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## **Trustees of the Simon Population Trust**

Dr C P Blacker	1957–1969 (Chair)
D F Hubback	1957–1991 (Chair 1983–1991)
E Max Nicholson	1957–1984 (President 1984–)
Sir Jeremy Raisman	1957–1974
Mrs Vera Houghton (Lady Houghton)	1961–1984 (Executive Trustee)
D Casey	1966–1984 (Chair 1969–1983)
Professor P Huntingford	1970–1971
Professor R W Beard	1971–1974
G M Filshie	1974–1984
Penny Kane	1984–
Wendy Savage	1984–
Dilys Cossey	1984–
Alastair Service	1984–1992
Sir Richard King	1985–1998
Dr Valerie Beral	1985–1988
Dr Tony Smith	1985–1993
Dr Allan G Hill	1989–
Dr Kathleen Kiernan	1989– (Chair 1991–)
Dr John McEwan	1991–
John Cleland	1991–
Madeleine Simms	1991–
Tim Dyson	1991–
John Smithard	1991–

# The Simon Population Trust: A brief history

**Penny Kane**, MSc (Econ.), Associate Professor, Office for Gender and Health, Department of Psychiatry, University of Melbourne, Australia

**Correspondence:** Penny Kane, The Old School, Major's Creek via Braidwood, NSW 2622, Australia. Fax: +63 (0) 2 4846 1051. E-mail: [pskane@braidwood.net.au](mailto:pskane@braidwood.net.au)

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## Lord Simon of Wythenshawe

The Simon Population Trust was established in 1957 by Lord Simon of Wythenshawe. Ernest Simon, born 1879, was the eldest child of Henry Simon and his second wife Emily Stoehr. Henry had been born in Silesia, and came to Manchester in 1860 from Zurich; Emily was also German in origin. Henry built an engineering business in Manchester; both he and Emily were active in local affairs. Ernest was sent to Rugby and to Pembroke College, Cambridge, UK, where he took an engineering degree and became an enthusiastic polo player. Almost immediately afterwards Henry died, and at the age of 23 years Ernest inherited the business, which he built into a major industrial enterprise: the Simon Engineering Group.

Ernest Simon was also active in public life. He had become an ardent adherent of Sidney and Beatrice Webb, after reading the *Minority Report of the Royal Commission on the Poor Law*. The Webbs launched him into the London political swim in 1911. Through the influence of his mother Emily, who was a leader in the Manchester Women Liberals, he was elected unopposed to the City Council in 1912. In the same year he married Sheena Potter, a postgraduate student at the London School of Economics. He had met her through Eva Hubback, wife of a lecturer at Manchester University, who was to be killed in the First World War, leaving Eva with three small children. Ernest assumed paternal responsibility for the children, and one of them – David – was a founding Trustee of the Simon Population Trust.

Ernest Simon became Lord Mayor of Manchester in 1921 and afterwards stood as Liberal candidate for Withington. He was briefly (1923–1924) Member for Withington during the MacDonald government but lost his seat when Baldwin was restored to power. Re-elected in 1929, he took part in the campaign to make birth control advice available through women's welfare clinics, and was for the short period of a fortnight Parliamentary Secretary to Sir Austen Chamberlain, Minister of Health, before the 1931 General Election ended his parliamentary career. Since the mid-1930s his wife Sheena had been an active member of the Labour party, and in 1947 he accepted a Labour peerage and became Chairman of the British Broadcasting Corporation (BBC).

Added to his interests in local government, town planning and housing was education. He was

Treasurer and Chairman of the Manchester University Council for almost 30 years, and in 1946 had been an unsuccessful candidate for the Combined English Universities seat that had been vacated by the death of Eleanor Rathbone.

In his later years, Lord Simon became increasingly concerned about issues of rapid population growth. Elected a life fellow of the Eugenics Society in 1936, he was on its Council from 1953 to 1956. Together with the Nuffield Foundation, the Eugenics Society financed the Political and Economic Planning (PEP) Research Group on Population – with Lord Simon as its Chair – whose report *World Population and Resources* was published in 1955. Amongst its conclusions were the need for vigorous birth control policies in many parts of the world and the need for research into simpler methods of fertility control.

'It is hoped' the *Report* begins 'that this independent Report may do something to fill the obvious gap and to stimulate more responsible and practical discussion. The problem is too grave and too immediate to be relegated to little-read volumes and to specialised academic gatherings. It is time that those entrusted with the future welfare of peoples began to take their responsibilities in this direction more seriously and the Report tries to facilitate their task by relating the available information (from official and other sources) to actual problems and to methods of economic and social policy and administration' (PEP, 1955).

An important contributor to the PEP *Report* was Dr C P Blacker. Dr Blacker, a psychiatrist, had been General Secretary of the Eugenics Society from 1930 to 1952, and was Honorary Secretary of the Population Investigation Committee until his death in 1975 (Langford, 1988). It was the 'intimate association formed by the late Lord Simon of Wythenshawe and Dr Blacker in producing the PEP report on *World Population and Resources* (PEP, 1955) which had led to the founding of the [Simon Population] Trust' according to an early set of Trustees' Minutes.

During the 1950s Lord Simon had begun to make annual grants of £500 to the Family Planning Association (FPA). He wrote to Margaret Pyke that this contribution was intended for educational work, not for clinics: he was not interested in clinics, but in the politics of family planning and in research. He also made annual grants of £1000 to the International

Planned Parenthood Federation (IPPF) (of which C P Blacker was a Vice-Chairman), and supported the Walworth Women's Welfare Centre for its training of overseas doctors.

### **The Simon Population Trust**

The Trust which Lord Simon established in 1957 had C P Blacker as its chair and David Hubback and E Max Nicholson (Chair of PEP and Director, Nature Conservancy) as Trustees together with Sir Jeremy Raisman to provide financial expertise. Its objects were:

'to promote the relief of poverty and the improvement of standards of health throughout the world, thereby making possible a better life for mankind by (i) promoting a better understanding of the problems of world population and resources, and (ii) encouraging such research, education or other action in any part of the world as may contribute to the adjustment of population to resources'.

Ernest Simon died in 1960, bequeathing £15 000 to the Trust. He willed a further £179 000 to the Trust to be paid after the death of his wife; this money became available in 1972. Lady Simon took a close interest in the Trust's work, corresponding with the Trustees and herself donating a further £7000. Mrs Monica Goldsmith, a niece of Lord Simon's, also gave a total of more than £20 000 to the Trust over a number of years.

The Trust was based at 69 Eccleston Square, London (home of the Eugenics Society) until January 1965; it then shared its headquarters with IPPF at 64 Sloane Street until November 1966, when both moved to Dorland House, 18–20 Lower Regent Street, London. It held its first meeting in 1961; Vera Houghton joined it as Executive Trustee. She had been Secretary of IPPF throughout its first decade of the 1950s (Suitters, 1973) and at that time lived, with her husband Douglas Houghton (later Lord Houghton of Sowerby) in a flat below Lord Simon's in Marsham Court. For the first year, Vera Houghton also served as the Trust's Secretary; she was followed by S Kordick from 1962 to 1964, and Mrs Joyce Johns from 1965 to 1967. Donn Casey, who had become a Trustee in 1966, then served as Secretary and continued to do so after he became Chair 3 years later. In 1970 the Trust moved its address to his, in Newmarket Road, Cambridge.

### **Early years**

From the start, the Trust considered that its independent position, as defined by Lord Simon, gave it a mandate to explore controversial issues. An appeal for funds was launched in *The Times* (5 January 1963) which reported that the Trust provided support for encouragement of birth control rather than abortion in areas of the world where abortion forms part of the cultural pattern; use of midwives to spearhead the knowledge of birth control; improvement of methods acceptable to the Roman Catholic church; promotion of travelling fellowships for exchange of information

on surgical and other techniques; and education and presentation.

However, precisely which activities should absorb the Trust's funds seems to have been more difficult to determine. Meetings were comparatively few during the first half of the 1960s, and the Trust largely continued the pattern of Lord Simon's personal donations. The largest grants were to the IPPF (£2300) and to the FPA (£2500) for its International Campaign (now Population Concern). Walworth Women's Welfare Centre was funded for further training programmes and the Population Reference Bureau, Washington, DC, USA and the International Union for the Scientific Study of Population (IUSSP) also received small grants. The Population Investigation Committee received £1900 to finance a special supplement to *Population Studies*: this was devoted to T H Hollingsworth's *The Demography of the British Peerage* (Hollingsworth, 1964), a pioneering study in historical demography.

Between 1962 and 1967, the Trust also contributed £1300 to the Reproductive Research Information Service Ltd, Cambridge. This was Donn Casey's non-profit organisation, from which Casey published the *Bibliography of Reproduction*, in pre-computer days one of the first attempts to compile and regularly update a comprehensive research bibliography of reproductive biology. It attracted over 800 subscribers worldwide in the first 2 years. Casey relinquished the Bibliography when he became the Trust's Secretary, but it continued for 30 years and was eventually taken over by Oxford University Press. Initially it was largely underwritten by Lord Casey, Donn's father. He had been Governor of Bengal 1944–1946 and later (1965–1969) Governor General of Australia, and both he and Donn's mother Maie were keenly interested in population issues: in 1960 Lord Casey noted that at a Buckingham Palace dinner 'Maie gave the Queen an indoctrination on birth control' (Hudson, 1986). Donn himself had become interested in population issues in 1958; he first met C P Blacker at the IPPF conference in Delhi a year later.

In 1964 the Trust attempted to make a grant to the Abortion Law Reform Association, of which Vera Houghton was now Chair. The Charity Commission ruled that this was unacceptable, so the Trust converted its donation to an interest-free loan. In the following year, the Trustees reiterated that they were enabled to explore controversial developments that other organisations thought it improvident to touch: 'for example, clandestine abortion has been practised for many years in the villages of most underdeveloped countries. It might be helpful from a medical and demographic standpoint if permissible indications were legally defined and facilities provided'. It was agreed that the Trust should take an interest in evolving procedures which, though not controversial from the moral or political standpoint, were in need of further testing or exploration, such as the reversal of vasectomy.

### **Sterilisation projects**

Dr Blacker had long been interested in the subject of sterilisation for fertility control. Indeed, Lord Simon had asked him to write the section on sterilisation in the *PEP Report*. Both male and female sterilisation for fertility control were widely believed, by the medical profession and others, to be illegal in England. During the early 1960s, however, the various medical defence unions were seeking legal counsels' opinions and the issue was beginning to be discussed. Dr Blacker decided the time was ripe to move into the area, and a memo he wrote in 1966 encouraged the other Trustees to support a campaign to make sterilisation better known and more widely available. A careful review of the UK and world position on sterilisation was published in *The Lancet*, and a press conference was held.

With Sir Dugald Baird, Dr Blacker persuaded Sir John Peel, President of the Royal College of Obstetricians and Gynaecologists (RCOG) to 'undertake inquiries into the practice of female sterilisation'. When first approached, Sir John said that he and his Council had been under the impression that sterilisation was illegal in the same sense as abortion. 'Indeed, he seemed glad to have this point clarified' wrote Dr Blacker. 'If he convinces his Council that sterilisation is not unlawful, we (the Simon Population Trust) will have done something worthwhile in putting this across.'

There were in fact two RCOG investigations: a questionnaire sent to individual doctors, and another study – the joint enterprise of the College and the Trust – on admissions to hospitals during 1966. These were designed to elicit the practices of individual members, and how far the number of sterilisations varied between hospital regions. The findings caused some surprise. Most Fellows and Members of the College were 'little if at all deterred by legal fears or moral scruples from sterilising women when they think the operation is appropriate'. About 2% of all hospital admissions were for sterilisation, but the percentage of admissions was as high as 4% in some hospital regions. Altogether, there was less hesitation than might have been supposed among surgeons about sterilising women for broadly social (non-clinical) reasons. Reported in the *British Medical Journal*, the research did much to promote female sterilisation and to give doctors confidence about practising it.

Vasectomy, however, was a different story. It was widely believed to be not only illegal, but unacceptable. As late as 1968 there was still an embargo on vasectomy by the FPA. Undeterred, Dr Blacker held discussions with the Medical Defence Union (MDU) and the Trust appointed an advisory group to undertake a demonstration project. Letters describing the project were sent to genitourinary surgeons and gynaecologists. The Trust published a pamphlet entitled *Sterilisation for Family Welfare* (Simon Population Trust, 1967) outlining the legal position, the referral system from a general practitioner (GP) to a surgeon via, if necessary, a list compiled by the Trust, and advising on vasectomy

procedure and other issues. Undertaking vasectomy could involve some unusual problems. 'Inquire' the pamphlet warned 'if entailed estates are involved. One of us received an application from an unstable young man in a line of succession who wanted to be sterilised because it would annoy his father, whom he disliked.'

The Trust established a vasectomy clinic at Crediton, UK under the honorary Directorship of Dr L N Jackson, with Patricia Avant assisting. Later the Trust gave some support to an independent clinic (actually named the Simon Clinic) in Swindon, UK, under Mr J K Monro, and others at Bridgewater, UK (W Houghton) and Yeovil, UK (P Knipe). The Elliot-Smith Clinic, at the Churchill Hospital, Oxford, UK was taken on in 1970, to give it charitable status for tax purposes, but the Trust only paid its book-keeping costs. Using a restricted legacy, the Eugenics Society provided financial assistance for those men who could not afford to pay the surgeons.

In the Project's first year, some 700 men had vasectomies. Many had probably been alerted by the huge coverage of the project in newspapers and magazines. One case failed, resulting in a lawsuit, and the Trust revised its pamphlet to warn of the need to extend post-operation contraceptive use to 8 weeks (rather than the initial recommendation of 1 month). The Trust held a Seminar in May 1968 in which participants agreed that vasectomy was snowballing, and that the actual numbers carried out were many times the numbers reported to the Trust. Participants also suggested that the Trust could now concern itself more usefully with technical, rather than publicity, aspects of vasectomy.

The Trust's record of its project – *Vasectomy: Follow-up of the First Thousand Cases* – was published in 1969, and a report based upon it appeared in *The Practitioner*. The reports received enormous publicity, providing as they did reassurance that vasectomy was simple and did not reduce libido or sexual function. Public discussion of vasectomy became frequent, and demand for services grew. The FPA announced it would extend vasectomy services, following a successful trial in Cardiff. By 1971 the media personality Michael Parkinson was able to discuss his vasectomy on television (thus creating massive further publicity) and the fact that the operation was proving popular in Britain undoubtedly had an effect in other countries. In 1973 the first comprehensive survey of world laws on voluntary sterilisation for family planning (Stepan and Kellog, 1973) was published in the US.

During the four and a half years of the sterilisation project, some 60 000 inquiries were dealt with and about 9000 men had vasectomies arranged via the Trust's list of surgeons. How many other men made their own arrangements is unknown, but about half of the country's GPs had contacted the Project and thus knew to whom to refer their patients. After 1970, the Trust ceased to fund the Crediton clinic, which continued with separate charitable status. Dr Jackson had received some £3000 in donations from satisfied



clients and Dr Monro had donated £7200 from his fees; as a result the net cost of the project to the Trust was £11 000.

In November 1969, a delegation from the Trust visited the Minister of Health, Richard Crossman, to urge that vasectomy be included within the National Health Service (NHS). This approach was not successful, although the Department of Health showed some sympathy. During the 1970 General Election, a manifesto organised by the FPA and signed by the Trust as well as the Brook Advisory Centres, Abortion Law Reform Association, Pregnancy Advisory Service, Birmingham (later British) Pregnancy Advisory Service and the Conservation Society, was circulated to parliamentary candidates urging greater government involvement in family planning, including sterilisation. In that parliament, Vera Houghton suggested that a new approach should be initiated: a Private Member's Bill. Mrs Houghton, together with Alastair Service (later to become a Trustee), had recently initiated the Birth Control Campaign, a dynamic pressure group. BCC drafted an amendment to the NHS (Family Planning) Act 1967 to enable local authorities to provide a voluntary vasectomy service. Phillip Whitehead, Labour Member of Parliament (MP) for Derby North, agreed to introduce it as a Private Member's Bill, as he had drawn a high place in the ballot. After considerable debate (including the Bill being dubbed a 'ram's charter' by fellow MP, Leo Abse) and a number of references to the Trust's project, the Bill was passed in October 1972 (Leathard, 1980).

### Outpatient suction abortion

After a long campaign an Abortion Act permitting abortion under various social as well as medical circumstances was passed in 1967.

With the encouragement of Dr Malcolm Potts, then Medical Director of IPPF, the Trust decided to support a study of outpatient abortion using the Karman catheter, which was beginning to become popular in the US. Professor Richard Beard organised the trials, which were undertaken at Dulwich Hospital, London, UK (part of the King's Hospital Group), with Dr Stella Lewis and Mrs Shirley Lal, a social worker who became the counsellor. An encouraging report of the first 127 cases appeared in the *British Medical Journal* (Lewis *et al.*, 1971); besides the success of the technique itself, the service had resulted in 87% of the women returning 6 weeks later for contraceptive advice. Followed up a year and a half later, 81% of the women contacted were still using reliable methods of contraception; this too was reported in the *British Medical Journal* (Beard *et al.*, 1974). In addition, amongst those women contacted, 'adverse psychiatric and social sequelae were rare' (Greer *et al.*, 1976).

Discussing the Trust's achievements in 1973, Professor Beard wrote:

'I know little of the Trust's involvement with vasectomy except that without the initiatives from

Crediton and Oxford it is unlikely that acceptance of that procedure as one which should be available to all, would have come as soon as it did. In the field of abortion I believe that the King's project has achieved: (i) the introduction of the safest method of dealing with unwanted pregnancies up to 12 weeks' gestation that has already been adopted throughout the country; (ii) a political impact that has almost certainly ensured that the operation of the Legal Abortion Act will remain essentially unaltered; and (iii) demonstrates that a readily available abortion service, backed up by advice on contraception, ensures that further unwanted pregnancies do not occur. In addition, the extension of the Karman technique to incomplete abortion in Uganda is likely to revolutionise the management of this problem in underdeveloped countries. All this for £20 000.'

The 'political impact' to which Richard Beard was referring included the Lane Committee Report on the Working of the Abortion Act (1974). This Report referred to the King's study papers and amongst its recommendations was that 'day-care of abortion patients should be used where appropriate in the [NHS] and in the private sector'. The 'private sector' included two major charities – the London- and Birmingham-based Pregnancy Advisory Services – for which the Trust had provided start-up grants in 1969.

Outpatient abortion avoided the need for a general anaesthetic and hospital stay for women who were < 10 weeks pregnant; it was safer, less invasive and considerably less costly than conventional dilation and curettage. One problem in extending the use of outpatient abortion techniques in the poorer countries was that the suction pump required electricity, as Dr R T Ravenholt of the United States Agency for International Development (USAID) and Malcolm Potts pointed out. The Trust decided to investigate cheap alternatives, and Dr Lewis suggested the hand-pump of the Malstrom vacuum aspirator. Various improvements were made and both hand- and foot-pumps developed with the assistance of Donn Casey, who had become Chair of the Trust in 1969. Rockett of London helped to develop the hand-pump further and marketed it in London and New York. Donn Casey interested the Bombay Surgical Company in India in another form of the pump that they manufactured and marketed at a fraction of the cost of conventional electric machines. While the version they produced was far from optimal, it led to imitations and innovations by other firms, so that Casey wrote 'preliminary evidence in 1974 suggested that the hand-pump method is more prevalent than the electric model in India'.

India legalised abortion in April 1972. Two meetings in Delhi the previous month – the XVI All India Obstetric and Gynaecological Congress and an International Conference on Family Planning – offered opportunities to publicise the success of outpatient abortion techniques. The Trust arranged for Dr Lewis to present the King's study at both meetings

and Mrs Lal to speak at the latter meeting. A 20-minute film made by IPPF of the technique used at Dulwich Hospital was shown several times. The Trust also paid for 50 copies of the IPPF film so that it could be distributed by National Education and Information Films Ltd, Bombay.

Among those who had worked at King's College Hospital was Dr Marcus Filshie. Moving to Uganda, he used the Lewis aspirator in Kampala and eventually asked the Trust for funding to make a colour film: *The Portable Karman Curette Equipment - For Incomplete Abortion in Africa*. Produced at a cost of £1500, this 15-minute film was translated into French and Spanish with the assistance of IPPF. That organisation also paid for Filshie to visit several countries in southeast Asia and Latin America to show the film and demonstrate the technique; in response to the interest created, IPPF also donated 110 Lewis aspirators and 90 copies of the Filshie film to various organisations in those countries. A companion paper to the film was published in *The Lancet* (Filshie *et al.*, 1973)

### **Prostaglandins**

The other major field of promising fertility research at the beginning of the 1970s was in prostaglandins, which were thought to have potential for inducing menstruation. Whether in the form of a once-a-month pill, or an impregnated tampon, the hope was that prostaglandins might provide women with a simple alternative form of fertility control. A pioneer in this work was Professor S M M Karim of Makerere University, Kampala, Uganda and the Trust provided for his research and clinical trials on prostaglandins as a menstruation inducer. The Trust also supported Mr Ian Craft, of the Institute of Obstetrics and Gynaecology and the Chelsea Hospital for Women, London, UK in his study of prostaglandin analogues. Later, Mr Craft developed an interest in the reported use of certain plants in developing countries as abortifacients, and the Trust contributed to the costs of identifying, importing and analysing these. In all, the Trust spent more than £20 000 on this area of research but their investment, like those of other agencies which hoped for success in this field, yielded somewhat disappointing results.

### **'No-baby' bonus**

A further disappointment was an ambitious scheme to test the proposition that economic security would reduce family size in developing countries. Recognising that in rural areas the desire for children was powered by economic need to a significant extent, the Trust decided to identify a test area of some 25 000 people in Asia, in which levels of bonus for avoiding births could be offered, in order to see whether there was a direct relationship between size of bonus and drop in fertility. If such proved to be the case, governments could select their own level of incentive, balancing their desire for reductions in population growth against other budget claims.

A seminar in 1974, organised by Professor E M Rogers of the School of Public Health, University of Michigan, MI, USA and funded by the Trust, explored the topic, and Donn Casey visited India several times to try to set up a project with the Council for Social Development. Disappointed by the bureaucracy he encountered, he hoped to reduce the scheme in size and complexity and to deal directly with villagers, but the difficulties proved insuperable. He eventually decided with Kingsley Davis that industrialisation and rural-to-urban migration and the resulting upward social mobility were probably the 'only hope for the future'.

### **The second phase**

The Trust's capital had been reduced, by 1974, to around £50 000. This was the result partly of heavy spending, but also the stock market collapse in 1972. Donn Casey, who had been increasingly worried about declining yields, decided to act. In a more than usually exuberant memo, he wrote to the Trustees: 'I have now made arrangements ... to move into precious stones, gold coins, [rare] books and fixed interest, according to the attached sheet ....' The attached sheet consisted of coloured sketches of the rings and diamond necklace which he had purchased, together with drawings of a pile of Krugerrands and some antiquarian books, and a typed summary of their total value.

It was not only the decline in capital which caused concern, but galloping inflation. Running at more than 15% a year, it had undermined the value of Lord Simon's bequest to the point where the remaining funds were unlikely to achieve the impact that earlier, and considerably smaller, grants had done. The Trustees faced three alternatives. First, they could invest the majority of the remaining capital in one or two major initiatives; at one point it looked as though the 'no-baby bonus' scheme might qualify. Second, they could restrict themselves to small-scale support for worthy causes. Or third, they could invest heavily in some activity that had the potential to bring in new capital. The strategy that eventually evolved was a mixture of the two latter courses.

They continued to make a number of small grants. Dr Peter Huntingford, who had briefly been a Trustee before being appointed to a post in India, was given £100 for training Indonesian paramedics to insert intrauterine devices (IUDs). Dr RG Edwards received £200 to help set up the British Society for Population Studies. Penny Kane was awarded £50 towards the cost of her first study tour of China.

Some of the grants followed upon earlier initiatives. Thus, for example, Anne Jaquier was supported in her research on vasectomy immunology. Antibodies were thought to develop in men as the result of vasectomy; her results indicated that autoimmunity in sperm was not connected to obstructive infertility.

After a long period of continuous population growth, it was apparent by the late 1970s that Britain was approaching zero growth or even a decline in

population. 'In the absence of good non-governmental assessment of the situation and the evidence of bad decisions by government based on faulty interpretations of demographic trends' the Trust commissioned John Ermisch, of the Policy Studies Institute, to undertake research into current population trends and their implications for policy in major areas, such as education, housing, and pensions. Further support was provided by the Sir Halley Stewart and Joseph Rowntree Memorial Trusts; the resulting book – *The Political Economy of Demographic Change* – was published by Heinemann in 1983 (Ermisch, 1983). The Trustees decided that a short pamphlet, highlighting Dr Ermisch's main arguments and findings, would reach a wider audience and this was prepared by David Hubback (1983).

Ian Craft had in 1983 attended, at the Trust's expense, a meeting in Minneapolis, MN, USA on the hysteroscope. Excited by the possibilities it offered for placing some type of plug in the uterine tubes as a method of sterilisation, he and Donn Casey began to develop various prototypes.

### **Sterilisation: the Filshie clip**

Simultaneously, Donn Casey was working with Marcus Filshie (who had moved to the Department of Obstetrics and Gynaecology at the University of Nottingham, UK, and who became a Trustee in 1974) on the development of an improved clip for sterilisation. A staple-like clip offered advantages over the traditional method of cutting the Fallopian tubes and tying off the two ends. It was potentially faster and simpler, more suited to an outpatient procedure, and could perhaps provide a greater chance of reversibility. However, current versions were less than satisfactory. Casey wrote to the other Trustees in February 1974: 'A good clip *could* produce a minor revolution in female sterilisation, though of course our idea may not be particularly successful. It would be cheapish to develop.'

Casey underestimated both the clip's possibilities, and its costs. A year later, when the first human trials of a prototype were about to begin, the Trust's Minutes note 'A large number of man hours had been put into this project though it was difficult to realise how such a small device could absorb so much research'. Work on the Craft plug had to be abandoned: it was too time-consuming and detracted from the clip's development. Endless refinements were necessary to the design, and a number of experiments using different materials were undertaken. During the late 1970s, the Trust's meetings were comparatively few and almost entirely devoted to discussions about the advances and setbacks of the process.

Meanwhile the costs mounted. The Trust invested about £76 000 over 9 years, but even so many of the costs – equipment, research and development, as well as his own time – were met by Donn Casey from his personal resources. In 1981 he set up a small factory, with five part-time workers, to mould the silicone

rubber linings onto the titanium clips. Almost immediately, he realised that the small-scale production he had envisaged was not going to be realistic with the resources available: orders had already arrived for 18 000 clips and 59 guns. His laboratory processes could not be upgraded to a production model. The Trust granted a patent license to Femcare Ltd of Nottingham, UK in 1982, by which time more than 9000 women in 12 countries had taken part in the clinical trials. Failure rates of the process were around 2.7 per 100 cases, which was about half those of earlier clips for female sterilisation.

### **The Trust re-forms**

The Filshie clip was a major contribution to female sterilisation technique: it also re-established the Trust's finances. Its marketing meant that the Trust could anticipate a considerable income during the life of the patent. In the event, between 1985 and 1996, the Trust's share of royalties brought in a total of some £800 000. But the long struggle to develop it had taken its toll on the Trustees. Donn Casey resigned as Chair in January 1983, and his place was taken by David Hubback; the Trust's offices moved to 4 Provost Road; London NW3, UK. Dr Filshie resigned in order to become a director of Femcare Ltd. Max Nicholson and Vera Houghton, who had become increasingly concerned that the Trust needed to broaden its focus, decided they would seek new and younger Trustees. They and Donn Casey agreed to resign as soon as the Trust was transformed into a charitable company, which had been advised in order to limit individual liability now that the income would be derived largely from a medical product. Max Nicholson did, however, become honorary President. Penny Kane (then IPPF) was first invited to become a Trustee. Shortly after, Alastair Service (then Director of the FPA), Dilys Cossey (Vice-Chair, FPA) and Professor Wendy Savage of the London Hospital also agreed to become Trustees. A year later they were joined by Dr Valerie Beral (LSHTM), Sir Richard King (Warburg's Bank and previously Overseas Development Administration) and Dr Tony Smith (*British Medical Journal*).

David Hubback, the Trust's last link with Lord Simon, died suddenly on 17 March 1991. A new home had to be found for the Trust, and one was offered by the London School of Hygiene and Tropical Medicine (LSHTM), first at 99 Gower Street and later at 50 Bedford Square, London. Dr Kathleen Kiernan agreed to chair the Trust, and Mrs Evelyn Dodd became its Secretary. Dr Kiernan (then at City University) had been appointed to the Trust in 1989 together with Dr Allan Hill, then at LSHTM, on the resignation of Dr Beral who moved to Oxford as Professor of Epidemiology.

Five additional Trustees were appointed after David Hubback's death: Dr John McEwan (King's College Hospital, London), Dr John Cleland (LSHTM), Madeleine Simms (Abortion Law Reform Association), Tim Dyson (London School of

Economics) and John Smithard, now retired from IPPF, who became the Trust's Treasurer. Alastair Service resigned in 1992 and Dr Tony Smith a year later: other than Sir Richard King, who died in 1998, the current Trustees remain the same.

The broad policy directions of the Trust's activities remained unchanged. The Trustees agreed to continue to support research and education projects which had the potential to make an impact in a number of countries, and which could lead to improved policies or programmes in those countries. Two new areas for funding were identified: a small grants scheme, providing seed money for pilot projects or small projects which had direct policy relevance; and student scholarships, which would increase the numbers training in demography or other aspects of population. Later, a third issue was identified – the need for continued funding in support of practical domestic population concerns – and this was consolidated in an Action Research Scheme. In 1994 the Trustees recognised that the Trust's income would shortly begin to decline, as royalties from the Filshie clip ceased. It was agreed that there was little point in attempting to extend the Trust's life indefinitely through limiting spending; instead the Trust would continue to fund useful activities and dissolve itself when the time came that its funds shrank below a practical level.

### **Student support**

The Trust recognised that effective population policies and programmes in the future were dependent on the existence of trained specialists in various areas of population, ranging from programme management to anthropological studies, as well as demography. Investing in their training would, it was hoped, continue the Trust's tradition of putting comparatively small amounts of funding where it could be most effective. Beginning in 1985, an annual scholarship was awarded for a British student to undertake the MSc Economics course in Population Policies and Programmes of the Sir David Owen Centre, University of Wales, Cardiff, UK that was primarily designed for those in developing countries working in the field of population. As postgraduate grants became increasingly curtailed, it was decided from 1992 to extend the scholarships so that four grants (and occasionally five) were made available for postgraduate students at institutions in the UK offering a course in population studies. The level of grant applicants was noticeably high. The majority of those funded went on to work in population or a closely related field. Some individuals – both in the UK and in other countries – were appointed to universities where they were able to transfer their own training; others became programme managers in government or non-government development activities; yet others can be found as activists in various pressure groups. By 1999, 35 students had been awarded grants to a total value of £200 650 (Appendix 1).

### **Small Grants Scheme**

The Small Grants Scheme, begun in 1987, provided up to £5000 for research undertaken at doctoral or postdoctoral level that was likely to produce results of practical value in the formulation of population policies. Usually, the grants financed essential fieldwork; sometimes they provided 'seed money', which enabled the researchers to develop their projects to the point where these could attract further funds from other sources. While various organisations in the UK and abroad provided funds for major research projects, it was extremely difficult for most researchers to get support for such preliminary, often exploratory initiatives, especially where their interdisciplinary nature fitted poorly with established funding criteria. Much of the research was concerned with women's status, reproductive health and fertility behaviour. Thus, for example, one study examined the implications of women's careers and indigenous reproductive knowledge for health education in Nigeria; another young motherhood in the shanty towns of Caracas, Venezuela; a third looked at street children in Brazil. Some of those who received grants were undertaking PhDs; others were established academics, doctors and activists working in the field of population. The Trustees formed subcommittees to examine the requests for funding under the Scheme, and make recommendations: the tasks involved were arduous and time-consuming. For every successful applicant, there were several others whose projects, while often interesting and valuable, were considered to be outside the Trust's key areas of concern. By 1999 over 70 different people had received Small Grants to a total value of more than £260 000 (Appendix 2).

### **Postcoital contraception**

Occasionally the Trust's own concerns led to the development of a funded Small Grant project. The Trustees noted that postcoital or emergency contraception, despite its obvious advantages in reducing the need for abortion, especially amongst very young women or those not in a long-term relationship, seemed to be under-used. A competition for suggestions about ways in which the method could be better promoted was advertised in various journals, and one idea received was that the Trust should approach tampon manufacturers to establish whether they would allow a leaflet insert in their packets. Unfortunately they declined to co-operate. Eventually it was agreed to finance a project to explore the extent to which postcoital contraception was used and the impact of GPs' views and knowledge on levels of use. Professor Wendy Savage agreed to undertake the survey in Tower Hamlets, London, UK. The results, which showed a need for better information among women – especially users of barrier methods and those with a poor command of English – were published in the *British Journal of Family Planning* (Burton *et al.*, 1990). The report was also sent to all health district general managers and community health councils. The FPA issued a revised leaflet on postcoital contraception.

## Public education

The Trustees continued to believe, with the 1955 PEP *Report*, that population issues were too important to be left to little-read volumes and specialist academic gatherings. The largest social survey then undertaken – the World Fertility Survey, developed by the International Statistical Institute – had covered 42 developing and 20 developed countries and produced for the first time internationally comparable data on marriage, childbearing, family planning and personal background. In 1984, its studies completed, the World Fertility Survey held its second major conference, in London, UK. The Trust considered there was a need for a short, readable report of its main findings and their implications for public health strategies to reach a wider audience, including the UN International Conference on Population in Mexico City. It contributed to the production of that report (WFS, 1984). For the Mexico Conference, too, the Trust assisted IPPF in producing *Human Numbers Human Needs* (Harrison and Rowley, 1984) which was designed to show the interrelationships between population changes and other policies. A film and cassettes based on the theme were also produced.

As birth rates continued to fall in Britain, the Trust asked John Ermisch to produce a new pamphlet on the policy implications of the population trends. Co-financed by the Joseph Rowntree Foundation, the study – *Fewer Babies, Longer Lives* (Ermisch, 1990) – received major national and regional newspaper coverage. The Trust also helped to finance a series of lunchtime lectures entitled *The Changing Population of Britain* at the Centre for Economic Policy Research, and a book resulting from them (Joshi, 1989).

The Trust considered that education on population matters should begin in the schools, and over the decade 1988–1998 contributed to Population Concern, largely for its educational activities. For instance, the Trust supported Population Concern's distribution of Population Reference Sheets prepared by the Population Reference Bureau to all 6500 secondary schools with a sixth form. The Reference Sheets were redesigned to include information about Population Concern and the Trust. That particular activity was supported by an individual earmarked anonymous donation, in memory of David Hubback. A tribute to him appeared on the poster.

During the 1990s the Trust also supported the work of the All-Party Parliamentary Group on Population and Development (APPGPD) by helping to fund reports of the Group's conferences and seminars. The Trust contributed to the costs of the All-Party Parliamentary Group report on *Women's Rights and Sexual Health* (APPGPD, 1995). This resulted from consultations held with agencies involved in women's issues to identify their support for the commitment to reproductive and sexual health agreed at the 1994 UN International Conference on Population and Development held in Cairo. The Report fed into government preparations for the UN Fourth World Conference on Women held in Beijing in 1995. The

Trust also funded the publication *Development Strategies for the 21st Century: the South-South Partnership in Population and Development* (APPGPD, 1997) which resulted from a parliamentary hearing.

Grants to the journal *Reproductive Health Matters* enabled it to offer reduced or free subscriptions to those in developing countries and Eastern Europe who were unable to pay the full rate, or who could not access hard currency. The British Society for Population Studies received a similar amount during the 1990s, mainly to support students wishing to participate in its annual conferences. Education for Choice, which produces appropriate materials and speakers for schools on reproductive choice, received grants between 1994 and 1998. The Confidentiality Alliance (including the BMA, Brook, FPA, GMSC, HEA and RCGP) received a donation towards the cost of a leaflet explaining the legal position of those under 16 years who were seeking advice on contraception.

## Action Research Grants

Concern that the birth control and law reform groups within Britain were limited by shortages of funds in the work they could undertake, led to the development of Action Research Grants. A subcommittee was established to approve grants of up to a total £5000 per year and to apply to a full Trustees meeting for further funds if additional important projects warranted support. Among the initiatives funded under this scheme was research to find out how abortion provision in Britain had been affected by changes in the structure of the NHS. This resulted in a number of published studies including one by Ruth Garside (1997) of Exeter University and research by the Abortion Law Reform Association and Education for Choice into regional variation in abortion provision. This type of information was important for monitoring the availability of services and attracted considerable publicity. Through charities associated with various birth control and abortion groups, the Action Research scheme also underwrote several national opinion polls in Britain and Northern Ireland.

The 1967 Abortion Act, which allowed abortions in England, Scotland and Wales on fairly broad grounds, does not apply in Northern Ireland. Hence women living in Northern Ireland are debarred from obtaining legal and safe abortions there, and are forced to travel to England to seek abortion services. Two opinion surveys covering attitudes to abortion in Northern Ireland were sponsored by the Trust. Almost 80% of those surveyed believed that abortion should be legal where a doctor advised it for the physical or mental health of the mother. These initiatives were followed by a conference in Northern Ireland in 1995 on The Abortion Law in Northern Ireland: Human Rights and Reproductive Choice. It was organised by the Northern Ireland Family Planning Association (FPANI) and IPPF Europe Region with added support from the Trust. Meanwhile, in the Irish Republic the Trust supported Open Line Counselling in Dublin to

enable a law student to examine the case against the existing Irish abortion law for the European Court of Justice.

### **Winding up the Trust**

Sadly, the Trustees realised in 2000–2001 that there would be little or no chance of further income for the Trust. The Trustees tried hard, in applications to large foundations, to bring about a re-financing plan but by Easter 2001 it was clear that this was not an available choice. At a meeting of the Trustees on 16 November 2001, a resolution to wind up the Trust was approved. Some existing funds were held back to finance the publication of the 'History', some reserved for residual needs of scholars, and the remainder to be distributed to a number of good causes. Thus, during the next few months the Simon Population Trust, having significantly achieved its objects, will cease to exist.

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### **A note on sources**

Except where indicated in the text, source materials for this history are to be found in the Simon Population Trust archives. The documents include: Annual Reports, Minutes of Trustee meetings, background memoranda for and between those meetings, and correspondence and file notes. Published documents are detailed in the Bibliography.

APPENDIX 1

Simon Population Trust Scholarships Awarded 1992–2001

Academic year	Recipients	Institution	Academic year	Recipients	Institution
1992–1993	Patrick Ward	LSHTM	1997–1998	Jane Edmondson	LSE
	Louise Hulton	LSE		Rachel Weller	LSE
	Sophia Henderson	Exeter		Katherine Emery	Exeter
	Karen Williams	Cardiff		Anna de Cleene	Cardiff
1993–1994	Margaret Douglas	LSHTM	1998–1999	Saba Khan	LSHTM
	Susanna Mayhew	Exeter		Louise Lee-Jones	LSHTM
	Sara Butterfield	Cardiff		Sam Arie	LSE
	Elizabeth Schroeder	LSHTM		Alison Pollard	LSE
1994–1995	Karen Badgery	LSE	1999–2000	Christina Anderson	Cardiff
	Margaret Newby	LSE		Richard Gaunt	LSE
	Clare Taylor	Exeter		Fergus Thomas	LSHTM
	Kathleen Siddle	Cardiff		Iain Atherton	LSHTM
1995–1996	David Anderson	LSHTM	2000–2001	Harriet Young	LSHTM
	Sarah Haspel	LSHTM		Kathryn Church	LSE
	Barbara Akakpo	LSE		Sydney Anstee	Exeter
	Tina Coast	LSE		Heidi Quinn	Cardiff
1996–1997	Judith Cox	Exeter	2001–2002	Jessica Crellin	LSHTM
	Rachel Cullen	LSE		Kirrily de Polnay	LSE
	Lucy Palmer	LSE			
	Nicola Farrell	Liverpool			
	Kerry Jones	Exeter			

Abbreviations: LSHTM, London School of Hygiene and Tropical Medicine; LSE, London School of Economics; Exeter, Institute of Population Studies, University of Exeter; Cardiff, Sir David Owen Population Centre, University of Wales, Cardiff; Liverpool, University of Liverpool.

## APPENDIX 2

### Simon Population Trust Small Grants Awards 1991–2001

Year	Recipients	Title of project
1991	Tobias Hecht Wendy Savage	Street children of Brazil Postcoital contraception
1992	R Milne/R Wright B Ahonsi Nashid Kamal Andrea Cornwall  Myra Hunt L Kennedy S Abudillai	Malta's demographic transition Economic change and childhood mortality in Cameroon, Ghana and Nigeria, 1970–1989 Areal variation of contraceptive use in Bangladesh Women as witches: implications of women's careers and indigenous reproductive knowledge for health education in SW Nigeria Choice or constraint? Young motherhood in the shanty towns of Caracas, Venezuela Malthusian models and Irish Peasant Society – testing the population–famine debate The role of women in raising rural community awareness on population growth, environment and food security interactions in the Bawku East district of Northern Ghana
1993	Tobias Hecht Xixhe Peng Emily Hinshelwood Parves Khan Timothée Gandaho Lyn Haslett Veronica Tuffrey Surinder Jaswal	Street children and Social Service institutions in Recife, Brazil Causes of reported abnormal sex ratio at birth in China Children's workload and population in the Gambia Third World migration in 1992 A qualitative investigation of contraceptive acceptance and practice by couples in rural Benin Evaluation of HIV/AIDS education in the workplace in Nairobi Indicators of adult malnutrition Low-income urban women's morbidity in Thane, India
1994	Vaughan Robinson Maxine Lattimer  Shona Wynd Vicky Hosegood  A J Mturi H Kiwasala/Basia Zaba Richard Leete	Migration of Russians within the former Soviet Union A qualitative analysis of women seeking abortion counselling in the UK: a contribution to the concerns of feminist anthropology Niger education and fertility study A longitudinal study of women's nutritional status and its association with reproductive outcomes, in a cohort of women from rural Bangladesh Levels and patterns of fertility and contraceptive use in Tanzania Water use and rural population change in the Mwanza region of Tanzania Demographic transition in Malaysia's multi-ethnic setting: implications for policy
1995	Maxine Lattimer  Paulo Freitas P C Oliver  Lisa Brown  George Ellison Clare Ferguson Rebecca Sear	A qualitative analysis of women seeking abortion counselling in the UK: a contribution to the concerns of feminist anthropology Study of caesarean section in Brazil Interpersonal relations between clients and providers, and their influence on clients' perception of quality of care in family planning clinics in Jamaica Towards more effective family planning services in rural communities: comparative research on existing services in Mexico and Venezuela Assessing the effect of family size on infant nutrition in Soweto Reproductive needs: women's perspectives in rural Zimbabwe Reproductive decisions in a non-contracepting population
1996	S Mayhew  S Bhattacharjee  Alice Reid Kirstan Hawkins Christy Cannon  K Molesworth-Storer  Denise Y Arnold S L de Moura Kate Fisher	The appropriateness of integrating MCH/FP and STD/HIV services for Ghana: policy processes and implementational realities Beyond services – the impact of law and social policy on women's rights and reproductive health and choice Child health and mortality from Derbyshire health visitor records, 1917–1922 Anthropological study of reproductive health among migrant women in El Alto, Bolivia Towards a new paradigm for non-governmental organisations: the case of the health sector in Uganda The effect of economic development on the life experience and reproductive behaviour of women of the Tamang community of Jethul, Nepal Aymara vocabulary of childbirth and women's reproductive health Perceptions of health and illness amongst adolescents living on the streets of Sao Paulo, Brazil Transcription of interviews



Year	Recipients	Title of project
1997	R Stephenson	Comparison of the utilisation of maternal and child health care services between migrant and non-migrant populations in Mumbai, India
	I Timaeus	Study of health and mortality in South Africa
	M Yamanaka	Children's workload and its effect on growth in rural Nepal
	Rachel Weller	Quality of care in reproductive health programmes in refugee settings
	Andrea Ledward	Children's assessment of the impact of HIV/AIDS on their farmworker community in Zimbabwe
	V Capo-Chichi	Use of modern contraception in Benin: birth spacing or birth limitation
	Rebecca Sear	The effects of inheritance system on demographic parameters in a rural Malawian population
	Maxine Lattimer	An exploration of the social, cultural and organisational context of abortion decision-making in contemporary Britain
1998	Mashbileg Maidrag	Adolescents' sexual behaviour in Mongolia: knowledge, attitudes and practices
	Cicely Marston	Peer leaders: the answer to unwanted teenage pregnancy and STDs/HIV in Mexico
	Colleen Quinn	Street-life: health and social barriers (perceived or real) for young females involved in street prostitution
	Sarah Castle	Workshop to analyse data on adolescent reproductive health in Mali and Burkina Faso
	Mukta Sharma	HIV/AIDS in India
	Meena Shivdas	Examining the trafficking in women from Nepal to Bombay, India, for commercial sex in order to address the social, gender and policy dimensions of HIV/AIDS when some of these women become infected with the disease in the course of their work and get deported
	Ruth Kattumuri	A study of the factors influencing the spread of HIV/AIDS in Tamil Nadu, India
1999	Lisa Brown	The impact of Latin American telenovellas (soap operas) on women in a low-income neighbourhood in Brazil
	M Gibson	The demographic impact of water development in the villages of Hitosa, Southern Ethiopia
	F Kauser	The utilisation of maternal health care among the urban poor of Maharashtra, India
	Juliet McEachran	Hormonal contraception: the user's perspective in Bangladesh
	Katja Wessolowski	Constructions of adolescence in Uganda: the realities of lived space
	Nadine Allal	Trade-offs in human life history, using cross-sectional survey results on the health and welfare of four Gambian villages
	Maria Carranza	Female sterilization in Costa Rica: the meaning of the choice
	Rachel Murphy	Population quality in rural China
2000	W G Huff	Immigration, population growth and economic development in pre-World War II southeast Asia
	Pranitha Maharaj	Family planning and sexual behaviour in the era of STIs/HIV
	T Doostgharin/	New family forms in the Middle
	Jane Millar	East: the case of Iran
	Zubia Mumtaz	Gender and reproductive health: exploring the concept in Pakistan
	N N Wekwete	Adolescent pregnancy and early marriage in rural Zimbabwe: risking the future?
	Ana Franca-Koh	Understanding parent-adolescent communication and its influence on the reproductive health of young people in Brazil
	A Jain	The impact of Gujarat's resettlement and rehabilitation policy on women and long-term sustainability
	P P Simkhada	Health-seeking behaviour in relation to sexually-transmitted infection (STI) among female sex workers in Nepal: implication for research and reproductive health service provision
	Rosanne Rushing	Trafficking of sexually-exploited children in southeast Asia: researching determinants of trafficking for implementing programs
	Amanda Callaghan	Transformation of the political understanding of abortion and its subsequent impact upon women's decision-making
2001	Andrew Bateman	People smuggling into the UK
	J M Contreras	Conflict within intimacy: men involved in violent relationships
	N Del Franco	Acid violence and changing adolescence in rural Bangladesh
	Ann Furedi	The problematisation of abortion





The Simon Population Trust was established in 1957 by Lord Simon of Wythenshawe (Ernest Simon). The Trust's objects were 'to promote the relief of poverty and the improvement of standards of health throughout the world, thereby making possible a better life for mankind by (i) promoting a better understanding of the problems of world population and resources, and (ii) encouraging such research, education or other action in any part of the world as may contribute to the adjustment of population to resources'.

This history of the Simon Population Trust by Penny Kane, MSc (Econ.), Associate Professor, Office for Gender and Health, Department of Psychiatry, University of Melbourne, Melbourne, Australia, and a former SPT Trustee until the Trust was formally wound up in 2002, details the many achievements of the Trust in the 45 years of its existence.

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PO Box 100, Chichester, West Sussex PO18 8HD, UK  
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