work with healthy people and trying to relieve the immediate problems. The emotional appeal of dealing with sick people is enormously high compared to the will—the public will to work in prevention. I have an issue that’s probably at the heart of why we have separate schools of public health, to try to set aside some time and some money and energy to do prevention, because the average doctor is trained to cure disease, not to prevent disease. At any rate, the New York Times was busy publishing articles about population growth, there had been some studies of that including the Draper Commission that Eisenhower had sent around the world to look at issues that related to development and he’d come back and said that population growth—rapid population growth was a critical issue. And Eisenhower had blown them off in effect, disavowed that and said the government shouldn’t be working in that area. A position he later recanted by the way, and he became an honorary chair, or some title, of Planned Parenthood. So, I guess Eisenhower sort of saw the light later about that issue. So, anyway, I decided to focus on population at the school of public health at Harvard, and they had a brand new program.

**Sharpless**  
So, you finished your M.D. and decided to go for your M.P.H. immediately after that?

**Speidel**  
Well, I did my internship.

**Sharpless**  
Okay.

**Speidel**  
And that’s where I — it really crystallized my intention to do preventative
medicine, and the aspect of it that seemed most interesting and neglected and important was in the population arena. One other thing that influenced me in this, I think, was reading a book by Harrison Brown who was looking at the issue of running out of oil and things of that sort—the environmental impact of rapid population growth. That didn’t turn out to be entirely accurate, but it was still worth paying attention to.

**Sharpless**

What was it in that book that you found most compelling?

**Speidel**

I think it—he looked at a number of relationships between population growth and economic development and demand on natural resources. And this—I think the one that struck me the most was how rapidly we were going through the known reserves of petroleum. It’s turned out there is a lot more oil than people thought but people have conveniently forgotten the enormous investment in finding that, you know, billions and billions of dollars spent on that that might have been spent on, say, better school systems if we hadn’t been so wasteful in terms of use of that energy source. But that’s a whole other story. I mean, the whole issue of global warming and SUV’s and on and on, is another issue.

**Sharpless**

What did the curriculum at the M.P.H. at Harvard consist of in those days?

**Speidel**

Well, interestingly enough, the training in nutrition, in tropical public health, in epidemiology, and in research and methodology—social science research methodology, and health care administration were all very good. The training in population was rather weak. Roger Revelle had just come in to head the department. He only taught one course the whole year. That didn’t thrill me. And we did get some very good demographic studies training
from David Heer, who later became a professor at USC but had been working at the Bureau of the Census. And we learned a lot about demographic methodology from him. We learned a bit about work in the field from Dr. John Wyon. And there were just two of us majoring, if you will, in population studies, and I, in a not too serious vein, noted that since I came ahead of him in the alphabet, I was the first person to graduate with a population studies major from the Harvard School of Public Health, and that was in 1965.

**Sharpless**

Uh-huh. Okay, now when you finished your M.P.H., then what were you thinking you would do—what did you want to do?

**Speidel**

Well, after that—I’d been in ROTC, in the army and I owed the government a two-year payback. In those days you had a choice of three years in Europe as a physician or two years, typically one year would be in the U.S. and one year in Vietnam, and I was lucky enough to get a slot at the—in the Office of the Surgeon General in Washington, D.C., where I was working on medical records, trying to create better systems for keeping track of medical data, especially in the outpatient arena. Because we did a few little studies that showed that testing was being carried out and people were entering—well, first of all, the data wasn’t even getting into people’s records. People would move a lot in the military and they’d lose the records and people would have to be retested or you just miss essential information. And I know now, many, many years later that, at least the VA system, I’m told, has an excellent computerized—based medical records systems that are very advanced. But in those days they weren’t. And we were working on
creating better systems. Fortunately I eluded the second year in Vietnam by being valuable enough to my bosses that they wanted to keep me around in the Office of the Surgeon General. So, that was fortunate. Because if I would have been off in Vietnam I would have been worrying about public health issues like malaria or dengue or clean water for the troops and probably would have had a lot less fun than living near the Kennedy Center in Washington. But after that—

Sharpless: Let me back up.

Speidel: Sure.

Sharpless: What about the time you were in New York City working with maternal and child health? You said you did that for a couple—for a year?

Speidel: Yeah.

Sharpless: Was that part of your medical school training?

Speidel: I guess I got a little bit out of order here, because after my year of school of public health I did a residency program in public health. And the military in those days would allow you to defer serving until you’d finished the residency programs. It was called the Berry Plan. The idea was that you’d be more valuable to the military if you went in as a specialist with training in whatever it was: surgery, pediatrics, neurology and so forth. In my case it was public health. So, I did a public health residency program and that started out with rotations throughout all the departments of the city health department in New York City. So, I would get on the subway and go out and look at programs and places like Bedford and Stuyvesant and Red Hook; places where you wonder whether your safe walking down the
streets, but nothing ever happened.

Sharpless  These were all five boroughs.

Speidel  Uh-huh, yep. And part way through that they thought they needed
somebody to help with the maternal and infant care project, which provided
mostly well-baby care for the poor in New York City through the health
department program. And most of the funds were coming from a
Children’s Bureau grant. And we were—they wanted somebody to help
expand that program and to add family planning clinics to the maternal and
infant care project. So, the strategy we adopted was to look at where the
well-baby clinics were being held because we assumed that most of those
babies had mothers who were coming there who probably needed family
planning, and they were empty quite a bit of the time. And then we
looked—put a big map on the wall to see where, geographically, Planned
Parenthood had their clinics, because we didn’t really want to create
something next door to one of theirs. And, I think we—I am trying to
remember where we started, but I think we added about nine or ten new
clinics to the program, scattered all over the city. And, I do remember one
thing, that was perhaps one of my early lessons in bureaucratic behavior.
We were ending a fiscal year and we had several million dollars left over,
and there was a thought that we were going to just not draw them down
and not expend the money, and my innovation, if you will, was to say let us
forward fund for next year and spend all that money, which is, maybe not a
radical thing, but surprisingly that wasn’t what they were planning to do.
And it turned out that that saved the program the next year because our
budget got cut by about the amount we had thrown—

**Sharpless**  
So, is that your forward fund?

**Speidel**  
Uh-huh. I can’t remember exactly how we used it but we figured out some way to do that.

**Sharpless**  
Now, whose idea was it to bring family planning into this milieu, if you will?

**Speidel**  
Dr. Gordon R. Douglas was the director of the program and he’d been a professor of ob-gyn at Cornell. And essentially, when he retired from full-time practice he took on this job, and I came in as his deputy. I remember thinking, at the time that, you know, here I was fresh off the academic line and it was just a sign of how desperate they were for anybody with any talent, because I got hired and got a good salary for those days, and went to work helping him on the program.

**Sharpless**  
How much had you thought about family planning up to that point?

**Speidel**  
Oh, I was—definitely that was what was going to be my career, so far. So, they knew that, and so I fit right in to what they needed. Otherwise, if I had been interested in infectious diseases or maternal health, or something else I could have probably found a niche in that in the health department program.

**Sharpless**  
How much time did you spend in the clinics yourself?

**Speidel**  
Very little actually doing things. It was much more observational and in terms of creating this program, it was administration. But we did expand it pretty substantially. I think we ended up with eighteen clinics and something like 250 employees and a budget of about $5 million a year, which in those days—is probably worth quite a bit more, these days.
Yes. What kind of people did you find to staff the clinics?

We actually just used the same staff who were there all the time.

Who were there for the well-baby?

Uh-huh. Or other general health care. Public health programs in New York City were a combination of preventive medicine and clinical services. So, we had staff already, that we could, in effect, convert to this. And the heart of that were really the public health nurses, which there were a lot of in New York City. And they were often from the community. They were trusted. People would open their doors to them when they wouldn't with a lot of other people. They'd knock on a door in their uniform and they'd know that they were there to help and that they really were there to help, not to cause them trouble with their welfare payment or something else—their welfare eligibility. So anyway, all that was prior to joining the army medical corps.

One more question about the family planning, how much technology were you all able to offer them through the clinics? Did you have a full range of contraception to offer?

We certainly had all the nonclinical methods which would include things like condoms, diaphragms, oral contraceptives. And I remember, we had a bit of problems buying oral contraceptives because everybody wants you to buy the cheapest possible, and that means if somebody may win the contract one year and somebody else the next year. And even though it is the same formulation, if somebody sees the package different they get nervous about that and certainly—
If they are used to taking yellow they don’t want purple.

Exactly. So—but we were generally able to specify brands and have it come out fairly close in cost—and, I mean, that’s the kind of issue that may not seem earth shattering, but that we had to deal with. And if somebody wanted an IUD or sterilization then we were able to arrange for them to go to some clinical service because, basically our clinics were outpatient clinics. And they weren’t offering abortion services. This was pre-Roe v. Wade.

Pre—before even the New York law changed.

Yeah, I can’t remember—I think the New York law probably changed around 1970, something like that. I can’t recall exactly when that happened.

What were the most valuable lessons you carried away from that year in New York?

Hmm, well one thing I—we’d—we had implemented some new systems for collecting data, because part of what we did was research and we were documenting that birth spacing actually reduced prematurity, which was a number one cause of infant mortality—morbidity and maybe, to some extent, mortality—and we’d come up with some, what we thought was a great new system for collecting data and then had not involved the clinic staff adequately in that step, and we had to step back and rethink it a bit. That, I think, was one lesson. The other lesson is the one I mentioned, that when you have resources you better use them today because they may be gone tomorrow. (laughs) But it’s hard to say. One of the things, of course, you—think of medicine as being something where you practice, but in fact, doctors do a lot of coordinating teams. And that’s something you learn in
the hospital, by that often you are writing orders for somebody else to carry it out. But working with them is very important to the quality of care your patients get. You need to communicate with the nurses who are there all the time and goodness knows when you are right out of medical school stepping out on the wards, they probably know a lot of things you don’t know. And you better be willing to learn, I think.

Sharpless

Let me turn the tape.

Speidel

Sure.

_Tape 1, side 1 ends; side 2 begins._

Sharpless

Okay. So, a year in New York and then your payback for the army.

Speidel

Yeah, the New York City year was—I am trying to think exactly how long it lasted. Let’s see, I graduated, got my M.P.H. in ’65, so it was a little bit more than a year and then I did my army payback which was—one interesting thing about that is the military is a hugely inefficient organization, I’d have to say; millions of dollars spent and sometimes the folks running the system are not the best and the brightest, to be blunt about it. In general, their style was you just throw enough manpower at it and enough money at it and you will get the job done, but it is certainly not an efficient thing to do. But there were some interesting moments. Occasionally, we would pull duty on the weekends and get the kind of calls that came into the medical corps about people in Vietnam and try to hook up—get information back to parents and—all of which made me glad I was here and not there. But, if they’d said go, I would have gone, and that would have been—that was their decision.
Sharpless: What else did you learn from those two years in the army?

Speidel: Well, I guess it was more understanding how bureaucracies work or don’t work. And I will talk a lot more about that when I get to AID.

Sharpless: (laughs) That’s okay.

Speidel: (laughs) Which is the next step.

Sharpless: What were you thinking you would do when you got out of your army commitment? What did you want to do?

Speidel: Well, I looked at several options. The Population Council, which is the largest private population organization in the U.S., wanted to hire me back because they’d known about me when I was in New York and I’d gotten to know some of those folks. And I took a look at the antipoverty program because they were running a lot of clinical services for family planning. And this is where—

Sharpless: This is when the war on poverty would have been in its height, right?

Speidel: Right. And this was where Phyllis Piotrow actually entered the picture. You mentioned you’d spoken to her already. Because she was working with what in those days was the Population Crisis Committee and Bill Draper. And she, at least, was one voice that suggested taking a hard look at AID, and—the other thing that appealed to me about AID is they had a lot of money and no staff, and it seemed like tremendous opportunity to make something happen. And I was lucky enough to get hired. Rei Ravenholt who’s—you’ve already had an interview with, was the charismatic and energetic leader of that program.

Sharpless: How did you meet up with Rei?
Well, I’m sure I sent a letter over and then maybe asked for an interview. It was kind of slow going because getting into AID you had to get a security clearance and coming from the military where I had a top secret clearance already made that a lot easier. But later, when I was hiring staff, it could take up to an entire year before you could get somebody in. And it was a wonder anybody would wait around a year to get a job. I had employees who were working in—you know, selling things at Woodward and Lothrop, the department store, to keep things together during that period, just one of many dysfunctional aspects of AID. On the other hand, AID was, in many ways, a huge success story for the taxpayer and for the field of population. It just could have been much more efficient than it was.

What was it about what AID was doing that appealed to you?

Well, first of all, the challenge was international rather than domestic and it seemed like it would be much more interesting and much more needed to work internationally than to deal with one segment of the U.S. population, and—which I’d already been doing with providing services for disadvantaged people in New York City. So anyway, I went to work at AID and we started out in the old emergency hospital which was opposite, I can’t think of one of the museums downtown. It will pop into my head. But it was a place that was condemned. So, it was—there was no maintenance being done. (laughs) And there were sort of these drab green walls and we had very little staff. I think that if you weren’t happy to, in effect, do everything—run the Xerox machine, answer your own phone calls, you weren’t going to get a lot done. And I remember at one point, very early on,
I was offered—said we’ve got a great Ph.D. that we can give to you to help the program and this guy, quite frankly, was a loser and I said, “I don’t need a Ph.D. I need a secretary.” And I think Rei Ravenholt told a story about how he said he was going to get his wife in to do secretarial work before he could get that kind of assistance. So, there was—it was a very small staff.

**Sharpless**

So, you had funding for professional positions but no support staff.

**Speidel**

Well, AID gets its funds in two separate budgets: one for operating expenses, which is always under tremendous pressure because the Congress doesn’t want to spend any money on that, and the other for running the programs. So, we had a lot of money for programs but enormous constraints, especially ceilings on personnel. So, I could give away, eventually we got up to over $100 million a year, but I couldn’t hire a secretary, take a trip, buy a computer, and of course what you could say was was very limited. So, I couldn’t give a speech or write a paper without it being cleared, as well. But—

**Sharpless**

Where was the programmatic planning when you came on board? What were they doing at AID at that point?

**Speidel**

There was kind of a random collection of things going on and my first job was to become deputy director of the research program, and very quickly, my then boss left, so I became director of the research program. And, to some extent Rei Ravenholt used me as an incubator because when he wanted to get a project started I think he knew we could do it. I used to, occasionally, say that Rei would stride with seven-league boots across the mountaintops, and I got to trudge through the valleys and get the work
done. (laughter) But, I don’t mean to complain. We actually had a lot of fun with a very small and dedicated staff. And when I started out in 1969, the research program was about a million dollars a year and by the time I left running that to become the first associate director, then deputy director, then acting director of the office we were up to about $20 million a year, annually. And one of the first things I did was to create an inventory of research, because bits and pieces of it were happening through mission funding, through central funding, which is where we were, and we didn’t really know what was going on. So, that was a good start. The other thing we—

Sharpless: What were the best things that were happening at that point, as far as you could tell?

Speidel: In terms of what I walked into, at the time?

Sharpless: Uh-huh.

Speidel: We had a little bit of contraceptive development research going on looking for essentially a once a month method of birth control which—and that was just barely off the ground. But the possibility that somebody could use something if they were pregnant or thought they were pregnant and become non-pregnant, in effect a medical abortion, was a high priority for the program. And I put a lot of time and energy into building that aspect of the program. We actually looked at research under four different categories. We looked at pure demographic research and we later started, I think largely at Ravenholt’s urging, but we ended up doing all the work, as usual. Started the World Fertility Survey which still persists as the Demographic and
Health Surveys to do comparable surveys in as many countries—poor countries in the world as possible to find out what was going on with fertility. And that’s proven to be just a very rich resource that’s still being mined to this day, to figure out what is going on. The academic community uses that information over and over again. I would guess hundreds of people have gotten their Ph.D.s using WFS—World Fertility Survey, and Demographic and Health Surveys data. We also created a whole program to do operations research, to look at how do you effectively and efficiently implement programs. And one of the key strategies we pursued was household delivery of services. One of the first projects was in the Matlab bazaar of Bangladesh, and we showed that by going into households and offering pills and condoms that we had very rapid increases in use of birth control. And later on we showed in those areas that when you added Depo-Provera and sterilization you got further incremental increases.

**Sharpless**

Okay. Give me an exam—okay, let’s just take that as an example. Where did the idea come about for household delivery? Where did you all get a hold to that idea?

**Speidel**

Well the idea was that we would make it as easy as possible for people to use birth control. And I would say that Ravenholt was somebody who wanted to put say 10 to 15 percent of all of our resources into research—and he was a big enthusiast for household delivery of contraception—and we replicated those programs in a lot of different countries. One of the earlier ones was also in Egypt, where we did that kind of program. Many times to get this research done we had to overcome the resistance of
researchers who weren’t interested or didn’t think it would work and were sometimes surprised that it did work. In those days, and to this day, there are all kinds of controversies in the population field, and early on there were a lot of people who said you can’t just offer family planning, you have to offer them contacts to broader health issues. And this is an issue that was later revisited at Cairo, where people said you can’t just offer family planning you have to do a bunch of other things. All of which are laudable, by the way, but many of which we don’t have the resources to do, which puts you under the question of what are your priorities—an issue Cairo never dealt with very well. So Cairo came up with a vision, which is a good vision, but never said, Okay, when you don’t have the money to implement that, what do you do?

**Sharpless**

So, but to back up, okay, so you said we’re going to do household delivery of contraceptives. How did you say, Okay let’s try it? Did you say Matlab?

**Speidel**

Matlab bazaar in Bangladesh.

**Sharpless**

Yeah, okay. So, how did you decide to do it in Bangladesh?

**Speidel**

Well, the CDC [Centers for Disease Control and Prevention] was running a Diarrheal Disease Surveillance Program especially focused on cholera, so they actually were collecting data from the rural areas, and by the way, that program still exists today. It’s one of the longest-running surveys that is available in a poor country where you could get accurate data about what’s going on in the field. And so we knew we could have a delivery system that reached households and that we could evaluate what happened in terms of contraceptive prevalence after the delivery system was started.
So who staffed it?

The Diarrheal Diseases Research Institute [International Centre for Cholera and Diarrheal Diseases Research] that is still there.

Okay, so CDC staffed it.

Well, it’s mostly Bengali staffers. But CDC ran the research. Also, we involved Johns Hopkins University in that as well, because they were deputizing our—delegating folks to go work with that lab. It’s probably—it’s probably not possible to list the—I don’t know how many hundreds of research projects that we really started, but just to give an idea under each category, we—I mentioned the demographic research and the operations research. We also had social science research looking at factors that related to fertility, which is kind of the heart of demography. I’ve often said that population sciences are very discipline-centric in that people who study the social factors that affect fertility tend to think that they’re all important. People who are interested in delivering services, the public health practitioners, tend to think that the service delivery program is all important and they’re both—they’re both right and both wrong in that—human behavior is complex and there are many factors that intervene. But one thing I think is fairly clear, if we do all these wonderful things that create demand by educating women or improving their status if there are no contraceptives it’s not going to work very well. And, so, the first thing to do, I believe—and that’s what we tried to do at AID amidst—that’s lots of debate and controversy, is to meet—satisfy existing demand. And, I think the empirical data we got from trying to do that shows that there is a lot of
unmet demand out there if you get the information and the services out, it is going to be widely used. Even today, in Matlab, and this is modern day, this isn’t years ago when I was more involved in it, a lot of families are having two kids but there are some families that are still doing what they did years ago and having five, six, seven or eight kids. So the average number of kids may be 2.6 or—rather than closer to two, and it’s because of these outliers that change the averages so dramatically. And those are the families where a different level of education and income and all of these other social factors might tip them over into a more typical modern small family norm.

Sharpless

What about—okay, talk about the basic contraceptive research that y’all did.

Speidel

Okay, well, that’s the fourth category. No, we’ve gone through operations research, social science demographic research and, what we—what I call demographic research, where we are just looking at collecting information about contraceptive prevalence, fertility desires and so on. Probably the biggest program we had in research was in contraceptive development because—well, let me say a few things about it. Contraceptive development is slow, its costly, it uncertain, but when you get a new contraceptive, the technology can radically transform a field. If you think about trying to do birth control with pre-1960s technologies, where we had foams and diaphragms and condoms and surgical sterilization carried out in operating rooms under general anesthesia, we would be very handicapped compared to today, where we have added, little by little, incrementally we have added a whole lot of methods in. We now have sterilization that can be done under local anesthesia for men and women as—on an out-patient basis. We have
new IUDs—we have IUDs first of all, and we have new ones that are more comfortable, less likely to be expelled, and highly effective. We have the pill and lots of variations on that. We have the injectable Depo-Provera and a few different variations on that. We have simplified surgical abortion, and with some fifty million abortions in the world every year this is terribly important to individual and country fertility determination. And if you’re pregnant you have two options; one is to have a risky birth or a much less risky abortion. So—and then of course, the burdens of too many and too close together child bearing. So, in a world where half the pregnancies are unintended, abortion looms extremely large. Even though there is the rhetoric about abortion shouldn’t be a method of family planning, of course it is, and of course it should be. So, anyway our research program developed the simplified menstrual regulation syringe, sometimes called MVA, or manual vacuum aspiration—

**Sharpless** Uh-huh.

**Speidel** —which has been used for twenty-five plus years, and its just a little hand-held vacuum apparatus that can be used for early abortion.

**Sharpless** Malcolm Potts talked a lot about that.

**Speidel** Uh-huh. But your taxpayers’ dollars went into engineering that particular technology. We also put a lot of resources into medical abortion, which is available. Supported work on prostaglandins and antiprogestants. We worked on sterilization techniques using clips and rings and the minilaporotomy, which I already mentioned which allows you to do sterilization under local anesthesia.
And your role in these things would be—as director of research—what—

What did I do?

What did you do? Yes.

Find the people to do the research. Give them the money and stand out of the way. (laughs)

Uh-huh. And what kind of reporting mechanism, then, did they have back to you?

Well, we certainly kept track of what was going on through a combination of site visits, reports, and we weren’t shy about suggesting avenues to pursue. Sometimes we started—we actually started a re-granting program. The Program for Applied Research in Fertility Regulation, or PARFR, and that has evolved into what exists today, which is CONRAD, which has to do with contraceptive research and development. We also created a program called IFRP, the International Fertility Research Program, which has since been renamed Family Health International, which is a clinical—basically was a clinical trials program. The idea was that we could take any contraceptive that was developed anywhere and put it into this program to get sound objective clinical trials and also to do something equally important, which was to introduce it into many countries in the world. So, their own investigators become comfortable with it, they wouldn’t be afflicted with what’s sometimes called the NIH syndrome, Not Invented Here syndrome, (laughter) so that they would be happy to introduce it into their own programs. And that’s still working all over the world. We developed another program to bring research findings to the attention of
program directors and policy makers—through Johns Hopkins the
Population Information Program, and that’s what Phyllis Piotrow has been
working on for many, many years. That evolved into the Center for
Communications Programs, which is still at Hopkins. One of the things that
is very satisfying to me is that many of these institutions we created still
persist and are still doing good things.

Sharpless
Yes.

Speidel
So, that’s a place that I—if I am going to be proud of something, I could
say that we created a lot of the infrastructure that persists to this day—still
doing good work in the population field.

Sharpless
Still—

Speidel
Because when we—when we started this program, these institutions weren’t
there. So, we had to think of what do we need, and in the early days the
bureaucracy was not nearly as bad as it is today and I’ll get into that in a
little bit. We were able to—in several months mobilize funds and identify
some top leader and turn them loose to develop these programs.

Sharpless
Again, I am trying to get at how this procedure would happen. You know,
I’ve talked to Rei—and the whole brainstorming. But how did you all come
up with these ideas to say, Okay we really need to get these—this
information out, let’s talk to the people, you know, at George Washington it
was then, about creating this information system. How did all of these—
how did all that happen?

Speidel
Sometimes I wonder, considering the fact that most of our time we spent at
AID we were dealing with trivial bureaucratic issues—and especially when
I—when I started out Ravenholt was the office director and then I would became office director. He gave us an insulation because we always had some big political boss coming in and they were always insecure, they always wanted to leave their mark, and—they were well-intended people, I wouldn’t—

**Sharpless** You mean, are these in the State Department, you mean?

**Speidel** No. We were—AID was separate. It is under State, but it’s really separate. But when an administration changes, or even when it is still there, the political appointees come in to run the regional bureaus and the technical bureaus and to run AID. And unfortunately, unlike other departments of government where people may have some expertise in their political life before this, nobody has expertise in foreign aid in domestic politics. And that’s how you get these jobs. You have some kind of political tie. At times they would find somebody who wasn’t very political, like John Hannah, former president of the University of—Michigan State, I guess, did a great job as AID administrator. But many other AID administrators came in because it was an ex-governor who was out of office or somebody who had run for office and they hadn’t gotten elected and they needed to give them a job. And, but I don’t mean to be overly critical of these people, they just weren’t prepared for it. But they could—they could have had a little more trust of the staff because we were seen as holdovers so whatever we were they would say, Oh, there’s those Democratic holdovers, or those are Republican holdovers even though we were just civil servants, and we were professionals. But it made it tough because instead of getting on the phone
to get some trivial thing answered we’d have to write a memo, and then it’d
have to be reviewed by five other, probably useless, parts of AID that dealt
with policy. And so, we spent a lot of time on that kind of thing. And if
something went wrong, which usually could be ignored, but people would
get all nervous about it, then they’d create a system so that wouldn’t go
wrong again. But that problem would not appear again in a thousand years
but the system would live on. So, I used to say that AID was like a ship
getting more and more barnacles on the hull—going slower, and slower
through the water. And when I first started there we could do—there were
enabling documents that allowed you to do a project—well, we could have
a ten-page enabling document, create something in three months. By the
time I left fourteen years later, these documents were limited to a hundred
pages by regulation, so they didn’t get too long, of course they were way too
long at a hundred pages, and our typical turn around time for one of these
projects was pushing two years. Plus the thing—the whole handicap about
personnel that I mentioned, the AID program in health was half the size of
the population program, but they had twice the staff because it was a
holdover. And we were fortunate enough to get earmarked money into
population year after year, which enraged, really—maybe that’s an
exaggerated term, but certainly created a lot of anger among the
administrators, who, in classical bureaucratic behavior that Max Weber has
described—your typical manager would rather have less money that they
control than more money that somebody else has something to say about
the control thereof. So, we were favored that way by Congress and they also
said, If they money doesn’t get spent on population, you have to return it to
the treasury. That was a pretty wild requirement, but that meant we could
actually build a program within a hostile environment.

Sharpless

Let me turn the tape.

_Tape 1 ends; tape 2, side 1 begins._

Sharpless

This is the second tape with Joe Speidel on October the tenth. I’m sorry, go
ahead. We were talking about the bureaucracy at USAID, and then we
stopped the tape. And you were talking about how you managed to get
things done in spite of these huge things.

Speidel

I used to occasionally say that we spent 85 percent of our time on
unnecessary bureaucracy, and 10 percent on things that were really
professionally relevant, and if we were lucky, 5 percent of our time on
something creative. And you asked where did—where did the ideas for
what we wanted to get done come from.

Sharpless

Right.

Speidel

There are always a lot of ferment and ideas around about the population
field, and we try to see what does science have to say, and be very
pragmatic. The other thing I would say is, I think that if you look at my
career, and once again we have to forget about modesty here, I think I’ve
tended to approach things as a strategic thinker. How does it all fit
together? What needs to get done? And not to worry too much about
ideologies, and they’re all over the place about various things. I think I’ve
already alluded to the fact that various interest groups tend to say that
population work should really focus on what they care about. The most
recent, huge example of that is the Cairo Programme of Action, which was influenced greatly by women who care about human rights and women’s health. And so, there’s a lot of rhetoric about how we can’t do population programs without considering gender issues, women’s status, and so forth. And of course, all of those concerns are legitimate and, especially in developing countries, need attention, but to say that somehow it’s not legitimate to run a program that doesn’t pay a lot of attention to some of those issues I don’t I don’t agree with. It’s sort of like saying that it’s—we shouldn’t do an AIDS program unless it also addresses malaria. You can do part of a—meet part of the human needs that are needed and have it be a legitimate and useful thing. Also, the Cairo critics created, what I think, is a bit of a straw man, when they said that demographically driven programs are of necessity coercive because all they care about are numbers. Well, numbers still matter in spite of what somebody has to say. And we care about numbers not because we’re numerologists but because we care about human life and all life on this planet and we see it being less felicitous for all if numbers are all uncontrolled. There is the ratio of numbers to resources that still matters.

Sharpless And as you pointed out earlier, this was a time of great change in the technology that was becoming avail—that was coming online and—when you were at USAID.

Speidel Uh-huh. So—

Sharpless And you can’t—and you can’t do family planning without the technology.

Speidel Uh-huh. Anyway, I think we were able to see what’s the whole picture
needs and then create institutions that would contribute to that huge mosaic, which is an enormously complicated and world-wide picture. And one of the endless problems in the population field is to adopt appropriate policies. For example, in India they adopted a system of targets which, sometimes erroneously were attributed to—that somehow AID was sympathetic to this because we cared about numbers but we’ve always opposed—when I was at AID we always opposed targets as that the target for a program should be excellent services—high quality services that are delivered in a humane way with adequate information, and have faith that people would use them, and that the numbers would come down, as they have all over the world.

**Sharpless**
When you say target you mean they had averages they were shooting for?

**Speidel**
Yeah, they established targets for number of users of birth control, especially numbers of sterilizations that should be done.

**Sharpless**
And some of those were coerced as I understand, or possibly coerced.

**Speidel**
Yeah. All you need is one coerced and you’re besmirching the program.

**Sharpless**
Yeah.

**Speidel**
There were—its interesting, at the beginning it was focused on vasectomy and so there are probably as many men coerced or at least pressured to have vasectomies as women to have tubectomies. But neither is appropriate. We don’t need coercive programs. We don’t need personal incentives. We need excellent voluntary programs. Another mistake that India made was they attempted to use, like, one method, and started out [saying], We’ll just do it with diaphragms, and then, We’ll just do it with the IUD, and then, We’ll
just do it with vasectomy. And then it became, We’ll just do it with
tubectomies. Well, unfortunately the reversible spacing methods are still hard
to get in India and they spend a lot of time denigrating the pill—not true
today, but there is a lot of catching up to do. And rehabilitating the
reputation about birth control methods is difficult once you’ve run it down.
So anyway, that’s an example of, I think, in general some bad policies. And
people say, Oh, India’s program was a failure. Well, in fact, it isn’t. There
are many, many parts of India where the average family size is about two.
It’s just that the Hindi belt—it’s still very high fertility, and there is still a lot
to be done. As usual, things are more complicated than some of the casual
commentators think. But—another—I would say another thing about the
level of creativity, sometimes it has—comes down to being willing to take
chances. I recall that at one point there was the proposal to do subsidized
retail sales of contraceptives, sometimes called social marketing of
contraceptives. And Bill Boynton who was the deputy director of the office
at that time came to me and I—when I was directing the research program
and my then deputy Duff Gillespie, who is now a deputy assistant
administrator today at AID running health and population programs, and
asked us, said, “We’d like to do this in Bangladesh.” Duff and I looked at
the data and said, You know, this is the poorest country in the world, these
people don’t even have—they’re not even in the monetary—the money
economy half the year, and we don’t think it will ever work, but let’s try it.
(laughs) And that was where we came out and, of course, we were dead
wrong. It worked beautifully. It just showed how much demand there was
and for many years the social marketing program provided more condoms and more birth control than the official government program because it took them a long time to start up. So, I think it’s probably a good characteristic to be not too risk adverse if you want to do something new and have it happen.

**Sharpless**

How did the World Fertility Survey work? How did—you know, it’s an audacious idea. Talk about creativity. Where did that come from?

**Speidel**

Well, that’s an interesting question. Charlie Westoff and Rei Ravenholt sort of each claim a bit of paternity of that. But, as usual, it got—it came to the research division to implement the start up. We also started up training programs that were later handed off. But I’ll come back to the World Fertility Survey in a minute. We created a number of physician training programs and one thing that I—that we had created was a fellowship program for new professionals who needed that first job, and we would give them a stipend that was sort of like Peace Corps, very low amount of money but provide travel funds and they would be free help to somebody out in the field in a developing country. And when I became office director I reinstituted that program, the Michigan Fellows Program, which is still going to this day.

**Sharpless**

So, how well did it work?

**Speidel**

I—there are a lot of people who were working in population who got their start through the Michigan Fellows Program, and it’s now been expanded to allow nationals from developing countries and overseas to participate. We put a little money into that from the Hewlett Foundation; the Compton
Foundation has put much more money into it to allow that to happen. But back to the World Fertility Survey, a key person to make that happen was Tim Sprehe and the research program. Tim was a demographer and he worked with the International Statistical Institute. Tim spent almost full-time making this happen. We got the UN Population Fund, in those days it was called UNFPA, UN Fund For Population Activities, to put up about half the money and we were heavily funding the UNFPA. By the way, in those days we said we would give—we’d match any other grant from any other donor to UNFPA. We had the kind of flexibility that we could spend the money in many ways how we wanted. So that multiplied the money, and of course, UNFPA, in my opinion, is still not a very efficient organization like most UN bodies. But, if we were only spending fifty cents on the dollar I guess we shouldn’t complain too much. But, so UNFPA lent their name to it and then the International Statistical Institute became the home—the home for this. And it was Europe based so it didn’t look too heavy handed from AID. And it was something that people in the field wanted and by that I mean in the population field and I mean in the field in a hundred countries around the world. So, little by little, this got taken up and various rounds done and it’s proved to be extremely useful information to know are your programs effective. If not, why not? And I think it’s been called the world’s largest social science research program. Something like sixty countries ended up participating.

**Sharpless**

Now, when something—how early on did you start traveling the world, after you started with USAID? I’ve seen pictures of you with Rei Ravenholt
(Speidel laughs) [that have written on them], This is Joe and me in India, This is Joe and me in Bangladesh.

Speidel

Uh-huh. Well, I’d say every year I would probably—at least once a year, go out and often visit multiple countries. And so, I’ve been to a long list of countries. There are certainly places in, especially in Africa that I’ve never been and some places in Latin American that I’ve never been—probably spent more time in Asia. And I think the travel is extremely useful to hear what the real issues are on the ground. I remember going to Nepal once, and it’s easy to sit in Washington, D.C., and talk to professors of demography at some university who are worried about this or that issue and it’s usually something that’s not really in the cultural context that’s so important. Because when you get out to the field and you see, Oh there aren’t any pills or condoms here; how are they going to run a program? How can we worry about fertility when there’s no birth control? Or, Gee, the field workers haven’t been paid in three months; no wonder they’re not doing any work. It usually turns out that the issues are much simpler and much more basic, things that we take for granted. Or, Why don’t we set up a family planning, contraceptive development research program right here in country X, Y, or Z, and then you find out, Well, the power goes off three times a day; there is no way to get the reagents into the country, there’s—if your equipment—delicate scientific equipment breaks down you don’t call up and have somebody come out and repair it or send it off by Fedex to get it replaced; there are not the lab assistants, trained and available, who can keep things on track. And you discover, it’s a waste of time to try to set that
up. We used to hear that about manufacturing contraceptives. Somebody in AID would say, Oh, what a great business—not realizing that the raw materials in the pill are only made in five countries in the world. We don’t even do that in most of the developed world. And so, then what are you doing? You’re tableting. And what’s it take to do tableting? Well, you know, a large garage (laughs)—a four car garage could probably—and hiring six people. This is not much of an industry. If you ever visited a plant where they are doing this in the U.S. you see that most space is required for the boxes of the stuff after it’s been made. In other words, I think getting around and seeing how things actually work, whether it’s in this country or overseas—I used to call it refocusing the microscope so you really understood what was needed and what was appropriate. And it is awfully easy to sit in your office all the time and kind of go off course. One reason AID programs worked well is that we had missions, and maybe the people in our missions weren’t the most brilliant scholars in the population sciences, but they were there. They were on the ground. They knew what was happening. They could give us feedback. They could keep an eye on how the money was being spent, making sure it wasn’t all being diverted to some other purpose or stolen. And that was extremely important, rather than being some top scholar having published fifty articles that are—appear in *Demography*—that’s a journal.

**Sharpless** How bad of a problem was corruption on the ground?

**Speidel** Probably impossible to say—some places it was very important. I remember the program in Egypt we felt we were lucky if some of the money got spent
on family planning. Other places, you know, Thailand, probably almost
nothing got diverted. I should point out that as a way of life there's lots of
payoff. So, if it's different levels—there was a 10 percent fee to get
something done, that may be just the way they do business in that country.

Sharpless
Sure.

Speidel
And usually the labor costs and other costs are so low that it's something
that might outrage Congress, who’s always anti-foreign aid, and increasingly
anti family planning. But I think the ends were so important that we have to
tolerate some of that. And it happens in every development program. I used
to say—I'm giving you all my little adages here, you can see as I was
going—living through this I used to think of these things, but I used to say,
“If we wanted our foreign aid money to be used perfectly, we'd have to give
it to the Swiss.” (laughter) Yeah, we can't give it to Bangladesh and Brazil
and so forth. That's just the nature of a less-developed country. And, by the
way, we usually had almost no travel money so we couldn't spend the time
to monitor these projects the way we ought to have. Whereas the inspector
general part of the AID was—you know, the sky was the limit because
Congress wanted them to be the junkyard dogs making sure that everything
was honest.

Sharpless
So, they might visit a U.S.—they might visit a population program—

Speidel
Looking for malfeasance.

Sharpless
Okay.

Speidel
Whereas we couldn't go out and try to keep it on track so there wasn't any
malfeasance.
So, what happened when they would go to one of your shops and find something they didn't like?

Well then there would be some huge furfural that we would have to track down—divert a lot—spend a lot of time and energy on that. Things like, Oh, my gosh, the condoms are out dated, or there’re pills out there that are outdated. Well, outdated pills don’t stop being effective between the day that the date turns over and in fact, outdated drugs are used in the U.S. in our military all the time. Many times they are outdated because drug companies don’t bother to test them after whatever, four or five years. They don’t want them to stay on the shelf forever. They would be happy to have them thrown out and have you buy new ones.

Start over again.

So—but anyway, that would be the kind of a thing that would be a scandal. And since such a large proportion of the world is anti-population work, anti-family planning and unconcerned about reproductive health, we have more critics. Occasionally I’ve wondered what it would be like to work on something like education or health where everybody’s for it.

Well, okay—why is that true? Why is the world anti-family planning?

Well it isn’t the world, it’s just some of the world, and it’s usually not rank and file. The men and women on the street—I mean look at Italy where they’ve had two plebiscites, both by bigger margins endorsing access to abortion. But in a huge part of the world—Latin America, the politicians are very afraid of the Church, which has political clout. It doesn’t reflect the man and woman on the street; they use just as much birth control, just as
much abortion as non Catholics but it hampers government programs. So, that handicaps access to birth control especially in the countries that don’t have a tradition of a separation of church and state. Mexico and Brazil have the best tradition of that and have, in many ways, the best programs.

**Sharpless** Because the government can do without having to worry about what the Catholic Church thinks.

**Speidel** Well, they worry somewhat about what it wants, but neither of those countries has easy access to abortion. The other aspect of it is that—the anti-abortion lobby basically is anti-family planning although they never admit it, except for the Catholics. Which is a—and they say, Well, we’re for family planning a little bit if it’s only one technology. I remember at the end of the Cairo conference the representative from the Holy See, sometimes called Holy Blind—

**Sharpless** (laughs) I hadn’t heard that one before.

**Speidel** —said that, Well, we’d like to associate ourselves in—with some of the good things in this document. After arguing strenuously to get compromises where we toned down rhetoric to satisfy them, then they say, Now, we won’t even agree with the compromise. Totally ridiculous that a UN meeting has to be unanimous and that you don’t vote on these things. So, a few outliers can paralyze the process. But anyway, at the end he said, “You know, we like certain things, but we’re withholding approval on”—and he listed a whole bunch of sections. And then said, “But let no one think that is it legitimate to use condoms to prevent AIDS.” And that was sort of mind blowing that they would say, Go ahead, go out, get sick and
die because it is immoral to use condoms. The lack of pragmatism is stunning. And so, we have a lot of opposition to anything that relates to family planning and there is not a lot of concern about other reproductive health issues, sexually transmitted diseases, safe maternity, birth spacing, you fill in the blank. That’s really not on the radar screen. Only recently have we—the U.S., started putting substantial amounts of money into AIDS, even though five million people got infected last year. We’re—we’ve spent endless worry about the sad events of 9/11, where three thousand people lost their lives. Where’s our compassion for the five million people who are going to die from AIDS—new folks this year? They’re over there. They’re not U.S. citizens.

Sharpless Even though U.S. citizens are still dying as well, to an extent. Let me turn the tape.

Tape 2, side 1 ends; side 2 begins.

Sharpless Okay, when we stopped to take a break we were talking about different things in population research and then the impediments to spending the money, and yet the funding came for USAID. How do you account for that?

Speidel In the early years there was not a huge amount of organized opposition. There were key members of Congress like Senator Taft, Senator Tydings and, I mean, Taft would have to be considered a moderate Republican. We didn’t have the polarization that we have today. There were moderate Republicans who were internationalists. Senator Gruening was another key supporter, Senator Fulbright, even George Bush in the House. I remember
one day going up to have breakfast with then Representative Bush. Bush I, not Bush II with—Rei Ravenholt and I went up and had breakfast because he sort of reached out in the bureaucracy to find out how the population program was going. And he was someone who knew the program and understood that that’s why it was so annoying when he became president that he was so unsupportive, so insistent on establishing his anti-abortion credentials. But anyway, he was a supporter in the early days and certainly his family had been involved in family planning in Connecticut, I believe.

*Sharpless*

Uh-huh. I was—one of the things that surprised me when I first started working on this project was the fact that Nixon had been in favor of family planning.

*Speidel*

Definitely. In fact, I would have to say that when I was at AID the Nixon years were the most favorable for family planning, even more so than the Carter years. Probably because Nixon was preoccupied and couldn’t spend any time bothering us, perhaps. But also, he was very supportive of this—this program and we had those good gray Republicans who were non-ideological and good sound businessmen who populated the lower ranks of the political appointees who supported the program.

*Sharpless*

Um-hm. Who were some of the people in the population movement who influenced you most in those early years?

*Speidel*

Well, it’s interesting. When I first started out and I was doing my public health work in New York City, I would occasionally go see Barney [Bernard] Berelson at the Population Council and Christopher Tietze who was one of the giants of the population movement in terms of research, and
other people like Bob Potter. And I guess I was a very unusual person because people weren’t wandering in off the street saying they wanted to work in population (laughs). So, they were very sympathetic and very generous with their time and very supportive. I remember Chris Tietze looking at a couple of versions, or maybe more, of an article that I was writing about knowledge of birth control in a hospital population, which I’d done when I was at St. Luke’s—or had just left St. Luke’s, because I could get a hold of these people, they were right there. But that was extremely helpful to have people who really knew a lot about the field being mentors, and that’s something that I felt I had to do and should do ever since. And one of the reasons that I/we have gotten done what we have done at AID and subsequently at Population Action International, and today at Hewlett, is to have some very good people working with me. That’s really the key to any organization. It’s just the people. And I think that’s one of the things that we looked for when we decided what to support. Who are we building this around? If they’re good people, good things happen—if they’re not, it’s not likely to go so well.

Sharpless Who were some of your most dependable go-to people in those days at USAID? I know you—there were hundreds.

Speidel Yeah, there were so many it’s hard to—hard to pick out. Certainly Phyllis Piotrow at the Population Information Program was a very good person. (pause) I’m stalling because I—it’s hard to pick out too many individuals—

Sharpless It may not be a fair question.

Speidel —that I would say, This one was a star and that one wasn’t, by implication.
I will say, though, that the same thing was true with our country programs at AID. If we had a good program officer out there you could count on them making something happen, even in the worst circumstances. And less gifted people often would kind of go up side trails or not set priorities as well. A lot of what you have to do in the world is set priorities because the resources are low, unlike my army career (laughter). They had to cut a lot of resources.

Give me an example of a country where they did the best they could with what they had.

Well, I think an outstanding program was the program in Thailand where the average cost per couple using birth control was lower, and where over a dozen years they went from a six child family down to a—like a 2.3 child family. And with the exception of Iran in modern times—more recently, that is probably the fastest decline of fertility on record. They did it with less money and faster, and they kind of did everything right. And that’s an example where the policies were good, the staff were competent, at the beginning maybe two-thirds of the funds came from AID and then we gradually tapered off to where essentially no foreign aid money was going there. And that was a pattern that we can repeat over and over again. If there were some way to communicate to the public that this aspect of foreign aid is a big success story, we would definitely have a story to tell. But it is hardly something that’s news, or interesting. And that’s something that I spent a lot of time worrying about in my next job at Population
Action International, where we were trying to get attention to the issue.

And it’s just not something that is easy to do.

**Sharpless**

Well, in the United States, the birth rate’s fairly low in most—in most quarters. How much do Americans care about the rest of the world?

**Speidel**

Well—I think there is a lot of ignorance, because Americans probably do not realize that we are the fastest-growing developed country in the world, thanks to immigration, both legal and illegal. At the last census we found six million Americans we didn’t know were here, which is unique in my experience with the Bureau of the Census and almost all of those illegal immigrants—they think they’re running at half a million a year. And just a couple of upticks on the birth rate up to a total fertility rate around 2.3, and the current levels of immigration, legal and illegal, and the projections are for about five hundred million Americans at 2050 and 1.2 billion at a hundred years from now. And that’s China. And I don’t—the average politician, the average American hasn’t got a clue that that’s happening. And I think it’s worth debating, but we have no population policy in the U.S. So, I think in general there is indifference and ignorance—pages and pages written about the NFL, (laughter) especially on Monday morning. This issue doesn’t appear. It appears less than it used to. I used to see a lot of articles in the sixties in the *New York Times* and elsewhere about it, which is one reason I got interested.

**Sharpless**

We may want to talk about this more when we get to the PAI time but why isn’t population sexier?

**Speidel**

Well, I think part of it has to do with—it’s not just population; it’s almost
all serious topics. Our news media are now in competition for audiences
and we used to have morning news shows, now we have a parade of
celebrities. The media is now sliced into hundreds of small niches, and in a
way that’s good, because you can certainly watch C-SPAN and get in-depth.
But the average person is happier to watch Oprah or something different.
You can spend twenty-four hours a day listening to country music on TV
and watching the videos, or you can spend most of the day watching Speed
Channel and keep track of the car races. So, there’s a great deal of tailoring
of the media to people’s interests. But I don’t think—and if you look at
CNN and FOX News and so on, they’re not covering in-depth topics.
News by—almost by definition is what happened recently. It’s not some—
it’s not news that the U.S.—that the world grew by eighty million people
this year. I mean, I think that’s rather startling. But that happens every year,
in spite of family planning because the—even though the birth rates are
down—but the base that we are operating those rates against is up so much
that the annual increment hasn’t changed but people are only, they are
looking at the rates so they say the birth rate is down, things are doing fine.
Well they’re not. Or they say, Well, look at the UN projections. We’ve got,
you know, there’ll be another three billion people added to the earth before
it levels out, but it’s going to level out and so we don’t have to worry about
it, it’s automatic. Well, they don’t know that unless we get going providing
the necessary contraceptive commodities and supplies this won’t happen
and that we can’t even support today’s population. What’s another three
billion poor people going to do? We’re running out of water. If there’s a
billion people in the U.S., what will happen to our food exports? Nobody’s asking those questions, unfortunately.

**Sharpless**

But then—were they ask—to what extent were they asking those in the late sixties and early seventies?

**Speidel**

I think they were asking them more. But that’s before it became a political liability to pay attention to it.

**Sharpless**

Let’s talk about that, what happened?

**Speidel**

*Roe v. Wade* happened, and that mobilized the anti-abortion lobby who label everything that has to do with population as a vote on abortion and choice. And these are one issue, fanatical people, and often times in politics that is what prevails. So, we’ve got a House of Representatives that’s solidly anti-abortion. The Senate’s more evenly divided, a little bit pro-choice now, and that’s a big handicap if we’re trying to build these programs.

**Sharpless**

Uh-huh. What did you think when *Roe v. Wade* was handed down? How closely had you been following the issue?

**Speidel**

Every day (laughs). I mean it’s just—that’s the kind of thing we live with every day.

**Sharpless**

Did you continue to be a news junkie?

**Speidel**

Oh, not quite as much, I don’t think.

**Sharpless**

But—so you were following it at USAID very closely.

**Speidel**

Well, I think we pay attention to a lot of twists and turns in population policy and that’s just one of them. Certainly that’s made things easier. And if you look at the trend line across the world—the trend line is toward more liberal access to abortion. Whatever you think about it, that’s what’s
happening. Although there’s a lot of chipping away of the rights of Roe v. Wade, and that’s a long complicated story—I don’t generally work on the domestic scene that much.

Sharpless Right.

Speidel But for example, just in the last few months Nepal has liberalized their—just totally turned around their abortion policy. They—there are maybe fifty women still in jail for having gotten abortions, that shows how tough they were—they’re still in jail by the way, in spite of the fact that the law’s repealed and they can be there from five to ten years.

Sharpless Wow.

Speidel We don’t—in the U.S. we don’t—it’s fascinating that the anti-abortion people say that abortion is murder yet there is no move to, let’s say, try 1.2 million women who have abortions every year. Don’t ask for perfect consistency on this—around this issue. They are all seen as victims as though they couldn’t make up their own minds about this.

Sharpless Okay, so Roe v. Wade was handed down in 1973. How soon did you all feel the effect at USAID?

Speidel Well, there had been some agitation about what we do all along. This was not as though it was a clear field and then suddenly it got very bumpy and rocky.

Sharpless Where was the agitation coming from?

Speidel I think the Church was a very important aspect of that all along. And then, they got more allies in fundamentalist religious leaders, and in politicians.

I’m just—I’m—again there’s also a world view that says that bigger is better
that—remember the Marxist notion about population is that there are no population problems, only errors in the method of production. That is to say the economic system, and there is a little bit of that on the capitalist side that says there is no problem with population, or jobs, or resources, it’s only the fact that we don’t let capitalism and markets work.

Sharpless That was present in Bucharest, wasn’t it—that kind of the idea that
development is the best family planning?

Speidel Yeah, that’s a somewhat different—that’s—that’s the kind of pre-Cairo litany that family planning alone is not the way to go; we should do everything. And of course, we’re—I think everybody is for development and for everything that Cairo stood for, too. Although Cairo is far from perfect, we can get into that later, also.

Sharpless Okay.

Speidel But—

Sharpless I was distracted, I’m sorry there was a sideline—but we were talking about the political ramifications of—

Speidel Well, you start out with what sometimes has been called the second least popular program that our U.S. Congress deals with, welfare being the first. First—and foreign aid being the second and huge misapprehensions about what—how much of our resources go into foreign aid. In fact, we know that people actually think we should be spending more in public opinion polls. But they think that we are spending 15 percent of our budget on it.

Sharpless Uh-huh.

Speidel When it is less than 1 percent.
The U.S., I think, misleads themselves into thinking that we're enormously generous, and when in fact we are the least generous country in the world when it comes to foreign aid.

And yet, in the early sixties USAID was doing a lot.

Well, we had—in those days, we had the combination of what, today is called, supporting assistance, that is, political money, and then those days a lot of it went into military assistance because we were in this huge competition for allies in the world with the Soviet bloc.

Yeah.

So, conservatives would support the foreign aid budget because it strengthened our allies politically and militarily and progressives—you could still say “liberals” in those days—were supporting a budget because they cared about humanitarian assistance and development, and so there was a lot more support. When communism shrunk down to a remnant now found in Cuba, I guess, and almost no place else, or at least in a modified form in places like China, a lot of the political support for foreign aid disappeared.

What do you remember about the difficulties that Rei Ravenholt ran into in the mid-seventies?

Well, I certainly remember a lot about the difficulties but how to characterize it? Rei was somebody who had his—well, let me go back a bit and say, you were asking about ideas and how we came up—how could we be creative, and I think one reason we could be is that we had the
opportunity to be and the other is that, I think Rei looked for people who were of that mindset and he was himself. Occasionally, I’ve said that Rei would have more ideas in one week than most people would have in a career. Sometimes they were flaky, but often they were interest—they were always interesting and often worth trying. But he wasn’t very tolerant of people who had different approaches and different ideas. So, he was not somebody who shied away from a fight. Now, this had one very good aspect in that moving a program which had earmarked money and essentially very little support within AID because they wanted to keep doing what they’d been doing, there’s enormous inertia. It takes years to change the culture. I mean, that’s something that really surprised me. It takes a decade before people start believing this is a part of your program and you should be doing it, whereas I would think you could turn on a dime and figure that out.

Sharpless

So, there were people within AID who weren’t altogether sure there ought to be this population program.

Speidel

Absolutely, especially when it ate into their programs that were working in education or health or loan funds for various economic development projects like roads and factories and things of that sort or—and also, when it eroded the authority of the regional bureau chiefs and the mission directors who wanted that money to do what they wanted to do with it. But anyway—

Sharpless

Because, if I’m remembering right, Rei eventually pulled in the population people from the missions, right?
Well, under John Hannah they tried a new model wherein all the pop money was—went through the Office of Population and all the program officers reported, at least had a line of reporting, to the Office of Population and Ravenholt. And, in fact, that was a very good model, I thought, because in later years if you divided the money according to these very complicated schemes that AID had where a certain amount of money goes to the Philippines and a certain amount of money goes to Kenya, well, the Philippines may have three years of population money on the shelf just sitting there, whereas Kenya may be running out of population money whereas when it was all centralized it could be divided up. Or a program might not have started in a country X, Y, or Z, so you could divert those funds and maybe those commodities, like pills and condoms, where they are needed and the central programs could be available for technical assistance, because to do development you can’t just send money. It would be nice if you could just write checks. But you also have to bring know how, or what we always call technical assistance to the field, as well. But this meant that the power relationships were such that the regional bureaus and the mission directors didn’t fully control everything. Although in a way they did, because you needed their clearance to do anything out in the field. But in the Carter administration and the new bosses that Rei had, they went back to the old pattern, and Rei was very willing to fight city hall, which is always a mistake. And that’s—you don’t win when you do that, and I think he unnecessarily took on battles, which is too bad. So, the ironic thing was that I was working for Rei for all those years and suddenly he was demoted to
become a division chief and suddenly he was working for me.

Sharpless

Let me turn the—

_Tape 2 ends; tape 3, side 1 begins._

Sharpless

Okay, this is the third tape with Joe Speidel on October the tenth. Okay, so—

Speidel

Anyway, I was just mentioning Rei’s troubles with his bosses, which I think were avoidable and—of course, Rei was trying to recruit me to fight back against them, and they were trying to make sure I was on their side and I—

Sharpless

They were who?

Speidel

Rei’s bosses.

Sharpless

But they were—okay, people within AID.

Speidel

Yeah.

Sharpless

Okay.

Speidel

His immediate superiors. And I said, Sorry, I’m going to be Sweden, (laughs) I’m neutral—nobody is going to like me for this, but my job is to run the program as well as I can, and I think they probably all, somewhat grudgingly, respected that—not to get in the middle of personality hassles, which was a big piece of all of this because the differences in strategy between what Rei wanted and his bosses were actually fairly subtle, and not worth fighting over, in my opinion. And we kept on getting a lot done. And as I mentioned earlier, Rei was pushed down to be a division chief and that’s—I was, became the acting office director, which I did for almost five years. And—but that went okay.

Sharpless

Why were you acting director for five years?
Well—

Is that indicative of the political things—things going on?

Yeah, a bit. During all this hassle they probably couldn’t confirm me as the office director and then, when the Reagan administration came in they couldn’t do it then, and I was tainted as somebody who was pro-choice so they didn’t want to raise that issue. But it didn’t matter because they—they actually abolished the position of office director so there wasn’t even the possibility that somebody would—of course, they later reinstated it, but for most of that time it was clear I was running the office. I didn’t care about the title that much.

So, Rei left—and when did they abolish the title? And who is they?

Well, the person—it was AID personnel office. They needed the slot for something else, because there is always a huge shortage of personnel slots. I mean, that doesn’t make much difference in the grand sweep of things.

It doesn’t but it’s really interesting.

Just a little indicator of how people do things at times.

Yeah, but you kept on running the program.

Uh-huh. Yeah.

And so, what were some of the good things you were getting done?

Well, I don’t—the long list of things I described span both my tenure as head of the research program, as the other titles that I had—

Now, when you started heading the Office of Population, what other units were there under the office of population besides research?

Let’s see if I can tell you systematically. We had a demography program. We
had a demography social science, where we actually transferred some of the projects we started in research to them; we had a—research was number three on that list; we had a communications in training; we had a family planning services. What else did we have? Let’s see if I can think of what the other elements were. I think we started out having some of these separate and then put them together so I think by the time—during most of my tenure as office director we had just the four divisions.

Sharpless
And how challenging was it going from being the chief of one of those to being over all of them?

Speidel
It got to be less fun. I don’t think it—because I was spending more time educating my bosses, which is something that one always has to do. And I am sure my employees feel the same way about me—and so, you’re right at the interface with the politicians. So, you have to spend more time looking up at them, or an equal amount of time, and maybe less time looking down at the program. There is always a trade off between how much time do you spend looking up, and how much time do you spend looking down. So, that was just—in the past, I could spend more time looking at the program, and I had to spend more time looking at our overall office situation and circumstances. And this means going to meetings, preparing memos and there’s—you know, sometimes preparing Congressional testimony, worrying more about overall budgets, personnel issues, there is the buck stops here, kind of situation. So, if there’s sixty people in the office, the easy ones are taken care of by somebody else and the tough ones end up on your desk. But that’s okay.
What happened with the elections in 1980?

With Ronald Reagan coming in? Well, one thing we'd been doing quite a lot of research on abortion technology. Even though the Helms Amendment said we couldn’t provide abortion methods, we still did research. We had to stop that with Reagan. We had—they implemented something that they called the Communications Review Board that looked at all publications—they wanted to censor them. And it was supposed to be looking at all AID supported publications, but somehow they only applied it to the population ones, and they wanted to make sure we weren’t saying anything good about abortion in them.

Are we talking about on a global scale?

AID supported publications, yeah. Well, it was unworkable but they did defund a couple of publications.

So, if somebody wanted to publish a pamphlet in the Philippines it was supposed to go by this board?

In theory. In practice, it was unworkable, but—and really didn’t, but some of the high profile things got cut out.

What did you say to your staff while this was happening?

Well, I don’t know, gallows humor is always in style, isn’t it? (laughs) Yeah, we held up quite well and just did the best we could. But it was less fun with the support but it didn’t bother me much, really. For one thing, many of the—they put in watchdogs, and many of these people—it took them months, if not years to figure out what was going on.

So they weren’t terribly effective?
Speidel: Well, the other thing I would say is, people tend to worry hugely about policy—Oh my god, the policy is bad. The Mexico City policy came in, and I had just left AID when that particular thing came in, and people agonized endlessly over it and I keep mentioning that if you have bad policy you can still get a lot of good things done and work around it. If your money’s gone, you’re dead. You can have perfect policy and if you haven’t got a penny to spend the program’s dead. So focus on what matters.

Sharpless: So, despite—despite the policies of Mexico City, the money kept coming.

Speidel: Uh-huh. Well, in the early—in 1985 the Congress was so irked at that they actually boosted the money up a lot; it was democratically controlled then, however. But as I say, I had just left AID and was working in PAI trying to explain everything to the press day after day, at that point.

Sharpless: Well, what else do we need to talk about during your years at USAID? I know there were extremely interesting—

Speidel: Well, I think one of the overall things to comment on—and this worries me about government—is that when I started out we could do things in a very quick, stream-lined way and by the time I left it was taking weeks and weeks because of unnecessary red tape. And you worry about the effectiveness of government—all government programs if that’s their evolutionary path. And I—at one point I thought about bureaucratic life cycles where you start out, in infancy where you’re kind of confused and don’t have your act together and then you have a rapid growth curve and you’re effective and efficient and then you reach a kind of senescent phase where you start to be hobbled by unnecessary burdens and restrictions. And how to avoid that
life cycle is a challenge. I mean, AID is still doing good work as far as I can
tell, but it’s sure got a lot harder and a lot less fun over that fourteen year
period. And part—and that wasn’t all the political climate. I think most of
the wounds that AID suffered were self inflicted. They were always
complaining about all the reports for Congress and all this and that but in
fact, most of the problems we suffered were ones that AID—it was like
preemptively or prematurely, or whatever the right word is, decided that
they would be cautious or careful. A lot of it was to avoid criticism.

**Sharpless**

These were people in population or people above you?

**Speidel**

No, no. Well, the thing that happened during my period at AID is that they
kept rewarding people who were generalists and program officers so that
the proportion of people who were experts in things AID was trying to do,
whether that was education or population or environment or agriculture,
they—their numbers and clout diminished and the people who kind of
worked this complicated system and making it ever more complicated got
more and more of the top jobs and more power. And that—sure you need
some people to keep a system running, but they should serve the system,
rather than the system serving them. And one aspect of that is if you don’t
understand an area, you’re very nervous about it so you need about twelve
people to sign off on every action because you haven’t got confidence that
you know what you’re doing. And so, effectiveness of AID declined as a
consequence of that. Once again, it had to do with who was minding the
store in terms of personnel. And I really think one lesson that I learned at
AID, and still believe, is that these organizations are people—they’re just
people. And if you have good people, good things happen. If you have less good people, it just doesn’t go as well. And I felt one of my biggest jobs at—in the Office of Population was guarding the gates to bring people in. And my successor, Steve Sinding, told me, he said, “You know, your best legacy here is the staff.” And good people make you look good anyway. If you’re just—self-interest, (laughs) you know, as so many people are so worried about, Oh, my god, this person is smarter than I am—I’m going to look like a dunce. Unless you’re a total dud, that’s not going to happen.

**Sharpless**  
How did you find these good people?

**Speidel**  
Oh, god—agonizing. I would sometimes leave slots open for a year trying to find the right person. And I also—I sometimes describe it as stockpiling people. Just—you notice somebody who’s good, or somebody who’s a comer, or somebody who’s very young who is going to be coming along and then just keep in mind when you have a place you can put them, to grab them. And another thing I have done over my career is—I mean, that’s one thing I care hugely about, and so when slots come open someplace—there’s a headhunter firm or the management is looking, or the board of directors is looking, I’ll weigh in, and sometimes I’ll get on an airplane and fly to go see the decision makers because it’s—you know, if they’re putting a new director of the population or the health program in a major foundation, it’s worth the effort. And so, there are a lot of people around this field, this population field, where I’ve at least endorsed their candidacy and have a pretty good track record of people getting those jobs, probably because I’ll stick with it. Headhunter firms typically will call up and say, Do
you have any ideas? And people will say, Yeah, yeah I have these three people, goodbye. And I'll give them a lot of time, energy, and effort. I would say just as an aside that we've all made mistakes in hiring and I've made a few. And I think the errors that one makes usually have to do with not spending enough time investigating and you can't—letters are useless these days. Nobody will put anything bad in writing, so you have to get on the phone, you have to push—Okay, what is this guy or this woman's weaknesses? Tell me about it—and just sit there and listen and try to find out what you can. And unless they're rated a superstar, forget them.

Sharpless: What else do we need to talk about? We could hold it until tomorrow if you want to, from your time at AID.

Speidel: What else at AID?

Sharpless: Do you want to sleep on it, and we could start tomorrow?

Speidel: Well, we could talk a lot about bureaucratic nonsense, but I think I have given you the essence of it, and I don’t think it’s worth getting into additional details of things that might have gone awry, or wasted a lot of time.

Sharpless: Well, why don’t we stop for today and we’ll pick it up tomorrow with your decision to move to PAI.

Speidel: Okay.

Sharpless: Good.

*end Interview 1*
Interview 2

Today is the eleventh of October, 2002. This is the second oral history interview with Dr. Joseph Speidel. The interview is taking place at the William and Flora Hewlett Foundation, 2121 Sand Hill Road, Menlo Park, California. My name is Rebecca Sharpless. Okay, Dr. Speidel, when we finished yesterday, you had mentioned some aspects of the work that you did at USAID in population, the Office of Population, and why the program was as successful as it was during the years that you were there.

Well, like all successes, there are probably a lot of factors, so then it’s hard to disentangle them all, in terms of what mattered the most. But I think it had very single-minded leadership with Rei Ravenholt at the helm most of the time, but those of us who worked with him, in my case who succeeded him in directing the program, we had a shared view of trying to do a few things well rather than trying to do everything. We were working in an arena that was quite neglected, and we knew that most of the world wants to have control over their own fertility and take advantage of this health and economic benefits that that brings. So, it certainly helped that we were working in something that, in general, people—on something that people wanted. Our job was to make it available, and it’s not that expensive. If, for example, everyone in the world had really wanted to have seven kids in their lifetime, it would have been a much more difficult challenge to somehow convert everybody to the small family ideal because the future of the world’s ecology and health and economic welfare depended on that. But we didn’t have to do that. I think we also had substantial amounts of earmarked
money thanks to Congress and thanks to well-placed individuals who cared about the program. And there wasn't a huge amount of opposition. There was general agreement in the early days. So, we had the funds, we had strategic vision, and we had the technology. And of course, we helped build—develop more technology. The technology makes it simpler and easier to do the job. We also had a kind of lean, overworked staff, and I think it's probably better to have a small staff that's so stressed they can't do trivial, peripheral things. They can only do the important—or at least are more likely to do the important. If you look at the bureaucracies around the world today that have been created by the UN, organizations like the World Health Organization, they spend a huge share of their resources on their staff, giving out advice, which is good, but they really don't have a lot of money left over to run health programs. And of course, they say, That's not our job. In our case, we had money to actually help run the programs, and in the early years, we could put in two thirds or almost all of the funds. And in fact, to this day, there are many family planning and reproductive health programs in developing countries, especially in Africa, which are essentially, totally funded by donors because the governments don't have enough commitment to put their scarce funds there. We were trying to do something that wasn't enormously expensive. A dollar or two per capita, per year, and you can run a good family planning program. It's not as expensive as general health which—health is open ended. There's no end to what you can do as we discover in this country spending about a trillion dollars a year on health with less than perfect coverage of everybody in this country. So that's—I'm
sharpless

One thing I’ve wondered over the months that I’ve been doing these interviews is, to what extent is reproductive health, we’ll call it, not taken as—maybe not taken as seriously because it’s perceived as a woman’s issue? Is that anything in the ballpark?

speidel

Possibly. But I think it’s much more complicated than that because men’s reproductive health isn’t really considered. And if you look at all of the—the outcome of the Cairo Conference where there’s endless talk about the importance of reproductive health and much less talk about population growth—they don’t have men’s reproductive health in mind when they’re doing that. They’re not talking about prostate cancer or even men’s sexually transmitted diseases. So, it cuts both ways. I think the most important issue is that when you’re dealing with human sexuality, you’ve got a lot of taboos, and you’ve got issues that have to do with who’s in charge, parents or children. You have issues about who’s in charge, the individual or the church or the state. You have ambiguities about religion and morality—some religions who oppose and say it’s sinful to use birth control or sinful to use condoms to prevent sexually transmitted diseases. You’ve got all the taboos about teenagers and young people having sex outside of marriage. You even have issues about national power. You know, some people say more people is—it’s good to be big and strong, even though that—and with today’s med—military technology, size is certainly not the arbiter of strength. So, the whole population arena is fraught with all kinds of other implications. It’s
not like other diseases. And back to the—your question, yeah, to some extent it is a women’s issue, so it doesn’t matter. There’s also the notion that, well, you know, pregnancy, childbirth, that’s all natural. We don’t have to worry about that. That’s not a disease, and the medical establishment worries about sickness and disease. In fact, when—

**Sharpless**

Even though the birth process was medicalized over the years.

**Speidel**

As well it should be, in spite of some ideologies to the contrary. It’s certainly much safer, and I mean, it used to be major threat to women’s lives. Today, it is not.

**Sharpless**

But it’s not a sickness.

**Speidel**

It’s a life-threatening event, especially if you’re not near a hospital, a blood bank, a bacteriology lab so you can detect and treat infections, or if you have obstructed labor, you need surgery to get a cesarean. All of these things that we take for granted and are reasons why maternal mortality, death in childbirth is very low in the West and very high in other countries. Of course, if you don’t get pregnant, you don’t run that risk at all, so family planning is a preventive health measure in that regard. Again, that somehow eludes people who are worrying about health and worrying about maternal mortality. They often just think about, Oh, we’ll have better hospitals, rather than thinking, Let’s have people have the number of pregnancies they want, which is about half of what is happening around the world.

**Sharpless**

Now, we talked yesterday about the bureaucratic things that you encountered when you were at USAID. Besides learning the nature of bureaucracies, what were the most important things that you learned while
you were in the Office of Population?

Speidel  
Stumped.

Sharpless  
Okay. One of the times I wish we had video to record that face. (laughter)

Speidel  
The most important things I’ve learned. Well, they are several. One is that nothing happens instantly. That one has to have a considerable patience, and in fact, something like contraceptive development can seem glacial in its speed, but that when you look back over ten or fifteen or twenty years, you see that there’s been enormous change and enormous advances in the technology. I think the same is true for programs and all adoption of medical advances. It just takes time for the word to get around and people to recognize it’s in their interest and it’s safe and—we’re quite impatient especially, I think, in the U.S., and we expect things to happen instantly, but it just doesn’t. But one of those things that—I think I mentioned this previously—was that the slowness of institutional change, you would think, Oh, well everybody would recognize that working on population and reproductive health is a good idea and ought to be part of development assistance programs. Not true. It took a long time for that notion to sink in, and that’s why, in the early years, having earmarked funds was so important. I think the notion of having a small dedicated staff and the continuing importance of the quality of the people you have working is important. Another thing I think we learned was that to have people out in the field, where the action is, is absolutely essential. For years, the World Bank style was to send missions out. With a lot of people, a lot of very bright, important people, the country would roll out the welcome mat because the
World Bank has the largest amount of development assistance and therefore, they’re very important. But it’s easy to set up a kind of Potemkin Village that they can see and then, if they go back to Washington and don’t come back for a year, well, things can go off course pretty quickly. We may not have had the best and the brightest people in the field at all times, but we had them there, so that made a huge difference, our mission system. It’s like expecting your kids to play peacefully and constructively without any parental supervision. You’ve just got to get out there to the field and see what’s going on. By the way, this list is—that I’m giving you is something that is—just the things that spring to mind.

Sure. And that’s the beauty of the transcript because you can add to it and amend it if you choose to.

(laughs) Well, I may not. I may not have anything else to say. But how—what is truly important in all of these things, it’s hard to say. One of the characteristics of this field and, I think, other fields where people are very idealistic, is that we do get some extremely intelligent, well-informed, committed people, who are willing to devote enormous energies to making something good happen. And those are nice people to work with also. So, you’ve got a lot of talent focused on the problem and good things happen when that occurs.

How did you decide to move into Population Action International?

Well, I was in AID during the first part of the Reagan administration, and the policies shifted to the right and were very inhospitable to our work. And there’s some people who think that that’s why I left, but in fact what was
stifling me was the increasing bureaucracy year after year after year. It only went one direction, it just got worse. Nobody ever repealed anything. They always just laid on more and more requirements, and it became much less fun and much less important that I be there in a way. And I decided it was time to go work on the policy side and try to get more financial resources into the field because we were just kind of treading water. And I used to describe it as, okay, I have this pie of money and it’s the same size pie every year, and so you slice it a little tiny bit differently, but you’re not really making much difference. So, that was the main reason I left.

Sharpless
Was it because you had these things in place like FHI and—

Speidel
Right. We built the institutions. All they needed at that point was money, and we weren’t getting them more money. We had the strategy; we had the institutions, but we didn’t have the fiscal resources. And so I thought it was time to go out and try to work on the policy side. I think that—it’s funny. In one level they were not treating me well, on another level they were, because I was a member of the senior executive service, and they could have transferred me in one day to another program. They could have said, Okay, tomorrow morning you’re starting in as the chief medical officer for the Africa bureau working on health programs rather than staying in population because the far right was after me because I was known to be pro-choice.

Sharpless
When you say they were after you, what do you mean?

Speidel
There was just criticism of the fact that I was there. But—

Sharpless
By Congress, by interest groups, by—?

Speidel
By interest groups, by anti-abortion activists, and there were people within
the administration who—and in AID who were critical, also. But my bosses were—even though they were Reagan appointees, I think were, generally speaking, fair minded people. I do remember one slightly amusing moment when they asked if I was interested in going back to law school—that would have gotten me out of there—(laughs) out of the office and out of their way, but I wasn’t.

**Sharpless** Well, that seems like such an odd question. You say, Thank you, I already have one professional degree.

**Speidel** And I didn’t need any more, although I think studying law would be a lot of fun, actually.

**Sharpless** So, how did you decide to go to Population Action?

**Speidel** That just seemed like the organization that had the most clout in terms of the big picture because they were busy working trying to move the whole government, and governments around the world, to put more attention, more commitment, and more resources toward the population issue. And so, I joined them as the vice president and initially spent a lot of time on fundraising, and I guess I learned some things about raising money there, just because I’d never done it before. I think I can do everything else that seemed relevant to that program, but—

**Sharpless** What were they raising money for there in 19—that would be 1983?

**Speidel** Right. This was just to support the staff and to support the programs which were fundamentally to do research that based—which was really secondary analysis of issues and to put it into terms that the public could understand, and equally important, get the message out to the public and to policy
makers. And so, that’s what I spent the next eleven years doing. During my stay there, we about doubled the budget to something like 4.5 million dollars, and I know we had a very small base of donors, and they were all private donors. We had no government money because we were busy criticizing government or trying to affect government. In fact, at one point, we spent a lot of energy defending the UN Population Fund, and we decided we would not accept any more money from them. Of course, that was easy for the rest of the staff to say, in a way, because they were not raising the money. But we dropped our support from the UN any way, and replaced it with foundation money. So, we—when I started out, I think we had something like thirty-five different foundations, and by the time I left, we were up to about eighty-five foundations which is a lot of foundations to get a four and half million dollar annual budget. The main thing we all—

**Sharpless**

I want to hear that again—how many million dollars coming out of eighty-five sources?

**Speidel**

4.5 million.

**Sharpless**

Wow. That’s a lot of hustling.

**Speidel**

Luckily, I—

**Sharpless**

And I don’t mean hustling negatively. I mean hustling as in moving fast.

**Speidel**

Well, the—in the early years, I was writing all the grants myself, and then brought in a good grants assistant, Sharon Tarbell. And then a director for development, Patty McGrath, and Patty is some kind of a genius. She’s a Harvard Junior Phi Beta Kappa, like maybe it was Radcliffe in those days, but—and a Marshall scholar, and an anthropologist, and a brilliant writer, so
my job became a lot easier when Patty came on board to essentially crank out the proposals and the reports that were required for everybody.

Sharpless  
Is that one of those personnel accomplishments that you were talking about yesterday where you look hard and nail the right person for the position?

Speidel  
Absolutely. You can always make your life easier if you get the right talented person in to help you, and Patty definitely was. You were asking about lessons learned at AID, well, one of the lessons learned at PAI was that to raise money, you have to be a good listener. You have to figure out what the donor wants to do. It's a big mistake to dominate all the time, telling them about what you care about rather than figuring out what they care about, and how what they're interested in fits in with what you're doing. And that means you can’t just have a cookie-cutter kind of proposal that goes off to everybody as well. You have to figure out what appeals to them. Although we did have—we didn’t have an overhead rate at PAI. We basically said here’s the program, take it or leave it. We costed everything, and that made it very clear where their money went and also was a little different than the way many organizations worked. The fact we didn’t have government money meant we could do that, and—

Sharpless  
So, how did you pay the staff?

Speidel  
As generously as we could, actually.

Sharpless  
I mean, was it written—if you weren’t—you were or were not writing it under the proposals?

Speidel  
Oh, it was all written in. As I say, all expenses were budgeted and written in. And in general, we just described our program, and we didn’t sell off bits
and pieces of it except for the environment. And that was an innovation that I started when I was there, that we would work on population and environment relationships, and that wasn’t being done very much at that time, twenty years ago almost. And that turned out to be a big seller with foundations. They—it’s an obvious connection, and to spend more time publicizing that relationship was something that appealed to them. And it certainly helped us with our fundraising, and another thing we tried to do is to raise the entire next year’s budget the year before, so we knew exactly where we were. We didn’t always succeed with that, but we did, often. And having a year’s worth of money around was like an endowment, because we could collect the interest on that so that was another goal. Every now and then a foundation would say, Wait, you’ve got plenty of money, you don’t need us, but we could usually sweet talk our way out of that somehow.

**Sharpless**

On your vita, I think, there are several major foundations listed, and nobody in this project has really talked yet about the roles of the foundations in the population movement. Could we take a few minutes and talk about that. Ford Foundation, for example, what has its role been in the population movement over the last forty years?

**Speidel**

Well, before government got into population work, private foundations were supporting it. The Population Council, I think, just had their—hm, let me see if I can think of this. I think they just had about their fiftieth anniversary. We can double check that figure. And they were founded by John D. Rockefeller III. The Population Crisis Committee, as Population Action International used to be called, was essentially founded by Bill
Draper who was the leader of that Eisenhower appointed trip around the world to look at what would help the economies of poor countries, and he got private philanthropists to support his committee as well as supporting it himself. And so, we had early support from Ford, Rockefeller—and not every part of Rockefeller’s Foundations—for example, the Rockefeller Brothers Fund does not support population work, but the Rockefeller Foundation, per say, did. They’ve changed their policies a bit to be more health-related today. Ford invested heavily in contraceptive development work early on, and there are a number of individuals who gave in this particular area, like Bill Draper did. Draper also was very instrumental in convincing Congress to boost funds for NIH to do population research, both contraceptive development and social science research. He also was instrumental in expanding the International Planned Parenthood Federation and instrumental in all of that earmarked money for AID. So, Bill Draper is one of the quiet heroes of this whole movement, and he worked very closely with the politicians that I mentioned earlier in our conversation.

And—

**Sharpless**  How well did you know General Draper?

**Speidel**  Fairly well. I remember traveling with him right when I joined AID in 1969 or ’70, and we went off to India, to Calcutta and back to New Delhi. And Bill Draper was somebody who I have often said taught me how to be an efficient worker. Not that I’ve ever emulated that, but at least I knew how. (laughs) Because he would work every minute of every day. I’d get on an airplane and say, Fine, I’ll read my book or magazine. Draper would be
working. I’d get off the plane, and he’d immediately head for the phones. In those days—if he’d had a cell phone, that would have been going constantly—and there he’d be on the phone trying to make something happen. Once again, I’d be happy to go look for a Coke, but that was his style, enormously efficient, and he was a man of enormous charm. John D. Rockefeller III used to tell a story that when the phone rang at two a.m., I didn’t have to say, Who is it? I said, Hello, Bill (laughter) because it was Bill Draper on the line. Nobody else would have dared call him up unless somebody died, and—but he was such a nice and charming man. You couldn’t get mad at him no matter what he did, and he was a true gentleman, kind of an amazing person. So—

**Sharpless**

He pulled foundation money in early—

**Speidel**

Early on, right. And he had—by the time I got to PAI, he had died, but he was—

**Sharpless**

How much was his spirit still around?

**Speidel**

Well, we had a number of volunteers that he’d recruited. Some were effective; some were not so effective, to be honest about it. But we kept a number of volunteers, for example, Bob Wallace, who actually died yesterday or the day before who was Henry Wallace’s son, and was a multi-millionaire. You know, he had a hundred million plus dollars based on the hybrid seed corn company that his father had founded. And Bob Wallace was a very unassuming person, and it was kind of the same Draper spirit. He came to work every day, brought his peanut butter sandwich in a brown bag, drove an old Oldsmobile station wagon—very modest fellow, not that he
wasn’t beyond going off bird watching in New Guinea, things that might have cost a few dollars. But in general, he was somebody who could have been spending all his time at the country club, but was there working with us day after day. And he put funds into what we called the special projects program, maybe between half a million and a million dollars a year, and they took on extremely controversial, but highly leveraged activities. I used to chair the review committee, when I was president of PAI, so I wasn’t picking out the projects, but we would review them, and—

**Sharpless**

Give me an example of something highly controversial.

**Speidel**

Well, one of the first—he and his wife—Gordon “Gordie” Wallace, put money into stopping what was called female genital mutilation in those days. I guess it’s now called female genital cutting today, or female circumcision was the earliest term for that. And just efforts to stamp out that practice which is a barbaric and unhealthy practice, were something that nobody was really working on. He supported training for the MVA procedure, the medical vacuum aspiration procedure or the menstrual regulation procedure. Again, working in abortion, working on FGM, that female genital mutilation, these were areas where the special project fund would put money into, and probably you couldn’t find anybody else who’d step up and do that.

**Sharpless**

Interesting. I need to turn the tape.

*Tape 1, side 1 ends; side 2 begins.*

**Speidel**

—better today and we sound better, I hope.

**Sharpless**

I think I’m better, too.

**Speidel**

I haven’t taken the antibiotics. I got them, but I think I don’t need them.
Okay, you were talking about the volunteers that Bill Draper had brought to PAI.

Yes, a number of people who—like Ambassador Ed Martin, let’s see—well, Phyllis Piotrow herself served and still serves, I guess, as the corporate secretary. There are other former general senior executives. For example, Marshall Green was ambassador to Indonesia and deputy assistant secretary of state, or maybe assistant secretary of state for Asia [assistant secretary for East Asian affairs]. That’s not the exact title, and he came and worked with us—very erudite, funny man. So, we had some people like that who helped us get access to the right places within government and were willing just to work on whatever they, or we, felt would be useful. And of course, that’s a way to keep your overhead down if you have smart, hardworking people who don’t cost anything. These were people retired on government pensions and didn’t really need the funds. Bob Fearey was another one of those folks who worked as an employee but took probably, you know, half pay because he didn’t really need it that desperately.

I think the other thing that we did at PAI during my years is that we got a lot more professional in terms of using population sciences, and I think we were more creative at getting messages out. We began to develop wall charts that people could put up, and they were very colorful. They were just one page, and they would tell a story on a particular topic. And we also began to work much more closely with the news media.

And what were the wall chart—give me an example of what a wall chart might be on.
Speidel: Well, one of the early ones was what we called the human suffering index, and we looked at a lot of issues about incomes and health indicators. And we would always tie something like that back to demography or access to birth control. And then, we would look at, for example, how people were doing in terms of contraceptive prevalence in their country and how that compared to the number of methods of birth control that were available. We would look at issues like women’s education, the gender gap between boys and girls in education. We were one of the early folks to document that, and then we made an estimate of what it would cost to close the gap. And then, looked at what it would cost to close it ten years later with population growth, and of course the price would go up by billions of dollars, which shows how an investment in family planning could help—make it possible to improve education. One of the things we did throughout the whole period that I was there was damage control because there were endless attacks on family planning. The first thing that happened was the Mexico City Conference on Population and the Mexico City Policy which said that a foreign organization would lose its eligibility for AID support if they used their own money for any abortion related activity. And it’s something that would clearly be unconstitutional in the U.S. It would be like saying we’ll cut off your social security if you vote wrong in the U.S. It was basing access to one program on a freedom, but overseas—and this was tested in the courts; the president has a lot of latitude to run foreign policy anyways he wants, and the Constitution does not protect people overseas. Sorry, they aren’t afforded those rights that we have. So, the Mexico City Policy meant that some big
organizations like the International Planned Parenthood Federation and Family Planning International Assistance had their funds cut off, but that’s the kind of thing that we would publicize and embarrass the administration over. And my deputy during those years was Dr. Sharon Camp, who was one of the most brilliant and energetic—men or women, it doesn’t matter. She was just an incredible worker who helped develop all of these projects that we would use for news hooks. And she also either represented us on Capitol Hill or directed the people who were up there, on Capitol Hill. So, we were quite influential in terms of damage control.

Sharpless

Yeah, let me back up and ask some real specific things. For example, these wall charts, who’s the target of those? Where did you send them? How did you—

Speidel

Um, the target, in general, was media because we knew that a story back in, say, a congressman’s hometown newspaper would mean more than an article in the Washington Post or the New York Times. Not that we didn’t care about those, but we needed something close to home because the first goal of everyone in Congress seems to be staying in office. And so supporting them when they had good policies and embarrassing them when they didn’t was one of the things we could do through media. And it’s a lot more effective if—we have an editorial board briefing and an editorial speaks out on our issue, rather than if somebody had scads of millions of dollars and bought an ad the way Mobil used to do about what a great company they were and such friends of the environment and all. Who paid for the ad, you know? It was a little stretch of credibility when that happened. So, we had what is
called earned media, which means that the media’s free. That’s a strange term, but anyway, we had lots of earned media. We also did analyses of key countries. We looked at China, India, Pakistan, and laid out a prescription of what might—should be done. We did analyses of major institutions like the World Bank, and pointed out in particular in the case of the World Bank that how—what a poor job they were doing in reproductive health programs.

**Sharpless**

Was this—this was at—this is with or without the World Bank’s permission?

**Speidel**

We never asked them for permission. We never asked anybody for permission. We just did it. Sometimes, we would—in the case of the bank, we didn’t even let them review the manuscript, although sometimes we did just to make sure we didn’t have any errors. Come to think of it, I guess we did ask them. After it was written, we asked them to take a look at it, but we usually had friends within these institutions who could guide us, so it was sort of helpful.

**Sharpless**

Let me make sure I understand. For example, if you’re going to look at the World Bank, then you go to one of your funders and say we want to look at the World Bank, please give us the money to do it? No.

**Speidel**

No. We didn’t fund projects at PAI. It was kind of, Here’s our program. Here’s what we’re going to do year after year. We are working on Capitol Hill; we’re educating the public; we’re doing research, and if you want to support us, that’s great.

**Sharpless**

I see. Okay.

**Speidel**

We didn’t say give us twenty-five thousand dollars for a study of the World Bank. And then all the accounting issues of keeping track of how that money
was spent would have driven us nuts, so we didn't do that. But we did look at institutions that mattered, like the World Bank, like AID, and gave our prescription, and we heard occasionally that—I mean, the president of the World Bank was quoted when they were doing some policy that apparently one of the first questions is, what's PAI going to say about this? So, we know we got to them a bit because we did have very good ties with the media.

**Sharpless**

Talk a little bit about those relationships with the media. How did you grow those?

**Speidel**

Well, one way we grew them is that—like Patty McGrath in development, Sally Ethelston was one of these very intelligent, totally dedicated workers who worked full-time in developing media relations. And I'm giving you the lessons learned at PAI as we go, so you don't have to ask me at the end.

**Sharpless**

Sure. Okay.

**Speidel**

One of the lessons that we learned was that your credibility is critical. You can manipulate or deceive the media once, and after that, you're dead. So, we tried to be not a group frothing at the mouth and screaming about our special interests, but one that was absolutely reliable with objective, professional data about population issues. And I think we succeeded largely, even though we had a point of view. I don't know, objective with an attitude perhaps. But—so we had credibility, and one of the things that helped me at least, just since I'd been working in the field forever, it was hard to stump me when they asked a question. We could probably—we could be full service information providers, whatever they wanted to know. And I think
that was helpful in doing the media work. In fact, I used to like the question
and answer part better than when you’re sort of giving the lecture and have
to create all the energy. And I don’t think I’m a natural at that, but the Q&A
part is kind of fun because then you can respond to somebody’s questions.
But anyway, certainly one of the lessons we learned was that you have to be
accessible, you have to be accurate, and you have to be quick. And we were
able to do all of those, and we got good treatment as a result.

Sharpless

What were some of the major—when you talked about family planning in
general, were there specific topics that you were specifically trying to educate
on in those years?

Speidel

Well, one of our constant themes at PAI had to do with resources, financial
resources. And that’s something I’ve been interested in for a long time. I
mean, that’s what makes programs work is whether you have the money to
pay for them. Certainly skilled personnel are important, but if you have
enough money, you can develop those over time. It doesn’t happen instantly.
So, we spent a—before the Cairo Conference which was in 1994, we spent a
lot of time working with our colleagues at UNFPA who were the secretariat,
and it was an official UN conference. Working with them to come up with
prescriptions about how much money was needed, and that was the first
conference where, in the body of the document, the countries actually put a
price tag on their work. They didn’t cost everything, and their estimates for
family planning were quite accurate.

Sharpless

Were?

Speidel

Were quite accurate. They said we needed eleven billion dollars a year by the
year 2000. And then, they had estimates for safe maternity and AIDS prevention which were based on rather flimsy data, but at least this was the first time that the UN and the international community had actually put a price tag on one of their typical—

Sharpless

(pause in recording) Okay, I'm sorry. Before my coughing fit, you were talking about the UNFPA costing things out at Cairo.

Speidel

Um-hm. Well, we were one of the behind-the-scenes groups pushing very hard to—and working with our friends there to make sure that the UN conference just didn’t come out with pious words but actually said, Here’s what we have to do to make them a reality. UN conferences endlessly have very broad goals, and it’s very easy for these things to be just words on paper and therefore, not totally meaningless, because they do often help set better policies and better goals. But without the resources to make it happen, it becomes an unrealized vision, and that’s still the case with Cairo. We’re way under-funding what we said was needed, and I think they estimated like that $2 billion a year was needed to prevent AIDS. Well, the current estimates, most recent ones from the UN, were $10 to $12 billion a year, so it was a vast underestimate for AIDS.

Sharpless

Eight years ago.

Speidel

Uh, right.

Sharpless

Cairo. Now, when did PAI first start thinking about AIDS or to what extent did PAI think about AIDS?

Speidel

Um, well, we really didn’t focus that much on AIDS except to try to make sure that AIDS and other reproductive health programs were integrated, and
to this day, they’re very poorly integrated. This is one of the unmet challenges. I think, and I’m quoting Dr. Malcolm Potts when I say this, that AIDS is the public health failure of the twentieth century and rapidly becoming a public health failure of the twenty-first century. But our focus was not on AIDS, except to the extent that we felt that there should be synergies between AIDS control and other STD, sexually transmitted disease or sexually transmitted infections, and family planning programs because they’re the—target is essentially the same age, reproductive age men and women, and many of the technologies are the same. And certainly, one of the keys to both programs is adequate information and educational efforts. And so, if you’re teaching about reproductive health, you need to talk about diseases and conditions like pregnancy. But one of the problems we’re facing now, is that countries that design health programs do it based on disease burden, and pregnancy is not considered a disease burden so that’s not on the playing field. Once again, that—I think, demonstrates how our little schemes sometimes fly in the face of common sense.

Sharpless: Yeah. You could just—when they’re all outcomes of sex.

Speidel: Um-hm. And safe sex should have to do with both pregnancy and other unwanted, unintended outcomes.

Sharpless: Um-hm. Interesting.

Speidel: So anyway, I think that the PAI years were a time where, on one level, we had some successes. We helped increase the budget for foreign aid quite substantially in 1995.

Sharpless: Through your lobbying efforts?
Well, we were—I don’t think anybody could say we did it alone. We would never claim we did it alone, but we were certainly out there, with our allies and colleagues pushing very hard. And I think we also helped fill the gap between the professional population expert who writes for the scientific journals and presents their data to their colleagues at professional meetings and our audience was much more the public and much more decision makers. And so, we tried to bridge that gap.

Which media outlets did you find most useful?

Well, probably because they were right there, the *Washington Post*, and of course, that’s the paper read by Congress. We also began to support programs overseas with small amounts of technical assistance and money, and after I got to the Hewlett Foundation and had access to a lot of money, we really built a network of advocacy groups in Europe, Japan, Canada, Australia, New Zealand, all the donor countries. And that’s part of the Hewlett story, which we’ll get to in a few minutes.

Yeah, absolutely.

But the reason we—we were trying to do a little bit of following the first rule of investing and that’s diversification. And in fact, more donor assistance comes from Europe than comes from the U.S. It’d be awfully easy to spend all our time and energy working on the U.S. Congress, but we had—we were fighting the anti-abortion movement in doing that. And they, quite frankly, had more clout than we did. Don’t ask for logic; ask for political clout when you have the religious right seen as a key constituency of the Republican Party. So, we decided we really needed to work in venues where there wasn’t
a lot of opposition, which is in Europe, and try to get them much more on
board. And we’ll come to that story when we get to the Hewlett Foundation,
which we can go to any time you want.

**Sharpless**

Well, what else about PAI do we need to talk about? What are you proudest
of in your time there?

**Speidel**

Well, I think we—at the beginning of our time there, we were able to work
getting our work done with our friends on Capitol Hill behind the scenes,
and when we lost our traction in that regard because the White House was in
the hands of the Republicans, who were much more interested in the anti-
abortion lobby than solving population problems. Although, it depended on
who was president, because as I mentioned earlier, when Nixon was in the
White House, he was extremely supportive, but certainly Ronald Reagan was
not. Although at one point, very early on, they tried to totally zero out the
foreign aid bill for population, and Vice President George Bush helped
prevent that, actually. Later on, he wasn’t much help, but I think at that time
he was. And I had mentioned him earlier, when he was in the House of
Representatives, had been a leader in this area.

**Sharpless**

He wrote the foreword to Phyllis Piotrow’s book.

**Speidel**

Um-hm, right. Anyway so transforming ourselves from a quiet, behind-the-
scenes organization to one that was—worked in the way that we had to
work, which was publicly and through media, is something that, I think, we
can be proud of. And the other aspect, I think, is making our messages and
publications much more professional than they were. We had some
publications that they really didn’t add up to much, to be blunt about it. And
so, we transformed those into a series of ad hoc reports that dealt with population and environment, dealt with access to family planning services, dealt with women’s rights, dealt with a whole lot of different issues that we thought we could get attention to. And by the way, we would often start out with a news hook and then work backwards and say—

**Sharpless**

Tell me what you mean by a news hook.

**Speidel**

Well, something we thought that would be of interest to the public. Something that the media would pick up because you don’t just go to the media. Again, this is another thing I learned, I think a little bit, about media in America. They have their definition of news, and as I mentioned yesterday, I might think its news that the world grew by eighty million people. That’s not news, it happens every year. It’s so what. So, you have to think about what’s interesting and new, their definition of news, and then see what you can develop that fits that definition. Another reality is that people covering different areas like environment, like population, change all the time, and so you’re endlessly educating a new bunch, a new batch.

Sometimes, if you can get the AP writer, their story will go to a thousand outlets, and so it can be very important to make sure those folks are on board. So, we had one-on-one meetings, we had editorial board briefings, we had news conferences. Occasionally, we would recruit somebody on our board of directors to get us in. For example, Robin Duke called up Katherine Graham, and we went in and talked to her at the *Washington Post* about population issues. Robin also got us, or, I guess, got me a meeting with Bob Bartley at the *Wall Street Journal*, who’s still the editor, and even
though he’s generally very unsympathetic to this, they published an op-ed about starvation and famine in Ethiopia and the links to population. So we turned out quite a few op-eds and letters to the editor to try to correct some of the crazier things that our opponents said. I don’t know if you’re familiar with the whole analysis that Sally Covington did about right wing foundations, but she pointed out that they give a relatively few institutions generous long-term support, and that their approach is really to create think tanks and captive scholars and even see their journals still legitimize their point of view. And they spend all their time trying to change policy. The progressive foundations are actually trying to help people. (laughter) There’s a big difference.

Sharpless That is a big difference.

Speidel And the progressives are often criticized for not being in the same league in terms of making public policy happen. But their message is to get government out of—shut down government, except for the military, cut taxes, and let the markets work. Well, I’m afraid markets need some regulation as anybody watching WorldCom, Enron, et cetera would say in 2002.

Sharpless Let me change the tape.

Speidel Sure.

Tape 1 ends; tape 2, side 1, begins.

Sharpless Okay, this is the second tape with Dr. Joe Speidel, on October 11. Okay, when we changed tapes, we were talking about the right-wing foundations and how they operate differently from the progressive foundations, but let’s
see there was something else about PAI that I wanted to ask you about. Um, media—uh, let’s—oh, I know, it was you were really learning many different kinds of skills when you were at PAI, how to work with Congress, and how to raise money, and how to talk to the media. It sounds like it was an amazing time for somebody trained in medicine.

Speidel

Well, I think the one thing that—most of it, I really didn’t think was that hard to do, except working with the media, because there are people who are just naturals in terms of how they deal with presenting things on radio and television. And they have a lot of poise, they’re good actors and good presenters. I mean, look at Ronald Reagan who probably didn’t understand a lot of what he was saying, but was somebody who could present it beautifully. I mean, that was his profession. And I don’t think I was a natural, so that—I did discover the more you did it, the better you got at it, and it became easier. You became more relaxed. And I used to like radio, because it didn’t matter what you looked like, and you could use notes and things. So, radio—which we did a lot of, and it was easier to get on the radio than television. That was an easier thing to do. So, maybe that was the only hard thing to do. My colleague, Dr. Sharon Camp, was kind of a natural. She could do this all really well without even trying, but I also learned a little bit from media training that you have to dumb-down the message so that it’s quite simple. You have to punch up the presentation so that you don’t put people to sleep. But maybe that was the only thing that seemed challenging to learn rather than—the rest of it didn’t seem that hard when I was doing it.

Sharpless

What was the most valuable thing you learned about foundations?
Of course, I was going at it from the point of view of raising money, and I think the most valuable thing I learned was that they are so idiosyncratic and unpredictable. And the adage that people give to people really is true. Perhaps if you’re giving—sending a grant into NIH, the scientific merit is something that’s paramount, but even there, the reputation of the scientists and other political things still matter. But certainly, when it comes to private foundations, they’re sizing you up. They’re thinking about whether you’re going to get something done, and we were working in something that was advocacy and policy development. And I used to call it—we’re trying to hit home runs, not reliable singles, but we were trying to really knock them out of the ballpark, get billions of dollars more into the field, and that’s hard to do. And so, it was hard to prove what we were doing really made a difference. It’s very easy to say we’re going to open a clinic for fifty dollars each; we’re going to see so many patients, and know that’s going to happen. But in the great scheme of things, it’s a so-what because the resources needed to do these programs can’t come from private foundations. They’ve got to come from where the money is, so with apologies to Willie Sutton, we went where the money was. And we went to the World Bank; we went to AID; we went to the Development Cooperation Agencies throughout Europe, and that’s something that I carried on at Hewlett.

Okay. Anything else about your time at PAI we need to talk about?

Um, no. Turn off the tape, and I’ll think.

Okay.

We’ll save it.
Okay, we’re back on, and you were talking about one lesson that you had learned at PAI about personnel.

Well, I think there are several big picture things that I learned. One is that—I think I’m much better at thinking about grand strategy than worrying about the details. Fortunately, after Sharon Camp left, I had a vice-president there, Catherine Cameron who was very good at making the trains run on time, and that was a good combination. So I really focused on the big picture, which I think a lot of people fail to do, actually, to have a grand strategy about how to get from A to Z, rather than worrying about how to get from A to B, and then from B to C. So, I think that made us effective. Also reinforced the notion that I’d had all along that a key to a well-run operation is—at least one that I’m involved in—is good people because I don’t—I think my strength is in the vision and strategy. It’s not in terms of being a leader on a white horse saying, Charge, and having everybody follow me. I’m a great believer in getting great people and then turning them loose to make their own mistakes. And I think that kind of self-actualization is very satisfying to people rather than trying to micro-manage them. So, I think I do very well with self-starters, not very well with people who are not, but—I mean, there’s just a few reflections on the PAI experience.

Are there things you wish you’d done differently at PAI?

I’m sure there are, but they might have been better investments in the stock market, or something like that in terms, of the funds we brought in and maybe my own money, but that’s not the subject of today’s conversation.

(laughs)
But in terms of what you accomplished, overall, it was pretty satisfactory.

Yeah, I think we might have approached things a little differently in terms of personnel around PAI. I don’t know.

How did you decide to move to the Hewlett Foundation?

A little bit of serendipity. This opportunity appeared, and it was time to do something new, I thought. I’d been there eleven years and got lucky, I think. Just happened that the program officer out here had decided to go back to NIH, and the job was open, and I was lucky enough to get it. So, moved to California, and we can segue into the Hewlett Foundation, if that’s fine.

Absolutely. As you understand it, realizing that you weren’t here, but how did Hewlett get involved in population activities?

It was one of the early programs that Bill Hewlett had picked, and Roger Hines, the early president had been enthusiastic about. Anne Murray had been the program officer for about ten years, and then there was a brief—I think Nancy Moss was there for like a year and a half, and then the spot came open. Actually, Faith Mitchell followed Anne Murray for six years, I believe. At any rate, when I joined up, the programs were run by a single program officer, and I had a half-time assistant and that was it. And the first year’s budget was $9 million.

Okay, so twice what it had been at PAI.

Roughly, right.

Okay.

But it was money to give away, not to run a program. And the total assets of the foundation were $900 million, and when we last looked at the Hewlett
Foundation today, the pro forma assets, that is with Hewlett-Packard stock that came from Bill Hewlett in August of 2002 were a little less than $5 billion. Quite a lot of that came from stock market growth; quite a bit of it came from venture capital gains, and then when Bill Hewlett died, something like a hundred million shares of HP stock came to us which we thought were going to be worth around $5 billion dollars, but are unfortunately only worth maybe a billion and a half today.

**Sharpless**

That’s a significant drop.

**Speidel**

Huge decline, right, which has hit Packard harder than us, the Packard Foundation, because almost all their stock is HP—all their assets are in HP stock.

**Sharpless**

But still, the growth from $900 million to $5 billion is huge.

**Speidel**

Um-hm. And it may be with this recent decline in the last few weeks, it may be $4 billion. I don’t know, but it’s still a huge increase.

**Sharpless**

And that’s in seven years?

**Speidel**

Um-hm. Seven and a half years, right. Some of that is transfers of funds
from Bill Hewlett, and we have a much more diversified portfolio because we had a policy of selling off the HP stock, which proved to be a wise one. And the staffing pattern now is I’ve got, instead of a half-time assistant, I have one and a half assistants. I have two full-time population officers. We’ve been renamed program directors instead of program officers. So, there are two and a half program officers, and there’s me. So instead of 1.5 people, we have—let’s see if my math is correct—one, two, three, four, five—five people. At the beginning there was—we had me and a half-time assistant. Okay, currently there’s one and a half equivalence in the assistance side, and there’s three and a half on the professional side. So, that’s from 1.5 to five.

Sharpless And what did the program that you inherited from your predecessor look like? What kinds of things was Hewlett funding?

Speidel We had about ninety projects, ongoing projects, and currently there’s about two hundred and ten, so we’ve grown a lot. There—I think it might be easier to describe what we did new.

Sharpless Okay.

Speidel We were supporting—but maybe I can describe a little bit what we were supporting. We were supporting quite a few training organizations, mostly demographers in sociology programs.

Sharpless In the U.S. or abroad?

Speidel In the U.S.

Sharpless Okay.

Speidel And maybe this is an efficient way to tell you how we changed it. Over time,
we’ve added—well, I’ve encouraged the demography programs to make sure their students became well-rounded population experts, which is not a fully successful event, because academic institutions have their own momentum, and to get demographers to teach about population/environment relationships, family planning programs and their evaluation, and reproductive health, is kind of a stretch. But at least we’ve urged them to try to broaden out the training because I’ve had this vision that somebody goes back to Burkina Faso and the Minister of Health says great, you’re our new population expert, now help us start a family planning program. And they say, What? Well, you know, I do complex statistical manipulations of survey data, but I sure as heck don’t know a thing about family planning. Well, we try to avoid that. But the idea is that we take foreign students from developing countries, train them with advanced degrees, different than many programs, and then, hopefully, they go home. And we’ve done a little analysis and something like eighty percent stay in population, and of those, about seventy percent go home. And that’s a fairly good record for students coming to the U.S.

Sharpless

It is.

Speidel

And we find that those that get ongoing support in terms of small grants, visiting professors, travel money, funds for computers and things like that, do the best because there’s often very little support when they do go home. But—

Sharpless

So, you’re training them here, sending them home, and then you’ll even support ones that go home.
Speidel  

Right. And the other thing we did was we changed—we’ve tended to favor schools of public health more than in the past. We opened up new programs, strengthened those at Hopkins and Columbia. We’ve added programs at Harvard, Tulane, Berkley—again these are links—stronger links to public health because they tend to get a broader education there. And we’ve also initiated programs overseas—five or six different institutions in developing countries as a kind of growth area in the training. But so, it started out strong in training, and we’ve made it stronger. And I think—and Hewlett, I’m sure, is the largest source of funds for training of foreign students. Some of the funds the Pop Council uses for this come from us as well. The Mellon Foundation has been working in this area a long time, too, but they’re actually going to scale back and get out of this field, which is unfortunate. We have not been supportive of leadership training the way Gates and Packard have. It’s a different philosophy. I guess I felt that let’s get experts first and then worry about the direction they’re leading, or how good they are as leaders, but let’s worry about can they lead in the right direction. That’s the number one thing.

Sharpless  

And that brings up a question. You know, this foundation does this, and this foundation does this. Do you ever get with say, the people from Gates and say, Okay this is what we’re doing, and—you know, there’s that not to compete or to compliment? Forget the question. How do the foundations coordinate their work?

Speidel  

We have both formal and informal ways. One of the things we started four years ago was an affinity group for population foundations, and it’s called—
we started out calling the Population Affinity Group or the Affinity Group for Population, Reproductive Health and Rights, and we renamed it the Funder’s Network for Population, Reproductive Health and Rights. And I was on the founding board and served two terms as the co-chair of that organization, and the idea is that we serve as a clearing house with information about grants that everybody’s doing. The first step to coordination is knowing what your colleagues are doing, and that’s often all that’s needed, because people of good will and intelligence will adapt to the existing circumstances and do things that make sense. We also bring in experts to—at our annual meetings and our Washington briefings to keep us up to date as to what’s going on in the field, and especially for people working in population who also give grants in other areas and don’t have people who work full-time with a lot of expertise in this area. This is very helpful to keep them in the picture. And we have funders only sessions where the outsiders aren’t allowed, and we can talk among ourselves about what makes sense to do. So, a lot of coordination and cooperative projects emerge from that formal sort of session, and then we’ll often do a lot of on the phone discussions with some of the heavy hitters and that would be Hewlett, Packard, Ford, sometimes Rockefeller although they’re scaled back, and Gates, and Gates has more money than anybody.

**Sharpless** And it’s a fairly recent arrival to the field.

**Speidel** Um-hm. Although the person running the program, Gordon Perkin, has been working in this area longer than I have, and that’s—there aren’t too many people, these days, who can say that. (laughter) So, it’s—it may be a
new foundation, but the body of knowledge embodied in the staff is—goes back forty years.

**Sharpless**  Significant—yeah.

**Speidel**  Right. Anyway, maybe I should step back a little bit and describe the general areas that we work in, and one I’ve already mentioned, that’s training, and more or less describe what we do in that area. Another area which existed before I came here was just support—general support for family planning service programs. We’ve modified that a bit to suggest to the people that we support that they use our funds for things that others can’t support. There’s no point in taking scarce foundation money and doing routine family planning services, but we suggest that they use our money for innovative, experimental projects, use it for advocacy. Sometimes, I’ve talked about a triple A strategy—advocacy, adolescents, and abortion, all of which are controversial. And so, they can use our funds for triple A activities. We may serve as a bridge over periods when, for some reason, the funds don’t come on time or as in the case of federal money, like AID grants, they might—the funds might be cut off because, say Pakistan does a nuclear test. Suddenly, all the foreign aid to Pakistan is chopped off as punishment, and that would include family planning assistance. And then, the government usually mulls it over, and says, Well, you know, supporting the family planning program there isn’t really—it’s just harming women. It’s really not—when we stop it, it’s really not punishing the government, and so they start it up again. But instead of having the programs collapse, they can take Hewlett monies, at times, and use it to keep things going, and sometimes even, in affect, pay it
back after they get re-funded, again. So, for emergency use and for work in countries where AID and other donors can’t or won’t work, they could use our funds. So, these are ways in which general support for service programs, mostly family planning, but also some reproductive health service programs can be used.

**Sharpless**

What are some of the countries where the AID can’t or won’t work right now?

**Speidel**

Um, well there’s some tough—that’s a complicated question because AID is putting money into India, but not into Bihar, the poorest state although the Packard Foundation’s supporting there. So, our money might go into Bihar in India. AID’s not putting money into Myanmar, some of our funds might go there. We’re supporting programs in Syria and Sudan. We’ve got some new programs that are going into Yemen, Syria, Sudan, Afghanistan, and these are areas where, perhaps, it’s slow going to get money. Eventually, I think, there will be programs, say, in Afghanistan, but they’re slow to come. So, those are some examples. At one time, work in Vietnam was in that league, also.

**Sharpless**

It sounds—one thing I was thinking about when you were talking about your work at PAI, you were frustrated by the bureaucracy at USAID, and these two organizations obviously are much more nimble.

**Speidel**

Oh, yeah.

**Sharpless**

And is Hewlett more nimble, even, than PAI was?

**Speidel**

Not necessarily, no. I wouldn’t say there was bureaucracy at PAI. It was just a struggle to get enough resources to work. Unfortunately, I didn’t have me
at the Hewlett Foundation giving me money at PAI.

Sharpless  
(laughter) Yeah.

Speidel  
But since I’ve left, we’ve been generous donors to PAI, as has been the Packard Foundation, and others. All of this partly helped by the huge increase in population resources, but I’ll come back to that issue.

Sharpless  
Okay, so working in countries where USAID can’t or won’t.

Speidel  
Right, so that’s kind of our family planning service area. A third area, which actually is the biggest one and almost the signature program of the foundation, is advocacy. And I have to say, foundations are very nervous about advocacy. They’re worried about affecting legislation, and don’t want to give the appearance of that kind of activity which isn’t legal, but it does—

Sharpless  
That’s right. Because the foundations are 501(C)3, right?

Speidel  
Right. There’s also a lot of—but there’s a lot you can do beyond affecting specific aspects of legislation, but foundations seem to get pneumonia when they really only need the sniffles about this whole issue. So, we—when I first arrived here, we couldn’t even use the word advocacy, but in the population program, I made the case that we had to do it, whatever we called it. If we didn’t call it the advocacy and we called it educating the public and educating leaders and whatever, and we did it. And the whole idea was, as I’ve described in the other programs, that we don’t have the resources to provide the—make the service programs work, to do the research, to do everything that needs to be done around population issues. So, we need to push governments and other multi-national organizations, like the World Bank and the UN, to step up and do what’s necessary. And so, we’ve worked with
a long list of organizations, and I could just glance at the budget for—well, I mentioned that our initial budget was $9 million in 1995. Last year it was $59 million, and this year it will be $35 and a half million partly because the stock market’s down. This year it’ll be $35.35; last year it was $58.7. And when we look at the whole issue of how much we’ve put into policy development and advocacy, what I’d call increasing commitment to deal with population issues. Last year we put $22 million dollars into that.

**Sharpless**
Okay, somewhat within a third of your budget.

**Speidel**
Um-hm. And this year, we'll put in $10.4 million, which is again about a third of the budget, into that area.

**Sharpless**
Give me an example of some of the things that the advocacy funding would fund.

**Speidel**
Okay, a long list of organizations, maybe—I don’t know how many, fifty organizations, perhaps, working in that area. They range from supporting the Global Health Council to keep an eye on World Bank; work in reproductive health; Catholics for a Free Choice—I know you’ve interviewed Fran Kissling, and we’re a supporter of her work—Population Action International, my old organization; Child Trends that looks at programs that affect fertility, affect children, which include access to sex education and family planning. We have a program at RAND that takes research and repackages it and does original studies, and because RAND is such a respected research organization, they have a lot of credibility. We work with the Center for Reproductive Law and Policy looking at laws that affect reproduction around the world, both the U.S. and overseas. Um, let’s see
what others are on the list. There’s a long, long list of these organizations.

**Sharpless**

And of those fifty grants, are those for specific programs there or the general support?

**Speidel**

Well, this is—one characteristic of Hewlett that’s different from almost every other organization is that we give general support. And am I still coming through sitting this far back?

**Sharpless**

Um-hm.

**Speidel**

Okay. I have the adage that if I know how to spend the money at an organization better than they do, I shouldn’t be giving them any money because I just—if they’re not good enough to know how to spend it wisely, I shouldn’t be supporting them. And that’s very unusual, because most money today from foundations is project money. Foundations claim to be society’s risk takers, but they’re nervous Nellies when it comes to actually handing out money. They are risk adverse. They’re endlessly worried about whether they can carefully evaluate their results. In the pop field we’re lucky in that we have endless statistical measures that we can keep track of, and we do try to evaluate what’s happening. One big category of advocacy is foreign institutions, and we, as much as anybody, were behind the formation of the European NGO Network. Each country has at least one organization pushing their governments and the European Union—European Commission to support population work and also, they’re to some extent working with the World Bank directors supporting population work. And this European NGO Network called the EuroNGOs, the European NGO’s, has been fairly affective. I did a little analysis to keep us and our board happy
about—okay, we’re doing advocacy. What’s happened? So, I looked at population assistance in 1995, and then again in 2000, which unfortunately is the most recent data we’ve got, but the total in ’95 was $546 million, in 2000 was $728 million, roughly.

**Sharpless**  
So, it’s gone up 50 percent.

**Speidel**  
Um, about one third up. But a $182 million more per year coming in. Well, during that period, our grants to the EuroNGOs averaged $1.6 million a year. That’s my kind of leverage. Now, we can’t claim we did it all, and we can’t claim all the change was because of the EuroNGOs, but we know in some cases it was very important. We know how it happened.

_Tape 2, side 1 ends; side 2 begins._

**Speidel**  
For example, we know that one of the members of World Population Foundation in the Netherlands worked with their friends in the Parliament who pushed the Development Assistance Cooperation Minister to fulfill his promises to triple foreign aid from the Netherlands, and it happened. The figure that they were giving, $86.6 million in ’95, and by 2000 that figure was $188.8 million, $188.9 million. So, a $100 million increase from one of our EuroNGOs. Now, if the other fifteen or twenty of them were total failures, it was still worth the investment just to get that, because population work is, like many fields, is challenged by severe lack of funds compared to what’s needed. Even though in many ways it’s an inexpensive activity to do. It’s not that costly, but when you look at all development assistance, something like two and a half percent goes into population work, so just a tiny increase in priority given to this work could make a huge difference in its success. So
anyway, the—working with policy makers through foreign organizations is an innovation that we essentially weren’t doing until I came here, and now we have, I don’t know, maybe twenty different grants—more than that, maybe thirty different grants with foreign organizations doing various things. Another thing that we started since I’ve been here is working on what I call population education, working with Johns Hopkins, working with what used to be Zero Population Growth, and working with SIECUS, the Sexuality Information and Education Council of the U.S. Another area in which we have started since I have come here is population and environment organizations, supporting environmental organizations to make the links between population growth and environmental degradation.

**Sharpless** I meant to ask you about that when you were at PAI. How did you make that linkage then?

**Speidel** Well, there we just looked at scientific data and had publications. Today we’re a little bit—or at least through Hewlett funds, we’re able to give grants to organizations to create programs, and when you have environmental organizations supporting population work, it’s a lot more clout than population organizations. These organizations collectively have, I don’t know, ten million members if they have one, and so they matter a lot.

**Sharpless** Groups like the Sierra Club.

**Speidel** Um-hm. The National Wildlife Federation, Izaac Walton, Audubon, and in Environmental Defense. So their voice, even though their number one job is going to be not working on population, to have their voice on Capitol Hill helping us make the case is very important. Just as when we support a group
like CARE or Save the Children to have their voice is very powerful, too. If a group like Save the Children tells Congress, Don’t take the money from family planning and put it into maternal or child welfare or health programs, that means a lot more than when the family planning people say that.

Sharpless How easy or how difficult has it been to convince those groups?

Speidel Well, we only support the ones that are convinced, but most of them are. So, we do support Save the Children; we do support CARE. And again, there
are other groups like World Neighbors, and Partners of the Americas that do broad development activities that helped. I think one characteristic of the Hewlett program is that we are filling a lot of ecological niches. For example, we have a program with the American Medical Women’s Association, AMWA, that’s trying to get reproductive health curricula into medical schools in the U.S. and overseas.

Anyway, I’d mentioned the, I think I said five, but it’s really four general areas. We used to divide up the research into contraceptive development as a separate area, but we’re now talking about it just under research. So, we have advocacy; we have family planning service delivery; family planning and other reproductive health services; training, and research. And the research relates to social science, demographic, and fertility regulation technology research and migration research. So, we have activities in all those. One area that, again, we didn’t do anything in before I arrived is contraceptive development research, and that’s now a major program. Since I worked so closely with that years ago at AID, I know enough to know that individual projects are not something that we should try to support. It takes a whole lot of specialized knowledge, so we support the big programs, the Conrad’s CICCR program, the World Health Organization program, the Population Council’s Center for Biomedical Research, and Family Health International, and the University of San Francisco—University of California at San Francisco. So, those are the major publicly supported contraceptive development research programs that we give resources to.

**Sharpless**

And how much work have you seen in that? How much progress have you
seen in that, in seven years? You mentioned those things change slowly.

**Speidel** Yeah, things do change slowly. One example is medical abortion with misoprostol and mifepristone which has gotten approved by the USFDA, was just coming into use in Europe eight years ago, and is now available to women in countries with about half the world’s population. Because it’s now available in the U.S., India, China, throughout Europe, South Africa, Turkey, I believe—and there’s a few other countries that are coming on board. So, that’s a big change. Another place where we’ve seen tremendous progress is in so-called emergency contraception which used to be called the morning after pill, and that has come on stream around the world in a big way.

**Sharpless** And what has Hewlett’s role been in developing those two items?

**Speidel** Well, our role with misoprostol/mifepristone has been limited, but we are supporting groups that are then working in that especially the Population Council, and we’ve supported them for years. And in emergency contraception, we’ve supported a number of the necessary research trials at UCSF. We’ve also supported the reproductive health technologies project that’s working in that area. We’ve supported a pharmacy project with about a million dollars in it through PATH, an organization in Seattle, and we are supporting a hotline and website at the Association of Reproductive Health Professionals in Washington D.C. So, we had quite a lot of role in emergency contraception, which ought to be something—it’s claim that it causes abortion when we know that if you have established a pregnancy it doesn’t do anything, and it ought to be something that’s favored by the ant-
abortion people because it prevents abortions. But an excess of rationality doesn’t seem to be in their make-up so we still get opposition for that particular technology.

**Sharpless**

That brings to mind a couple of questions. One is, how does Hewlett decide to go into these areas that draw some opposition?

**Speidel**

(both talking) Criticism? Well, actually we are very quiet about what we do, and when we provide general support to an organization it’s not a lightning rod. In many ways, the foundation is a fairly conservative foundation, and certainly we’re not a group that’s looking for credit or publicity, and so far we’ve had very little criticism. It could happen any day. So anyway, we’re also supporting social science research, demographic studies, partly through our training program. It’s both research and studies. And for example, we’re supporting a study program that looks at the impact of micro-credit on women’s status in looking at Bangladesh and India. We’re supporting quite a bit of migration research on—not really pushing any particular agenda, but assuming, perhaps overly naively, that better information will lead to better policies in this hugely controversial area.

**Sharpless**

Now, is that something that you started, or was that going when you got here?

**Speidel**

We had, I think, one project going, but we’ve added about five more. There’s been a lot of change. As I said, the contraceptive area was something that is totally new. I think we had, as I say, I think we only had one migration project, one investigator working at that, but we’ve added a bunch of them.
And what’s it like to go from asking for money to giving it away?

Oh, it’s very relaxing. (laughter) But I may be going back to the other side of the fence because February 1 is presumably—is the end of my tour of duty here, and we have a term limit scheme which allows you six years plus a two year extension, and that’ll be the end of my eight years at that point. So, it’s—the theory is that we get stagnant and new blood is needed. I wouldn’t say I agree with that theory, but that’s what the powers that be have decreed, and they’ve also extended it to the—from program directors to program officers so my colleagues who work with me will also have to be facing term limits. And that is something that just dawned on me this year.

This is a change. Well, how do you make the tough decisions on what to fund and what not to fund?

Well, I think—first of all, I think you have to have an overall strategic view of where the program should go, and we created a strategy for—well, each of the seven programs at Hewlett either has a strategy or is developing one. We actually did one for population before anybody else did theirs. We were first out of the chute, and it went quite easily. Some of the others haven’t gone quite so smoothly, but—

And after you came up with it then did the overall board—did you take it to the overall Hewlett board?

Um-hm. Yeah, it went to the board in July 2001, and so we’ve had it in place for quite a while. When Paul Brest came on board about two and a half years ago roughly, he was the one who asked that we take a new look, which is reasonable. So, we essentially codified what we had been doing all along, and
we had the assistance of some outside experts to review that and help us polish it. And it helped us identify some missing elements. For example, we determined that we were really not working in the Middle East. That was a neglected area, and we got a little extra money last year to work there partly because of our strategy, but also partly because of 9/11, I think. But anyway, that was something we determined before 9/11. Um, what was your—back to your question again?

Sharpless

How do you make the tough decisions of what to fund and what not to fund?

Speidel

I guess I couldn’t remember the question because I didn’t think we had any tough decisions. One of the things that we look at, of course, is the quality of a proposal that comes into us, but that’s certainly not the only source of information. We look to the strategic importance of an activity. We look at the track record of the organization, and the people in it. Especially the people and their leadership because as I’ve been emphasizing all along in this game, you’re only hiring people. So, a knowledge of what you’re likely to get when you give a grant is a key issue. One of the things that is very important in determining that is a lot of conversations with people who work at an organization—site visits, field visits—spend a lot of time on the road. Less now, than when I first came here. I think the only year I actually added it up was my second year here, and I counted ninety travel days in the year, but I’m sure it’s half that today. As we get to know people better and their program’s better, you don’t need to spend as much time out there.

Sharpless

What are some of the more memorable trips you’ve made? By that I mean,
when you’ve gone out to a site and you’d said, This is really good stuff.

**Speidel**

I think one very useful trip was spending a week in Mexico about five years ago, because we got a lot of proposals from Mexico, and it was very hard to sort out what was good and what was bad from the written record. So, going down and spending very intensive number of days and visiting a lot of different organizations allowed us to pick a portfolio of groups we were supporting directly in that country. I’d have to list that as perhaps the most useful site visit that I’ve made. I had a very interesting trip to India two years ago, and again, that was a lot of different organizations, but that was not quite as valuable in terms of figuring out who to support. Most of the country support we give is through intermediaries because they have the field presence, and we don’t. And there’s no way with five people we can have that. Back to the tough decision issue, it does get a little tricky because sometimes you’ll get a very good proposal, and then sometimes you know an organization’s good and the proposal will be written by the staff who does nothing but write proposals and it may not be very good. And you have to have a bit of trust. If you give general support we can end up just paying overhead for a bunch of other people, so I think the meeting of the minds about how money should be spent is—and will be spent is rather important. And we collect information at all different levels from within an organization and about an organization and from our colleagues who are also supporters.

**Sharpless**

But you have your own goals, and you’re looking for organizations that will help you further those goals?

**Speidel**

Yeah. One of the realities is that there’s no magic right or wrong way, and
endlessly figuring out how big each slice in this pie should be is something that just has to rely a bit on judgment. And other people might make a different set of judgments, but I certainly focus on areas which I think are neglected elsewhere, and I think they’re important. And that’s why the triple A strategy, programs for young people, advocacy, abortion—these are areas that tend to be neglected, and I don’t know that we have time to make the case why each of these are important, but there is a case to be made about why each are important.

Sharpless

Okay. What else do we need to talk about with regard to your Hewlett Foundation work?

Speidel

Um, hm. Let me look at my little crib sheet here. Just a little overview of where we’ve come since I’ve been here might be useful. When I started out
in ’95, we had about—projects worth about $20 million funded, and I think about ninety active projects. And today, we have over two hundred active projects with currently active funding of about $100 million. That’s the case because we often make multi-year grants, so we won’t give away that much this year, that much money, but we’re taking credit for prior grants. During my tenure here we’ve increased the number of advanced degree training and research programs from nineteen to thirty-three, and I’ve mentioned that previously we had—most of them were in the U.S., and we’ve added a few, five or six, in developing countries. We’ve added the contraceptive development program. That’s completely new, and the population environment program. We’ve extended our support of social science research a bit, and one area that is quite new to us, just in the last couple of years is advocacy for basic education in developing countries, and we came to that because we focused most of our grant giving on satisfying demand—already existing demand for reproductive health and family planning programs. But we asked ourselves, what is the most important thing we could do to increase demand, as well as transform lives around development in developing countries? And that was to get behind expanding educational opportunities, especially for women, but both—we know that both men and women, when better educated had smaller families, as well as better health, better incomes, and everything else that comes from education. So, we helped fund a consortium with—I think we put about a million and a half dollars into a combination of advocacy and training programs last year, not this year, and this proved to be highly effective. The U.S. foreign aid budget went up from about the $100 million level to something like the $200 million level in 2002, and we know our work helped make that happen. I guess it’s an example of what advocacy can do when you’re working in a non-
Sharpless: What do you attribute that growth to?

Speidel: Let’s see, that—I misspoke, first of all. That was the ’99-2000 figure average. And then you look at the 2001-2002 figure, and it’s down to about $325 million on average. These are round numbers. Probably, the main reason being that the stock market’s gone down so much.

Sharpless: Less money to give away.

Speidel: Right. But partly the growth of wealth on the part of foundations. That’s one reason we’re doing so much more, and perhaps because of increasing attention to this area. We’d like to say it’s all our efforts in advocacy that paid off, but that’s a stretch. I think one of the interesting things to say is that some of the most creative and successful entrepreneurial spirits of our time, Bill Gates, Warren Buffett, Bill Hewlett, David Packard, have joined some of the old guard, Ford, Rockefeller, Mellon in supporting this field. It’s a very short list of foundations. Out of maybe sixty thousand foundations, there are probably sixty that give for population work. And if you were going to ask how many give for the arts, you’d have to say out of six thousand, four thousand. I don’t know, I picked that number out of the air, but it’s a huge proportion of people supporting the arts. And here we’ve got something that, I think, the fate of the planet depends on, and a very short list. But some of the best and the brightest and the richest, so it’s not really—

Sharpless: And you’re all tied together through that funders’ network?

Speidel: Um-hm. Right.

Sharpless: Okay. What else about the Hewlett work?
I think the fact that we give general support has been a very useful thing, and the feedback we get from our grantees in the field is that they really like our style. General support—it's not that we give it totally free from advice, but I think we're fairly—have a very light hand on the reins, not trying to jerk people around excessively, and we have a very good staff to help me. These other professional peoples are very bright, very committed, same story everywhere. And we've had a lot of support from board of directors. This is the biggest program. I think we've had very little trouble in terms of our strategy. We're not second guessed. Personally, that's been very nice to be essentially given a lot of other people's money to spend and a very free hand, and I hope we've done it responsibly. As I was alluding to before, there's no magic to say what's right or wrong. There's a lot of judgment in here, but we've certainly tried to—if we were in a gambling casino, you'd have to say we'd bet a whole lot of different numbers because we're not just doing a few things. We're doing a lot of different things. We have even some oddball projects like we supported a little study that relates to child labor because the child labor people in general are saying, Oh, child labor's bad; children shouldn't be working, send them to school. And they haven't thought about how family planning fits into that. If you have seven kids, maybe you can't afford to send more than one or two of them to school. If you have a smaller family, in general, the family will be wealthier. The odds of them staying in school might be much greater. They don't think about the cost to the government of having an ever increasing class size or number of kids of school age so they can even provide schools. No, they just look at it as, Oh,
gee, we need to agitate to keep kids in school and get them out of sweat
shops, but it’s a more complicated story, and we have little projects to try to
get the child labor community thinking more about demography and how
reproductive health fits into their goals. As I say, we have a lot of different
irons in the fire. Child labor to hot lines.

Sharpless
Yeah, a wide variety. Well, are there other topics that we need to talk about
before we close out our time together?

Speidel
It might be appropriate to say a little bit more about the opposition.

Sharpless
Okay, let me put in a fresh tape.

Speidel
Okay.

Tape 2 ends; tape 3, side 1 begins.

Sharpless
Okay, this is the third tape with Dr. Joseph Speidel on October 11. Okay,
say more about the opposition.

Speidel
Well, the opposition doesn’t speak with one voice and doesn’t come from
one single quarter, but perhaps the most powerful comes from religious
leaders who are mostly concerned with the hereafter rather than the here,
and have very conservative views on human sexuality and see our sojourn on
earth as being one of a temporary vale of tears because your rewards are off
in heaven, and so it doesn’t matter that much. I think this is a rather
dysfunctional view of our existence, but they have a lot of clout, and it fits in
with the whole movement to promote abstinence among teenagers, to ban
abortion, to limit—in many cases, they’d like to limit access to almost all
methods of birth control. And this causes enormous mischief. And then, you
have the dedicated market capitalists who say, Numbers are irrelevant, they
really don’t matter, markets will take care of everything. And I think there’s just a lot of ideology out there which seems to be more and more an aspect of our political life, and I think this is unfortunate. We need more pragmatism. The erosion of separation of church and state—we’re now into faith-based everything—is a problem that with all of this regard. The disenchantment of people in participatory politics which allows the well-funded minority to prevail electorally. It’s another aspect of that, so we have a lot of problems. One thing that’s working in our favor is that technology and information technology means that the information and means of fertility regulation is going to continue to get easier, but especially in developing countries, it may not be available. And we’re just not stepping out to make the contraceptive supplies and information and service programs available around the world. So, it’s hard to know what our future’s going to be like, but if we could have more success stories like Iran, which went from around six kids to two and a half kids in a little over a decade. It’s the fastest declining fertility on record, and we know how it was done. We know they used all the methods of birth control. They put the sanction, or the prestige of government and religious leaders behind small families. They give counseling to both men and women, and they also had a fairly educated, if not highly empowered, group of women in the country, so that story could be replicated in many other places if we just let it happen.

Sharpless

How optimistic are you for the future of family planning?

Speidel

Well, I think eventually—family planning is a one-way street. I don’t see societies going to a small family ideal in practice and then turning around.
It’s possible, but it doesn’t seem to happen. It’s just that we need to make that demographic transition faster, and it’s not automatic. In spite of the UN projections which say we’re only going to grow by three billion people. Well, three billion people is an alarming number, by the way, and I think eventually we will—population will stabilize. It’s a question of where and what life will be like when it happens. And I think we’d be better off if we were able to help people fulfill their own fertility desires which is for a lot more fertility. If we could eliminate all unintended childbearing instantly, we’d get halfway to the two-child ideal around the world. And usually down to that two-child stable family or lower—that’s another issue that’s somewhat alarming if you live in Italy or Spain, but—

**Sharpless**  
The fact that they’re actually losing population, yeah.

**Speidel**  
It’s starting to. It’s—but it can kind of snowball in terms of losses.

**Sharpless**  
Okay.

**Speidel**  
But anyway, I think we will get there, but we’d be better off getting there quicker rather than more slowly.

**Sharpless**  
And we’ve talked very quickly about a lot of things that you’ve done in the last thirty-five, forty years. Is there anything else that we need to talk about during our time together?

**Speidel**  
I don’t know. Some of my colleagues say they’re worried about who’s coming along in this field. Do we have enough people committed to work here? Where’s the leadership going to come from? But I suspect that every generation sits around and worries about that, and they think that—nobody’s irreplaceable, but I think there’s a tendency to think that. But these
concerns are voiced by young people interestingly, and I guess they see—you know, who’s there between the thirty and thirty-five year olds and the sixty- and sixty-plus-year-old people—what they’re talking about. That’s—it’ll be interesting to see how that all turns out, but I think leaders will emerge. Whether the political process would give this arena the support it deserves is another question though, because we go through fads, and one of the characteristics of foundations that people are endlessly complaining about is donor fatigue, and right now, we’ve seen several major foundations walk away from population where the Rockefeller Foundation has basically gone into health and AIDS, Mellon Foundation is just phasing out their program which has been about $20 million a year, and then a number of foundations are really hit hard by the stock market decline, Packard, UN Foundation, Turner, Summit Foundation is almost out of business. So, we need some fresh resources, and we need some new groups to come along and replace the ones that are dropping out, and we need the public donors, the government donors to stay the course, and we need the governments of developing countries, many of which do almost nothing in this arena, to step forward and do their share.

Sharpless Okay. That might be a good place for us to stop. Do you think?

Speidel Sure.

Sharpless Thank you so much for all of your time and your hospitality. I really appreciate it.

end Interview 2