February 1989

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Brian Harradine

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Recommended Citation

Harradine, Brian (1989) "Population Control Policies for the New Cultural Imperialism," *The Linacre Quarterly*: Vol. 56: No. 1, Article 8.

Available at: <http://epublications.marquette.edu/lnq/vol56/iss1/8>

Population Control Policies for the New Cultural Imperialism

Sen. Brian Harradine

This was the keynote address by Senator Harradine of the Australian Senate, presented to "A New Era for Life", an international conference sponsored by the International Right to Life Federation and Pro-Life Philippines, in Manila, The Philippines, June 24, 25, and 26, 1988.

This is the full prepared text of Senator Harradine's address. In the interests of time, the Senator delivered a slightly shortened version.

A New Era for Life!

It is particularly timely that here in Manila such an unambiguous and fervent vote of support be given to **LIFE!** As we gather here and reflect on how the events of recent decades have treated life, we can be excused for wondering whether, in fact, the world is entering into a new anti-life era. Fifteen years ago, an international family planning guru, Prof. Derek Llewellyn-Jones, passed his own death sentence on life with these words:

To reduce the plethora of people which threatens to overwhelm us, our objective must be to change the present pro-natalist attitude into an anti-natalist attitude with the least delay.¹

While we disagree with the professor's philosophy, and the values which underlie it, we can but acknowledge his frankness, his clear and unambiguous statement of policy. We hear such a statement and we know where he stands, and we know where we stand.

But, as we look back over the past two decades how have honesty and truth fared?

On the fourth of June I picked up a local Australian newspaper and read this headline: "Haemophilia can now be diagnosed in the unborn".² The article triumphantly proclaimed that "a test to detect haemophilia in unborn children has been developed which could **give hope** to hundreds of Australian families which carry the genetic disease."

According to the press article, this exciting new development means that a cure has been found. But that cure is death — eliminating haemophilia, not by curing the disease, but by killing the defenseless human beings unfortunate enough to be deemed imperfect.

So, this was what “giving hope to hundreds of Australian families” really means.

This is what the proud scientist announcing the “breakthrough” really meant. Not a “New Era for Life”. But, a new era of death for “Life deemed Unworthy of Life.” It was this very concept of “*Lebensunwertes Leben*” (life unworthy of life) which the Nazi health bureaucracy used to justify sterilization programs, and later direct medical killing.

It is becoming increasingly clear that the impetus for these disturbing present-day trends in reproductive technologies rests in the *values* deceptively promoted by those who sought, and are still seeking, to *impose* an anti-life mentality upon the peoples of our world.

And I stress the word “**impose**”. For just as the technological imperative is propelling some science technologists on to the discovery and application of more efficient and comprehensive techniques to search for and destroy unborn human beings with genetic diseases, so, too, is it leading the anti-life population establishment to unleash upon an unsuspecting world new, more efficient, and ever more deadly means for the extinction of unborn human beings.

But let us, for a moment, step back from the battlefield, from the cutting edge of technology, and consider the particular type of development model of which this anti-life mentality is but one element.

In most countries of the world today, the need for development is the key motivator of government policy. There is, indeed, nothing intrinsically wrong with this. Who would wish to deny to any single one of the world’s people improved health, freedom from debilitating disease, adequate nourishment and housing, access to education and learning?

However, there is a particular view of development which, over the past few decades, has come to be accepted as the orthodox wisdom of the age. It is an approach to development which has as its **goal** only the material future of *economic* man, and sees population growth as the prime obstacle to achieving this objective.

Middle Decade Mortality

In the middle decades of the current century, mortality rates in many developing countries declined markedly, and population growth rates began to rise. Development “experts” predicted that such trends would wreak havoc for their economic development strategies.

Two lines of reasoning were regularly advanced: the needs of an increasing population would outstrip available food and other resources, and investment required to provide schools and other services for a growing population represents investment which could otherwise be used

to expand production and wealth.

Such a diagnosis is fundamentally flawed.

It is not seriously argued today that there is an absolute shortage of food in the world. Growth in food production in recent decades — even in the three largest developing countries, India, China, and Indonesia — have made a nonsense of this Malthusian spectre.

Nor can one deny the fact that geographic density of population will tend to substantially *reduce* per-capita investment requirements. This is quite apart from the obvious, but almost invariably neglected fact that investment in children is not wasted investment, but represents investment in the future productive capacity of the nation.

In addition to diagnosing the “problem” as increased population growth rates, many development “experts” have also prescribed their solution — the widespread introduction of artificial means of birth control.

It is a sad fact that many of the officials of major development funding agencies have come to agree with this “expert” diagnosis and prescription. For, over time, the provision of foreign aid has come to be linked to the introduction in many countries of birth control programs.

In economic terms, the acceptance by international funding agencies of this basic, but mistaken, “diagnosis” has proved to be very costly.

Not only has the provision of high-tech, high-cost artificial birth control drugs and devices made the recipient more dependent on the donor, but the diversion of scarce local medical and administrative expertise to these programs is, to this very day, placing an unacceptable burden on the rest of the development effort of the receiving country.

The greatest costs, however, are not economic. They are social, moral, and political.

Social costs include the intrusion into family and cultural settings of a foreign ideology. They involve the introduction of a poisonous anti-life mentality which imagines that the world should revolve around the self-centered wants of an individual to the ultimate detriment of that individual’s growth and happiness of social cohesion, and, indeed, to the detriment of responsible parenthood.

Moral costs are, perhaps, the most significant. The imposition of an anti-life mentality, of a contraceptive culture, means the imposition of an impersonal philosophy which views as irrelevant and unimportant the delinking of the unitive and procreative aspects of sexual intercourse. It means paving the way for the disastrous health and behavioral effects which have become so evidently widespread in the Western world with the advent of such devices as the contraceptive pill and the IUD and the tragic, increased rate of abortions.

And to touch upon just one political cost: Can a country’s national pride — a necessary element of development — allow foreign experts, and their local “clones”, to develop programs relating to the most intimate aspects of the behavior of a nation’s citizens, especially where the adverse economic, social, and moral consequences of such programs can be seen?

In his latest encyclical entitled "Sollicitudo Rei Socialis — On Social Concerns" — the Holy Father, Pope John Paul II, appears most concerned with the diagnosis and prescription offered by development "experts". He writes:

... it is most alarming to see governments in many countries launching *systematic campaigns* against birth, contrary not only to the cultural and religious identity of the countries themselves, but also contrary to the nature of true development. It often happens that these campaigns are the result of pressure and financing coming from abroad, and in some cases they are made a condition for the granting of financial and economic aid and assistance. In any event, there is an *absolute lack of respect* for the freedom of choice of the parties involved, men and women often subjected to intolerable pressures, including economic ones, in order to force them to submit to this new form of oppression. It is the poorest populations which suffer such mistreatment, and this sometimes leads to a tendency towards a form of racism, or the promotion of certain equally racist forms of eugenics.

This fact too, which deserves the most forceful condemnation, is a *sign* of an erroneous and perverse *idea* of true human development."³

As the Holy Father noted in the opening line of this encyclical, "the Social Concern of the Church [is] directed towards an authentic development of man and society which would promote all the dimensions of the human person."⁴

We must proclaim to the world that a view of development which diagnoses *people* as the "problem", and prescribes artificial *birth control* as the "solution" is not **authentic** development. It is not development which promotes the good of **every** person and of the **whole** person.

Development is never authentic if it focuses solely upon economics to the neglect of the political, cultural and spiritual dimensions of the whole person. It is never authentic if it treats people on the basis of their place in a statistical table, an approach which loses sight of the real, ordinary men, women and children who live real lives full of real customs, laws, traditions and values.

It is clear that the approach to development adopted by the population establishment does not promote the authentic development of every person and of the whole person.

Paul Ehrlich was the hero of the early wave of anti-natalism which swept the world against what he termed the "teeming millions". After a quick trip to India, he returned to the United States full of insights into the population "problem", and wrote that "population control is the conscious regulation of the number of human beings to meet the needs, not just of individual families, but of society as a whole."⁵

Concerning Ehrlich's Indian adventure, Germain Greer notes in her book, *Sex and Destiny*, that his advocacy for population control stemmed from what he saw in India and didn't like. What he didn't like was the heat, the state of repair of cars, and the people. Particularly the people.⁶

Erlich's comment is cause for concern. Who will consciously regulate the number of human beings? Are individuals and families to be sacrificed for the benefit of the policies promoted by population control "experts"?

Authentic development does not attempt to transform society by trampling upon the rights and the needs of the individual human lives and of the individual human families of which society is comprised.

Yet such perverse notions remain alive among the population establishment.

Only last September, at a Commonwealth Parliamentary Association meeting, the Isle of Man's Minister of Local Government and the Environment emphatically endorsed the use of birth control to limit population growth regardless of what were termed "religious taboos".⁷

In the face of such a narrow vision of the human person, we must re-state with ever-fervent conviction that authentic development never seeks to divorce men and women from the values they hold dear.

The onus rests on all leaders at all levels within society to identify their own priorities and needs according to the needs of the people in their cultural, religious and economic dimensions. And to judge and lead in light of this understanding.

Failure to do so may bring with it the danger of national development being hijacked by a minority, brainwashed by a foreign anti-life culture, who might not have the authentic development of the people at heart.

It is, indeed, high time that this question be asked: Do the so-called development "experts" who diagnose "people" growth as "the problem", and prescribe population control as "the solution" really have the authentic development of the people at heart?

And why is it that nowhere is this deceptive population control mentality more alive than in the international funding agencies, various non-government organizations, and in the very United Nations bodies which are generally held in high esteem?

A Prominent Body

To seek answers to these major questions, let us consider one of the more prominent, and generally respected of such United Nations bodies: the World Health Organization.

We all know WHO's motto: "Health for All by the Year 2000". An admirable objective.

But, let us, for a moment, turn our attention to one of the means by which the World Health Organization is seeking to achieve this objective, and examine whether this seeks to promote authentic development.

Let me go back to the early 1970s. The era of Paul Ehrlich and the *Population Bomb*, of the Club of Rome and *The Limits to Growth*.

And in this climate of fear and hysteria, the World Health Organization took a most significant step and established the WHO Extended Program of Research, Development, and Research Training in Human Reproduction.

The name "Extended Program" was later changed to "Social Program", but its aims remained the same: "...to increase understanding of the human reproductive process leading to the development of a variety of safe, acceptable, and effective methods for the regulation of human fertility".⁸

Eighteen years on and we now know how, in effect, the World Health Organization defines "safe, acceptable, and effective methods of fertility regulation".

It means destroying unborn human beings.

Who is behind the development and testing of the anti-hCG vaccine? The WHO Special Program's Task Force on Vaccines for Fertility Regulation. And why? Their 1985 annual report may give us a clue as to the values by which they allow themselves to be guided: "The embryo . . . represents an ideal target for immune attack since it comes into contact with the maternal circulation at a very early stage in its development."⁹

Who is behind the attempts to test the abortifacient drug RU-486? WHO's Special Program's Task Force on Post-Ovulatory Methods for Fertility Regulation.

The World Health Organization: Global Strategy of "Health for All by the Year 2000". But not for the unborn child!

Those of you who are active in the promotion of responsible parenthood through Natural Family Planning may know that the Special Program does have a Task Force on Methods for the Natural Regulation of Fertility.

But, what did this Task Force say about Natural Family Planning in the same 1985 report?

Since for the most part, NFP programmes and services have been developed in a private network outside the major public family planning programmes, and since a majority of programmes have a religious origin and basis of operation, some of the research that has been conducted by them has rather limited applicability and relevance.¹⁰

This represents a calculated slur upon the work of those involved in Natural Family Planning! Upon all those committed, pro-life people — including from my own country, Drs. John and Evelyn Billings — who have sought tirelessly to improve and promote natural methods of family planning; methods which operate within the framework of, and with respect for, economic, social, cultural, and spiritual dimensions; methods which emphasize mutual responsibility; methods which are not open to abuse and are more effective, both in the short and long term.

In order to "rescue" NFP from its apparently religious, and therefore irrelevant status, the report pompously states: "Being part of a public sector agency without political or religious affiliations, the Special Programme is able to assess NFP methods in an impartial and unbiased manner."¹¹

We then learn that the Task Force decided not to initiate any research studies in NFP during that coming year. The Special Program's Scientific

and Technical Advisory Group had given such research low priority.

The advisory group had proclaimed, instead, that the top priority research areas were the anti-hCG — the anti-life — vaccine, and RU-486, the anti-life drug. That is what the “respected” World Health Organization meant by “impartial” and “unbiased” assessment.

This is not authentic development!

It is no accident that WHO is so deeply involved in such anti-life research. Its director-general, in an address to a 1983 conference in Stockholm, made the significant point that WHO’s **perceived neutrality** made it “a most appropriate instrument to deal with an area as sensitive as that of family planning research.” It could use and abuse its good name to cut across sensitive political and cultural boundaries promoting collaborative research, and coordinating and disseminating information.¹²

Such so-called “neutrality” is not neutral. It is fundamentally anti-life. Far from providing unbiased and impartial assessments, this Special Program is actively developing and promoting new weapons of chemical warfare to be unleashed upon an unsuspecting world and aimed at unborn human beings.

It is clear that the world is having the belief gradually imposed upon it that “Health for All by the Year 2000” will require that the inherent right of the unborn child to **life itself** be extinguished.

But, the World Health Organization is not alone in the respected international bodies abusing their perceived neutrality, and engaging in the deceptive anti-life activity which threatens to forever tarnish their hard-earned reputations.

In its 1988 *State of the World’s Children* report, UNICEF, the United Nations Children’s Fund, defines “high-risk pregnancy” as “becoming pregnant before the age of 18, . . . before the last-born child is two years old, . . . after having more than four children, or after reaching the age of 35.”¹³

There is nothing new in this. Those involved with Natural Family Planning counseling will be familiar with the conditions which are conducive to the health of mother and child.

What is new is the solution UNICEF offers. To overcome the health risks associated with pregnancy, UNICEF demands that parents be “empowered with *today’s* knowledge about safe pregnancy and childbirth”.¹⁴

Will safe pregnancy come to mean the necessary elimination of those unborn human beings unfortunate enough to be conceived outside of the “safe pregnancy” conditions?

According to an address by World Bank President Conable in Kenya on Feb. 10, 1987, even the World Bank’s “Safe Motherhood Initiative”, which laudably aims at large-scale improvements in maternal health, sees birth control programs as a major element in implementing the initiative.

Will their officials find a place in economic assistance packages for the anti-life birth-control weapons being developed by WHO?

The World Bank, WHO, UNICEF, together with the United Nations Development Program and the Rockefeller Foundation, comprise the Task Force for Child Survival.

A meeting of this Task Force took place in Talloires, France from March 10-12 this year and a major session of the meeting was devoted to "state of the art: family planning for child survival and safe motherhood".¹⁵

The question must be asked: will this result in more coordinated and deceptive measures to push anti-life birth control packages labelled "child survival"?

But, what is the bottom line?

Are we being asked to accept without question, an ideology which, as the years advance, will come to mean that the inherent right to life of the unborn child *must* fall victim to the perceived demands for "better health" made by the rest of the population?

Will the unborn child be sacrificed so that his or her older brothers and sisters can have better health, faster growth, and even have, as a Johns Hopkins University report recently claimed, higher levels of academic achievement?¹⁶

Can this be termed *authentic development*?

Officials' Beliefs

Some officials and advisors in the World Bank, UNICEF, and the World Health Organization may sincerely believe that the increased use of more "efficient" birth control technology will improve maternal and child health. One assumes that they mean well.

But, meaning well is not good enough! It is not sufficient when one is dealing from a position of strength and of trust with other countries and with other peoples.

I sincerely ask of these officials: have they ever stopped to consider whether "improved health", and the offering of "neutral" advice is really the bottom line?

Have they ever taken the time to discover what the ultimate objective and rationale are of those who are devoting their talents to the abuse of medicine for the extermination of unborn human beings?

Are they aware that the population establishment may be using such respected organizations as a means by which to impose their own anti-life mentality upon an increasing number of the world's people, particularly in the developing countries?

And of most significance, do the thousands of loyal UNICEF, WHO, and World Bank workers who have devoted their lives to promoting the health and authentic development of the people of the world, wish to see the reputation of the organizations they serve tarnished by the actions of a handful of anti-life elites?

As an indication of the extent to which the anti-life mentality of the

population establishment is showing signs of engulfing these hitherto reputable organizations, let us consider what the scientists contracted by WHO to develop the anti-hCG vaccine have to say about it.

Prof. Vernon Stevens of Ohio State University, a man who has worked with WHO on the vaccine since the early 1970's, was in Australia in 1986 when Prof. Warren Jones was conducting the first ever Australian trial. And Professor Stevens had this to say: "The vaccine will revolutionise family planning in developing countries"¹⁷

Commenting on the importance of the trial, Professor Stevens said that it was the "most important of its kind ever conducted in Australia". And why? Because of its "potential impact on population overgrowth in developing countries."¹⁸

And what did Professor Jones tell the world about the new vaccine?

The vaccination could . . . prove to be extremely effective in solving the problems of birth control in developing countries.

The vaccination principle is very attractive in developing countries — they have already been introduced to vaccines and they know that it is 'good medicine'.¹⁹

Such statements raise fascinating, and fundamental questions.

Is exterminating early human life "good medicine"?

Is it "good medicine" when its developers see it as just another weapon in the fight against what they term "overpopulation"?

Is it "good medicine" when those developing it believe that the vaccine's best selling-point is that mothers from the developing countries will be led to believe that, just like any other vaccine, this one will be "good for their health"?

Is it "good medicine" when it is designed so as to "protect" the mothers of the Philippines and other developing countries against the "disease of pregnancy"?

Newborn a 'Disease'?

Have "good medicine" and world health policy come to this: that for the first time in human history our newest members of the human race are to be regarded as a disease for which a vaccine must be found?

The dangers are real and imminent.

Professor Jones has completed the Phase I trial in Australia on previously sterilized women. The Phase II and Phase III trials will involve fertile women. Professor Jones has said, and I quote, that "a Phase III trial . . . will look at the effects of the vaccine on several thousand women from different backgrounds, **but primarily from third-world countries.**"²⁰

You have all heard, no doubt, of the controversy which surrounds the drug Depo Provera. I raised the issue of its dangerous side effects 10 years ago in the Australian Parliament. Although the drug has fallen into disrepute in some industrialized countries, it is still being used in a number of developing nations with the connivance of the international population

control establishment.

Allegations have recently emerged about its use on teenage girls in remote areas of at least one country under the guise of state-run immunization programs. As they lined up for their shots, their parents were told that it was just part of the routine immunization program.

The new anti-hCG vaccine will turn such abuses into an art form.

Unless we make our voices heard today, this new and sinister weapon of the new cultural imperialism will, within the next few years, be unleashed upon the people of the developing world.

Authentic development — development which promotes free but responsible parenthood, and which respects the economic, cultural and spiritual dimensions of the human person — will suffer a devastating blow.

Let us turn to what the World Health Organization has had to say about so-called “post-ovulatory” methods of fertility regulation like RU-486.

We read in the Special Program’s 1985 Report that such methods “constitute a more pragmatic approach by offering fertility regulation if and when needed.”²¹

Eventually the authors of the report dispense with any pretensions of “neutrality”, and inform the reader that the post-ovulatory methods being developed are “essential to remedy the consequences of contraceptive failure.”²²

Again, is health the bottom line?

It is the bottom line when Professor Beaulieu, the father of RU-486, claims that the new drug will bring about a completely different attitude to sex, and will help, so he believes, to bring about the real freedom of rural women?²³

The interpretation one must place upon such deceptive use of language by the World Health Organization is that its research in the field of population control represents not efforts to improve health care, but a calculated attack on life itself!

Health for all, but not for the unborn child.

This is part of the new cultural imperialism. The imposition of anti-life, anti-child values and **unauthentic** development under the guise — the often heavy guise — of “improved” health services.

The new cultural imperialism — the relentless drive towards rendering infertile the women of the developing world; to make them slaves to drugs and anti-life devices; to control human population, in the words of the anti-life Prof. R. V. Short, by controlling the women’s corpus luteum;²⁴ and the relentless imposition of anti-life, anti-child values.

It is in the face of these anti-life threats that I salute the constitutional recognition given by the Government of the Philippines to the unborn child.

This is a most significant and praiseworthy achievement! Truly a “New Era for Life”! For it recognizes what many scientists attempt to ignore: that human life begins at conception, and human life as a basic human right, deserves the full weight of legal protection which a government can provide.

Rights and Principles

Rights embody principles we cherish. They form the basis for action, for the adoption of measures designed to promote them.

For far too long, we have allowed the population establishment to dictate to the people of the world what rights they should possess.

In United Nations resolutions and declarations dating from the mid-1960's, and at UNFPA, International Planned Parenthood, and Population Council conference after conference, the world has been informed of their reproductive rights.

We have learned of the rights of parents to information about, and access to, all the means of contraception available. We have learned of the rights of parents to a healthy child, and the rights of every post-birth child to be wanted.

Yet, these are slogans. Powerful slogans in the armory of the population establishment. Slogans which promote *unauthentic* development, and which seek to rationalize and legitimize the elimination of those tiny unborn human beings not wanted because of their timing, their health, their nuisance-value, and more recently, because of their sex.

This is why the constitutional recognition of the right of the unborn child to life matters. This is why we must be unashamedly pro-life, and reject the unauthentic values which seek to promote rights in such a way as to extinguish the rights of others.

Although the right to life of the unborn is now enshrined in the Constitution by the Philippines people, you must be aware of institutionalized forces of powerful elites which are bent on undermining this democratically-expressed principle.

One of the problems I have faced in Australia in attempting to secure legislative protection for the human embryo against destructive experimentation has been the concerted opposition mounted by the health and scientific bureaucracy and by the research establishment.

A prominent member of the international embryo research establishment is Prof. R. V. Short. He gave evidence before the Senate Committee set up to examine the legislation I had proposed to outlaw destructive experiments on human embryos.

When I asked him why the experimental tests were not being undertaken on non-human higher primates such as gorillas, chimpanzees, and orangutans, he replied: "Because they are endangered species." I then asked: "So, you are able to do it on humans?" Professor Short replied: "We are not endangered".²⁵

It was this same Professor Short who, in 1985, served on the WHO Special Program's Scientific and Technical Advisory Group — the same Advisory Group which belittled Natural Family Planning and decreed that the high priority research areas must be the anti-life vaccine and RU-486.

You may be interested to know that another member of that 1985

Advisory Group was Dr. R. Apelo from the Philippines, a man who, in September, 1986, published the findings of a WHO trial of Depo Provera undertaken right here in Manila.²⁶ Did his views, expressed at the time on this WHO advisory group, reflect the same lack of respect for life as shown by Professor Short?

Is the population control and human embryo research establishment attempting to mold in its own image the medical, scientific, and development personnel of the developing countries? Under the guise of "institution strengthening", or "scientific exchange"?

Only a few days ago, I was informed that a Western development funding agency had received an application from the International Women's Health Coalition in New York for money which would enable two people from the Philippines to attend the Christopher Tietze International Symposium, "Women's Health in the Third World: The Impact of Unwanted Pregnancy", in Brazil in late October, this year.

The two Philippines people nominated to attend this conference are Dr. Florence Tadiar, the director of the Women's Health Care Foundation, and the Institute for Social Studies and Action (ISSA), and Ms. Reena Marcello, the program director if ISSA, and the primary counselor for the Women's Health Care Foundation in Manila.

The application notes that ISSA has been in the forefront of two coalitions in the Philippines — one of family planning NGO's, the other of women's groups — to "protect women's access to modern contraception". It also mentions that two major population control establishment organizations, the Ford Foundation, and the Population Crisis Committee, are currently supporting ISSA's public education campaign in the Philippines "in defense of women's reproductive rights".

One of these organizations, the Ford Foundation, stated in 1985 that its "overseas offices will be encouraged to fund projects that . . . support better access to safe, humane, legal abortion."²⁷

Challenges Being Mounted

These are the sort of challenges being mounted by the international population control establishment, and their local clones, against the New Era for Life we are celebrating here today.

I refer, finally, to the Draft Convention on the Rights of the Child. Is this not an example of what has happened in the area of basic human rights over the last three decades?

As late as 1959, the institutional health and human rights environment was such that the UN Declaration of the Rights of the Child was adopted and specifically applied to rights "before as well as after birth".

In 1988 these words are missing from the Draft UN Convention on the Rights of the Child.

I wish to pay tribute to the International Right to Life Federation for its strenuous efforts to remedy this inhuman state of affairs. And I would ask

Mr. Sherwin to convey appreciation to those other human rights supporters with whom he is working towards this end.

It is our democratic right and duty to demand of our governments that our representatives and observers insist that the words "before as well as after birth" as contained in the 1959 Declaration be re-stated in the Draft Convention which is due for its second reading toward the end of this year.

As the era of darkness for the right to life of the unborn had just commenced prior to the 1959 Declaration, so the New Era for Life has now begun.

Let us celebrate it here, proclaim it when we return to our homelands, and work together to expose the machinations of the population control elites, to resist their cultural imperialism, and to work for authentic development of our nations and for human rights for all — including the unborn.

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