



THE REBECCA PROJECT FOR HUMAN RIGHTS

Health Safety and Dignity for Vulnerable Families

DEPO-PROVERA DEADLY REPRODUCTIVE VIOLENCE AGAINST WOMEN

“Findings from investigations into the use of Depo Provera are extremely worrisome, raising concerns of harmful health policies with racist implications in violation of medical ethics.”

Sharona Eliahu Chai, lawyer for the Association of Civil Rights in Israel (ACRI).

In 2013, together with human rights coalitions, Eliahu Chai successfully fought to change Israeli family-planning policy to protect Africans in Israel. [ACRI is funded by the Moriah Fund, Washington, DC.](#)



Against a backdrop of the pure innocence of beautiful smiling females, esteemed philanthropist Melinda Gates announces her four billion dollar contraceptive strategy featuring Depo Provera as the optimum choice for women of color. Those beautiful females, oblivious that they are being insidiously exploited as diversionary cynical props to mask Gates' egregious intent, are in an unprecedented Depo Provera campaign with serious racist implications to prevent their very births. The contraceptive campaign with Pfizer, Planned Parenthood, USAID and the UN, engages in a *de facto* discrimination policy of not counseling women of color about mandatory FDA **Black-Box** warnings.

This report exposes the mendacity of United States' Depo Provera family-planning policy. It reveals how racist and ideological rationalizations systemically perpetuate a *de facto* bifurcated “*separate but equal*”¹ family-planning policy. A family planning strategy that unethically targets women of color to prohibit births of beautiful children, by not informing mothers of Depo Provera's deadly risks as mandated under U.S. law/regulations; thus, denying women of color their inalienable right to choose and access safe reproductive health.

The Netanyahu administration in Israel, responding to human rights advocates, ordered a prudent and compassionate moratorium on Depo Provera injections on January 28, 2013, to protect the lives of African women in Israel until full informed consent policies are established. Then certainly the Obama administration in the United States could order a moratorium on all Depo Provera injections to protect African American and other women until enforceable full informed consent procedures and policies are in place for all birth control providers, clinics, hospitals, insurance providers/HMO's and U.S. contractors that distribute and administer Depo Provera internationally.

¹ In 1896, the U.S. Supreme Court ruling in *Plessy v. Ferguson* established the deceptively sounding “*separate but equal*” bifurcated legal doctrine that enshrined racial segregation as law. Subsequently, in 1954, the Supreme Court ruling in *Brown v. Board of Education* outlawed *de jure* racial segregation as unconstitutional; however, *de facto* racial discrimination continued to deny people of color their inalienable rights.

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SUMMARY

This report discusses the harm of [Depo Provera](#)² (*Depot Medroxyprogesterone Acetate - DMPA*) a dangerous injectable progesterone-contraceptive manufactured by Pfizer. According to the Wall Street Journal's Market Watch, Pfizer could potentially earn approximately \$36 billion in sales resulting from an unprecedented [Bill & Melinda Gates Foundation \(BMGF\) investment](#)³ --\$560 million initially from BMGF, totaling \$4.3 billion with government contributions⁴-- using Depo Provera as the optimum contraceptive for women of color and low-income women. This report tells the story of an egregious and smoldering human tragedy driven by profit at any cost, and a "population control" ideological agenda fueled by the untrammled power of Pfizer, BMGF, the United States Agency for International Development (USAID), the Population Council, the Ford Foundation, the Rockefeller Foundation, Planned Parenthood, a cadre of extreme reproductive health advocates, OB/GYNs, and NGOs, that are either USAID contractors or beneficiaries of the Depo Provera policy/profit system in the form of reproductive health grants, consulting fees, and Medicaid insurance reimbursements. Several African-American clergy have reviewed details of the systematic cover-up of serious risk and life threatening harm by aforementioned institutions, and are deeply concerned that Depo Provera is an insidious evolution and incarnation of a bygone eugenics era of [forced sterilization](#)^{5,6}.

The governmental imprimatur is supplied by the pro-Depo Provera policies of the USAID. This policy provides the cover for private foundation money, and our government policy is influenced and advocated by the Population Council, Planned Parenthood and population control advocates, ostensibly advocating for a woman's right to choose. To administer Depo Provera injections, especially if one is receiving federal funding, Medicaid and USAID payments, without enforcing full information requirements about side-effects and harm, robs millions of women of their dignity and fundamental civil rights, denying them of their inalienable right to be free to reject a dangerous drug and choose safer contraceptives. BMGF, Planned Parenthood, Pfizer and Depo Provera advocates constructively arrogate to themselves a separate standard of regulatory oversight. They illegally promote and administer Depo Provera by concealing its danger, minimizing fatal harm to women and making false claims with impunity. They are legally required to disclose side effects of Depo Provera and other drugs with **Black Box** warnings to patients/consumers.

BLACK-BOX WARNINGS

Food and Drug Administration (FDA) **Black-Box warnings**⁷ are the most stringent mandated warnings notifying patients on the significant risk of [serious and life-threatening side effects](#) or adverse effects that a drug may have. Therefore, all health professionals are required by FDA to inform patients of likelihood of harm. **Black Box** warnings obligate all health providers including pharmacists dispensing a drug with **Boxed warnings** to counsel patients/consumers about serious side effects. However, as a regulated injectable contraceptive with a **Black Box** warning, Depo Provera is never dispensed by a pharmacist directly to a patient to self-inject in the US. According to the FDA labeling, Depo Provera should be administered by health professionals by injection after patients are counseled on the serious side-effects. Therefore, the legal obligation to counsel women about serious side-effects rests with birth control corporations, providers and agents directly promoting, distributing and administering Depo Provera injections to women. Consequently, by fraudulently minimizing or concealing harm to misinform women about Depo Provera's **Black Box** warnings those corporations, providers and agents are violating federal law [21 Code of Federal Regulations paragraph 201.57\(e\)](#).

In 2004, the FDA identifying that [Depo Provera causes serious side-effects](#)⁸ issued a **Black Box Warning**⁹ stating: (1) women may lose significant bone mineral density that is not fully reversible and, therefore, (2) Depo Provera should not be used as a long-term birth control method for more than two years, and (3) only if other contraceptives are inadequate should Depo Provera be used for more than two years. Other serious side effects, with [mandated Patient Counseling and Information \(see pages 16 & 17\)](#)¹⁰, are: (4) blood clots in arms, legs, lungs, and eyes, (5) stroke, (6) bleeding irregularities, (7) weight gain, (8) ectopic pregnancy, and (9) delayed return to fertility and lack of return to fertility. (10) In addition, scientific research in 2012 reported that women using Depo Provera have, [double the risk of developing breast cancer](#)¹¹. (11) Depo Provera also has an unintended consequence of, significantly increasing a woman's

² Pfizer, [FDA Box-Warnings for Depo Provera](#), Letter to US Healthcare Professionals (November 18, 2004).

³ Paul B. Farrell, [Gates' \\$4 billion foray in global family planning](#), MarketWatch -Wall Street Journal (2012).

⁴ Chris Wickham, [Melinda Gates pledges \\$560 million for contraception](#), Reuters (2011)

⁵ Minister Dr. Randy Short, President and National Spokesperson: *Anti-Depo Provera Clergy Coalition*. See full list of coalition in Appendix.

⁶ Elizabeth Wong (ACLU, Assoc. Director). [A Shameful History: Eugenics in Virginia](#). American Civil Liberties Union (Jan 2013)

⁷ US Food and Drug Administration **Black Box** Warnings: [21 Code of Federal Regulations paragraph 201.57\(e\)](#)

⁸ Pfizer, [Depo Provera Warning and Precautions](#) (2012).

⁹ Pfizer, [FDA Box-Warnings for Depo Provera](#), Letter to US Healthcare Professionals (November 18, 2004).

¹⁰ Pfizer, [Depo Provera Warning and Precautions](#) (2012).

¹¹ Christopher I. Li, Elisabeth F. Beaber, Mei Tzu Chen Tang, et al., [Effect of Depo-Medroxyprogesterone Acetate on Breast Cancer Risk among Women 20 to 44 Years of Age](#), American Association for Cancer Research (2012).

susceptibility to HIV/AIDS and all other sexually transmitted diseases (STDs) due to the fact that the high dose of progesterone in [Depo Provera induces thinning of the vaginal epithelium](#)¹². (12) Additionally, Bill and Melinda Gates Foundation/NIH-funded researchers indicated that women infected with HIV/AIDS who use progesterone injections, put [HIV-negative partners at a greater risk](#)¹³. The researchers, Heffron et al, stated, “Women should be counseled about potentially **increased risk of HIV-1 acquisition and transmission with hormonal contraception, especially injectable methods**, and about the importance of dual protection with condoms to decrease HIV-1 risk. **Non-hormonal or low-dose hormonal contraceptive methods** should be considered for women with or at-risk for HIV-1.”

Another unintended consequence of many women in high HIV communities using progesterone injections (Depo Provera) is that the low pregnancy assurance gives many women a dangerous false sense of security; therefore, they are less likely to insist on condom use by sexual partners. Planned Parenthood, one largest providers of Depo Provera in the US and internationally, reinforces this dangerous false sense of security, by recklessly promoting Depo Provera to a target audience of women of color and asking this question on their website: “*What are the Benefits of the Birth Control Shot?*” and answering: “[There is nothing to do right before having sex](#)”¹⁴. When in fact using Depo Provera especially warrants condom use before having sex to avoid increased risks of HIV, as verified by esteemed BMGF and NIH funded researcher, Renee Heffron. Furthermore, Planned Parenthood violates medical ethics and FDA regulations by fraudulently promoting an off-label claim: “[The shot \[Depo Provera\] can help prevent cancer of the lining of the uterus \(page 2\)](#)”¹⁵. However, a search of [Depo Provera’s FDA approval](#)¹⁶ does not list the contraceptive as a cancer prevention drug. Moreover, while making those false claims about Depo Provera, Planned Parenthood further violates FDA regulations by not posting and informing women of mandatory [FDA Depo Provera warnings](#)¹⁷ this together with other egregious violations of federal law, demonstrates Planned Parenthood’s intent to misinform and conceal serious harm from women. This systematic fraudulent promotion and illegal rebranding of Depo Provera supported by BMGF, Pfizer, Population Council and USAID, while receiving Medicaid payments and other disbursements from the US government in forms of grants and payments for family planning, is illegal under the **False Claims Act (FCA), 31 U.S.C. §§ 3729 – 3733** (details discussed on page 14 -15).

This historic fight for the reproductive rights of women of color and low-income women, to access safe contraceptives and safe reproductive healthcare with mandatory full informed consent, has consistently encountered ulterior motives that do not necessarily manifest as overt racism, classism or intentional discrimination. However, denying women of color and low-income women their inalienable right to be informed of all serious side effects and results of evidence-based scientific research is indeed the epitome of racism and classism. Racism infects most people, because we share a common historical and cultural heritage in which racism has played and still plays a dominant role¹⁸. While our subtleties and textures of racism have changed, and even though American society has rejected overt racism and discriminatory practices as immoral, our common historical experience makes it a part of our culture,¹⁹ and when a person's racist ideas conflict with a society that condemns those ideas, the person’s mind excludes racism from their consciousness, forcing their racist endeavors into the unconscious mind²⁰.

The story of Rebecca Project for Human Right’s struggle to unmask Depo Provera as a deadly contraceptive for women is important, because it demonstrates the deeply rooted cultural hegemony of population control and corporate profits put before humanity at any cost. A careful review of the narrative exposes a disdain for transparency, and intolerance for constitutional equal protection principles when it involves family planning policy. This elite institutional clique operates constructively as a *de facto cartel* of unethical reproductive health research funders, reproductive health advocates and abortion rights advocates manipulating policies to support unethical and extreme regimes of population control. This report unequivocally documents their fraud and motivation to squelch and discredit the Rebecca Project’s report [The Outsourcing of Tuskegee: Nonconsensual Research in Africa](#)²¹, which exposed the seminal [Navrongo](#)

¹² Preston, et al., *Progesterone Implants Enhance SIV Vaginal Transmission and Early Virus Load*, Nature Medicine 2, 1084 - 1089 (1996).

¹³ Heffron et al, *Use of Hormonal Contraceptives and Risk of HIV-1 Transmission: A Prospective Cohort Study*, Lancet Infect Dis (2012).

¹⁴ Planned Parenthood Website, [Depo Provera Birth Control Shot on Page 2](#), (Retrieved 6/19/2012).

¹⁵ Planned Parenthood Website, [Depo Provera Birth Control Shot on Page 2](#), (Retrieved 6/19/2012).

¹⁶ FDA Approved Drug Products: [Depo Provera’s FDA approval](#) @ <http://www.accessdata.fda.gov/scripts/cder/drugsatfda/index.cfm>

¹⁷ Pfizer, [FDA Box-Warnings for Depo Provera, Letter to US Healthcare Professionals](#) (November 18, 2004).

¹⁸ Law Professor Charles R. Lawrence III, *The Id the Ego, and Equal Protection: Reckoning with Unconscious Racism*, 39 STAN. L. REV. 317, 321-22 (1987).

¹⁹ *Id.* at 322.

²⁰ *Id.* at 323.

²¹ Rebecca Project, [The Outsourcing of Tuskegee: Nonconsensual Research in Africa](#) (2011)

DEPO-PROVERA: DEADLY REPRODUCTIVE VIOLENCE AGAINST WOMEN, Rebecca Project for Human Rights (June 2013) [Experiment](#)²², a fraudulent unethical Depo Provera experiment on 9,000 unsuspecting impoverished women in the Navrongo region in Ghana (Sub-Saharan Africa), designed and conducted by Dr. James Phillips of the Population Council and Columbia University's Mailman School of Public Health.

This report makes the case that US prosecutors have legal precedent to charge Pfizer, along with its *constructive participants and controlling principal intermediaries* (see page 14), with fraud for making false claims, engaging in false marketing and fraudulent promotion, concealing harm, minimizing harm, as well as promoting and concealing harm of Depo Provera to children/adolescents despite FDA **Black-Box** warnings that advise against that. As prosecutors, no matter one's views on reproductive health, one has to embrace the integrity and urgency of this report, to act to protect the sacred lives and the dignity of defenseless women of color and low-income women exploited and harmed by Pfizer, Planned Parenthood, BMGF, the Population Council and advocates in the Depo Provera policy/profit system. If Depo Provera is genuinely a safe and effective contraceptive (as Norplant, another Pfizer contraceptive, was touted to be), with only minimal side effects that do not warrant FDA **Black-Box** warnings that mandate informing consumers about serious or life-threatening risks, then why systematically conceal side-effects and debilitating harm from women? Allow women to make an informed choice and have access to the same safe contraceptives that are available to the privileged women of the world.

After reading this report it is our hope that conscientious US Congress Members recognize the overwhelming deadly effects of Depo Provera on women of color and low-income women. In spite of that harm, extreme population control advocates, funders, and some policymakers in the Depo Provera policy/profit system, will seek cover by pointing a contrived eight-page ["Depo Provera Technical Statement"](#)²³ published by United Nations, which on the surface seems reasonable and acceptable. However, the *Technical Statement* is fundamentally unethical, unreasonable, reckless, and should be rejected, because it recommends the use of Depo Provera on women at high risk of HIV without restriction and without provisions to enforce mandatory informed consent guidelines while: 1) knowing that informed consent procedures are methodically ignored by the United Nations' own field workers and subcontractors in Africa; and the [UN's family planning guide](#) published in three languages does not state strict condom use, and claims DMPA is "safe" **without reference to Black-Box warnings** and serious side effects²⁴; 2) knowing that women who are targeted with Depo Provera are low-income women and women of color in high HIV infection regions in the U.S. and developing countries, who do not have access to adequate healthcare to combat diseases resulting from Depo Provera's deadly side effects; 3) knowing that Planned Parenthood and other providers of Depo Provera refuse to provide full information about Depo Provera's harm in the US and Africa, thus denying vulnerable women access to safe contraceptives, 4) knowing and having the cultural competency to understand that women in certain high risk HIV communities in Africa and in the U.S. will avoid using condoms to maintain their relationships with men who may be their sole financial providers, and 5) if the UN-WHO is genuinely interested in the welfare and health of women using Depo Provera, then the [FDA's enforceable Black Box](#) warnings should be included in the Technical Statement alongside the UN's unenforceable recommendations.

Furthermore, similar recommendations from U.S. medical groups or associations, to administer Depo Provera to women without restrictions and to disregard or circumvent FDA statutes and mandatory warnings and guidelines, do not supersede Department of Health and Human Services (DHHS) and FDA ethical and enforceable statutes and regulations, which require a full warning to consumers of serious or life-threatening side effects. Those unethical recommendations from the United Nations, U.S. medical groups and medical associations do not supersede the 14th Amendment "Equal Protection Clause" in the U.S. Constitution; and those unethical recommendations do not supersede U.S. laws and the will of Congress.

In a 2011 New York Times report, [reporter Pam Belluck](#), who gave a thoughtful analysis on the danger of progesterone injections in countries ravaged by HIV²⁵, quoted Isobel Coleman, Director of the Women and Foreign Policy Program at the Council on Foreign Relations, as saying, "*The best contraception today is injectable hormonal contraception because you don't need a doctor, it's long-lasting, it enables women to control timing and spacing of birth without a lot of fuss and travel*". However, that unintentional and misleading statement by Ms. Coleman about *injectable hormonal contraception's* efficacy without the need for a doctor is patently false. Unfortunately, Coleman's statement is

²² Debuur C, Phillips JF, Jackson EF, Nazzar A, Ngom P, Binka FN. The impact of the Navrongo Project on contraceptive knowledge and use, reproductive preferences, and fertility. *Studies in Family Planning* 2002

²³ WHO, Department of Reproductive Health and Research, [Hormonal contraception and HIV Technical statement](#) (February 16, 2012).

²⁴ World Health Organization. [A guide to family planning for community health workers and their clients](#)

²⁵ [Pam Belluck, Contraceptive Used in Africa May Double Risk of H.I.V.](#), New York Times (2011).

emblematic of the specious convictions of US family planning policymakers, because the usage of injectable contraceptives is precisely the moment every woman unquestionably requires counseling from doctors and qualified healthcare providers to explain potentially lethal side-effects.

Then, in 2012, Paula Donovan, another respected reproductive health advocate, eloquently remarked, “Sexual and reproductive rights are not advanced when the facts women need are withheld or misrepresented. Voluntary contraception is only voluntary when women understand the choices they have, and the risks as well as the benefits. [Women's rights to informed consent are sacrosanct](#)²⁶.” Over the past two years, the Rebecca Project has investigated, documented and interviewed scores of women and girls, deducing that birth control providers serving low-income women and girls such as Planned Parenthood characteristically decline to inform patients about the FDA’s warnings concerning Depo Provera. However, health providers are mandated ethically to inform women of harm and to post FDA Depo Provera **Black-Box warnings on websites**²⁷ -- instead of misleading and misinforming families about the drug’s dangerous side effects.

According to [Dr. Betsy Hartmann](#)²⁸ and [Dr. Jael Silliman](#), and other women’s rights birth control experts associated with the [Committee on Women, Population, & the Environment \(CWPE\)](#) who published, “*Dangerous Contraceptives: Norplant and Depo Provera*”²⁹, many women of color in the United States are disproportionately and constructively [coerced into taking Depo Provera](#)³⁰ to prevent future births. Renowned talk-show activist, educator and journalist Amy Goodman of Pacifica Radio’s [Democracy Now](#) wrote about the [danger of Depo Provera as far back as 1985](#)³¹. In 1979, after public health expert [Stephen Minkin](#) wrote about the danger of [Depo Provera in Mother Jones](#)³², powerful interests blacklisted him. Therefore, fear of corporate or professional reprisal has successfully frightened off or silenced journalists, politicians, medical professionals, and women’s rights advocates.

UNPRECEDENTED NUMBER OF PFIZER PROSECUTIONS AND DEPO PROVERA LAWSUITS

Over the last two decades, there have been an [unprecedented number](#)³³ of government prosecutions, drug recalls and [Depo Provera class actions suits](#)³⁴ where Pfizer has either lost cases or settled. Amidst a flurry of lawsuits, Norplant, another dangerous Pfizer contraceptive, was pulled from the market by Pfizer in 2002³⁵, while elected officials and prosecutors remained silent about harm. In October 2011, Pfizer settled the Norplant contraceptive lawsuits, for its subsidiary Wyeth, for approximately \$30 million³⁶. That Pfizer payment was in addition to approximately \$48 million already paid by Wyeth³⁷ by 1999 and \$40 million in legal fees for a total of more than \$120 million in settlement costs³⁸. Thus far, even though African women in the DRC (formerly Zaire), Egypt, Ghana, Kenya, Madagascar, Nigeria, Rwanda, Senegal, and Zambia, were used at human subjects without informed consent of harm in Norplant human experiments, the Rebecca Project for Human Rights has not been able to locate records of settlements to any African women in those countries—they deserve the same redress and compensation as harmed American women. Depo Provera has the same progestin chemical component as Norplant; the only difference being that Norplant is implanted under the skin, while Depo Provera is injected.

Moreover, [UN data demonstrates that Depo Provera](#)³⁹ is seldom administered to White or affluent women and girls in the U.S. or Europe. There is a strong correlation between Depo Provera use, HIV infection and minority status. Minority communities in the United States have high HIV/AIDS infection and transmission rates. In 2009, [according to the CDC](#), African Americans comprised 14% of the U.S. population, while accounting for 44% of all new HIV/AIDS infections. African American women have the highest usage of Depo Provera in the United States, followed by Latinas. Latinos accounted for 20% of new HIV infections, while representing 16% of the total US population. Furthermore, in Africa some 280,000 South Africans died of HIV/AIDS in 2010. In the same year, approximately 42% to 47% of all

²⁶ Paula Donovan, *Planned Parenthood Whitewashing Life-and-Death Info On HIV Protection*, [Huffingtonpost.com](#) (March 2012).

²⁷ Planned Parenthood Website, [Depo Provera Birth Control Shot on Page 2](#), (Retrieved 6/19/2012).

²⁸ Betsy Hartmann, Aline Gubrium, [Letter to the Editor: A Contraceptive's Risks](#), New York Times (2011)

²⁹ Committee on Women, Population, & the Environment, [Dangerous Contraceptives: Norplant and Depo-Provera](#),

³⁰ *id*

³¹ Goodman, Amy, [The Case Against Depo-Provera](#), Multinational Monitor FEBRUARY/MARCH, 1985, VOL 6, NUM 2 & amp;3

³² Minkin, Ehrenreich Dowie, [The Charge: Gynocide, the Accused: The U.S. Government](#), Mother Jones (November/December 1979).

³³ Martha Rosenberg, Pfizer: [The Drug Giant That Makes Bank from Drugs That Can Kill You](#), AlterNet (2010)

³⁴ BigClassAction.com : http://www.bigclassaction.com/lawsuit/depo_provera_contraceptive_osteoporosis_class_action.php

³⁵ Frost & Reich, [Norplant: Access To Contraceptives](#), ACCESS Chp.6

³⁶ Pickett, Joseph, [Pfizer Settles Norplant Lawsuits for \\$29.5 Million](#), Expertbriefings.com (Oct 2011).

³⁷ Associated Press, [American Home Products Corp Settles Lawsuits](#), Los Angeles Times (August 26, 1999). Wyeth was owned by American Home Products Corporation (AHP). Wyeth was purchased by Pfizer in October 15, 2009.

³⁸ Frost & Reich, [Norplant: Access To Contraceptives](#), ACCESS Chp.6

³⁹ UN Population Publications, [World Contraceptive Use](#), (2010)

DEPO-PROVERA: DEADLY REPRODUCTIVE VIOLENCE AGAINST WOMEN, Rebecca Project for Human Rights (June 2013)
[deaths among South Africans](#)⁴⁰ were HIV/AIDS related. Yet regrettably, South Africa and its neighboring countries continue to have the highest use of Depo Provera and HIV/AIDS, thereby further increasing the risk of HIV/AIDS. The monitoring of Pfizer's dangerous contraceptives should not be left to private lawyers, human rights advocates or the [ACLU](#)⁴¹. US Attorneys and state Attorney Generals should be as aggressive in their prosecution of Pfizer when it also involves dangerous contraceptives as they are with other drugs.

UNITED STATES DEPARTMENT OF JUSTICE

In the past four years, under the supervision of [Deputy Attorney General Tony West](#), the U.S. Department of Justice (DOJ) has successfully prosecuted several drug companies including [Pfizer](#)⁴² and [GlaxoSmithKline](#) and they have paid fines in excess of six billion dollars for false claims, bribes and other fraud. Even established USAID contractors such as [Academy for Educational Development - AED](#) were successfully prosecuted and put out of business for fraud. These successful prosecutions have been primarily directed by preeminent DOJ prosecutors such as [Michael Loucks](#)⁴³, Sanjay Bhambhani, Sara Bloom, Zachary Cunha, Charlene Keller Fullmer, Robin Gwinn, Patricia Hanower, Colin Huntley, Marilyn May, Cheryl Morgan, and Susan Poswistilo. Pfizer and other drug companies were prosecuted for deliberately misinforming consumers of harm, making false claims, bribing government officials, concealing harm, minimizing harm, collusion and/or fraudulently promoting drugs not approved for children. These are the same crimes involving the predatory and pernicious promotion of Pfizer's Depo Provera to women of color in the United States and elsewhere in the world. However, this is not only a civil crime. Depo Provera's fraudulent promotion involves extensive criminal wrongdoing; hence, an appeal that [Mythili Raman](#) (*Head of Criminal Div.*) and [Tom Perez](#) (*Head of Civil Rights Div.*) intervene in this unprecedented prosecution of Pfizer to protect the rights of women. The DOJ must continue to act equitably in the interest of justice for women of color when the crime involves dangerous contraceptives—this should not be a political decision.

USAID demonstrates a policy of aggressive apathy and near-consensual silence after several Rebecca Project requests to Nicole Schiegg (senior advisor to USAID Administrator Rajiv Shah) and several other officials in the Obama Administration have been ignored. Unlike other Pfizer drug prosecutions, what distinguishes Depo Provera fraud is that the US government via USAID, is a constructive participant in Pfizer's elaborate marketing scheme to fraudulently promote Depo Provera in the United States and globally. Pfizer commits this fraud with *controlling principal intermediaries*, including USAID (page 14). These powerful government entities only makes this case more important to investigate for criminal and civil prosecutions to protect the civil rights of citizens and to ensure that taxpayer dollars are not spent on dangerous contraceptives that sustain a flawed family planning policy with serious racist implications.

UNETHICAL DEPO PROVERA EXPERIMENTS

UNITED STATES:

1967-1978: The largest test on humans of Depo-Provera begins and is conducted for eleven years through the Grady Clinic in Atlanta, Georgia on 14,000 low income women. These "trials" were conducted on women human subjects without being aware of the fact that they were part of an experiment; and, the researchers deliberately did not inform the women participants that Depo Provera had grave side effects. Many women developed cancer and/or died during the trials, but these cases were not reported to the FDA. The director of the study, Robert Hatcher, further violated the law refusing to submit an annual report during the entire study. Women with medical conditions, such as cancer, were still given the shot. Record keeping on the clients was sloppy and more than 13,000 women had no follow-up⁴⁴ ([Committee on Women, Population, & the Environment](#)).

GHANA:

The African continent has been a theater for unregulated, unethical human experimentation and [turpitudinous malpractice](#)⁴⁵, without [informed consent forms \(sample\)](#) normally provided to American women. In a seminal family planning experiment, discussed in the Rebecca Project Human Rights' 2011 report: [The Outsourcing of Tuskegee: Nonconsensual Research in Africa](#)⁴⁶, researchers experimented with Depo Provera on approximately 9,000 impoverished women in Navrongo, Ghana. The [Navrongo Experiment](#)⁴⁷ occurred in Navrongo, Ghana (1999-2006, Funded by: USAID/Population Council/Rockefeller Foundation). Dr. James Phillips and Population Council researchers violated [US](#)

⁴⁰ South Africa StatisticsP0302, [Mid-year population estimates](#) (2010)

⁴¹ ACLU, "[Norplant: A New Contraceptive with the Potential for Abuse](#)", (January 31, 1994)

⁴² Martha Rosenberg, Pfizer: [The Drug Giant That Makes Bank from Drugs That Can Kill You](#), AlterNet (2010)

⁴³ Duff Wilson, [Drug Makers' Feared Enemy](#), New York Times (June 4, 2011). Mr. Loucks left the United States attorney's office in Boston after he was passed over for the top post.

⁴⁴ Reprinted entirely from CWPE factsheet [Committee on Women, Population, & the Environment](#)

⁴⁵ Rebecca Project, [Unethical Medical Research In Africa Funded Or Assisted By The Us Government Or Other Us-Based Institutions: The Outsourcing Of Tuskegee Part II](#) (2012)

⁴⁶ Rebecca Project, [The Outsourcing of Tuskegee: Nonconsensual Research in Africa](#) (2011)

⁴⁷ Debpur C, Phillips JF, Jackson EF, Nazzar A, Ngom P, Binka FN. The impact of the Navrongo Project on contraceptive knowledge and use, reproductive preferences, and fertility. *Studies in Family Planning* 2002

[DEPO-PROVERA: DEADLY REPRODUCTIVE VIOLENCE AGAINST WOMEN](#), Rebecca Project for Human Rights (June 2013) [research laws](#)⁴⁸ by withholding informed consent forms from the women they used as human subjects and injected with Depo Provera. The African women in Navrongo were told they were being provided with routine healthcare, while data was specifically collected and analyzed for the research experiment and published by Dr. James Phillips et al. Furthermore, the Navrongo Experiment was designed by Dr. James Phillips who deliberately fabricated and falsified research data for desired outcomes. Phillips co-published with Dr. Binka and other compensated Ghanaian doctors who are [knowledgeable and/or complicit in this fraud](#)⁴⁹.

Presently, [Dr. Phillips serves on the faculty](#) of the Mailman School of Public Health at Columbia University and his research fraud spans from Africa to Southern Asia. The problem with Columbia University and USAID supporting Phillips' extensive research fraud in Africa is, as with the [Tuskegee Experiment](#)⁵⁰ (conducted by Dr. John Cutler with the United States Public Health Service- PHS), and the [Guatemala Experiment](#)⁵¹ (also Dr. John Cutler with PHS), is that Dr. Phillips' fraudulent Navrongo research is routinely referenced in UN and US documents as valid family-planning policy. USAID is fully aware that informed consent was not provided (the Rebecca Project provided details to the DHHS, DOJ, and USAID) and that violates US [ethical research IRB procedures](#)⁵² and international law. Fabricated research outcomes and unethical experiments should not be referenced in official US policy. U.S. drug companies and U.S. researchers have effectively outsourced the Tuskegee Experiment and routinely conduct nonconsensual and/or unethical research in Africa and the developing world. [Pfizer v. Abdullahi](#) directly confronted the issue. In a July 2009 ruling, a U.S. Court of Appeals found that the prohibition of non-consensual medical experimentation on humans is binding under [customary international law](#)⁵³, thereby allowing Trovan victims in Nigeria the right to seek relief against Pfizer in U.S. courts⁵⁴. In June 2010, the U.S. Supreme Court rejected Pfizer's appeal after the U.S. Acting Solicitor General, Neal Katyal, submitted his brief urging the court to deny Pfizer's petition.

OTHER GOVERNMENTS AND DEPO PROVERA

On January 28, 2013, Israel put an end to the unethical use of Depo Provera after admitting that they coerced African women to use Depo Provera without [consent and full understanding of harm](#). The Netanyahu administration moved to act ethically and banned its doctors from renewing all Depo Provera prescriptions without full disclosure and consent to protect African Jews in Israel. The Rebecca Project commends Israel for its decision to terminate [the use of Depo Provera on Africans](#) without informed consent, a moral decision compelled by [condemnation](#)⁵⁵ and pressure from civil society, media, [human rights groups, and women's organizations](#)⁵⁶. According to Talila Neshet of Haaretz, Israel also [appointed a committee to probe Depo Provera](#) further after the moratorium on prescriptions was ordered. The contraceptive shots contributed to approximately a 50 percent drop in the birthrate among Ethiopian women in Israel within a decade⁵⁷.

Recognizing that danger, European countries have provided full information about risks for women to consent to use Depo Provera for decades and use of Depo Provera is negligible. India, a permanent target of US population control policy (see page 10), went a step further and banned Depo Provera from its social welfare programs. Gates, UNFPA and USAID have taken advantage of political disorganization in Pakistan to administer Depo Provera to Muslim women; and are collaborating to expand a "self-inject" Depo Provera system in Pakistan⁵⁸. Currently, all U.S. allies in the Middle-East: Bahrain, Israel, Jordan, Kuwait, Qatar, and Saudi Arabia restrict the use of Depo Provera on their nationals. Unlike USAID, the Swedish International Development Authority ([SIDA](#))⁵⁹ did not provide Depo Provera or funding to purchase

⁴⁸ PROTECTION OF HUMAN SUBJECTS: [45 CFR 46. Code of Federal Regulations, TITLE 45, PUBLIC WELFARE, DEPARTMENT OF HEALTH AND HUMAN SERVICES, PART 46](#)

⁴⁹ According to confidential source.

⁵⁰ Donald H. Rockwell, MD; Anne Roof Yobbs, MD; and M. Brittain Moore, Jr., MD, The Tuskegee Study of Untreated Syphilis: 30th Year of Observation (1963). PHS -- the United States Public Health Service as a division of the [Department of Health and Human Services](#) (DHHS). Dr. [Howard K. Koh, Assistant Secretary for Health](#) heads PHS.

⁵¹ "Ethically Impossible" STD Research in Guatemala from 1946 to 1948: http://bioethics.gov/cms/sites/default/files/Ethically-Impossible_PCSBL.pdf

⁵² United States office of Research Integrity: <http://ori.hhs.gov/>

⁵³ [Ethical Principles for Medical Research Involving Human Subjects. WORLD MEDICAL ASSOCIATION DECLARATION OF HELSINKI](#)

⁵⁴ [Pfizer v. Abdullahi](#), 562 F.3d 163 (2d Cir. 2009): http://www.scotusblog.com/wp-content/uploads/2009/09/09-34_pet.pdf .In July 2009, a U.S. Court of Appeals ruling against Pfizer found that the prohibition of non-consensual medical experimentation on humans is binding under customary international law, thereby allowing Nigerians the right to seek relief for damages against Pfizer in U.S. courts.

⁵⁵ Alistair [Dawber, Israel gave birth control to Ethiopian Jews without their consent](#) (2013).

⁵⁶ [Association for Civil Rights in Israel, HMOs Instructed Not To Renew Depo-Provera Prescriptions For Ethiopian Women](#) (2013).

⁵⁷ Talila Neshet, [Israeli minister appointing team to probe Ethiopian birth control shot controversy](#), Haaretz (Feb.28, 2013)

⁵⁸ Bill & Melinda Gates Foundation and PATH. [Home-Based Administration of Depo-Subq in The Uniject Injection System](#). This is the new self-inject Depo Provera system that obviates required patient counseling to circumvent FDA **Black Box** warnings -- Kenya, Malawi, Pakistan, Rwanda, Senegal are initial targets.

⁵⁹ Sweden and Depo: Retrieved from <http://www.popline.org/node/387778>. POPLINE.org is supported by the American People through the [United States Agency for International Development \(USAID\)](#).

of Depo Provera for Swedish assisted projects in developing countries. As far back as 1982, Sweden recognized that, in the absence of good hospitals and medical experts in developing countries, it is essential to give women sufficient information to make an informed choice and to provide continuous follow-up for those who decide to use Depo-Provera⁶⁰. Sweden now provides some support for the use of Depo Provera with strict, full informed consent provisions. Despite international trends, it is uncertain that United States Agency for International Development (USAID), World Health Organization (WHO) and private foundations will follow suit and respect US law and FDA statutes and regulations by enforcing mandatory information on Depo Provera's **Black Box** warnings.

Regrettably, Israel's previous draconian policy to radically reduce the number of Black births using Depo Provera, while willfully disregarding Depo Provera's dangerous health impacts, is the foundation of ongoing U.S. domestic and global family-planning strategy for women of color⁶¹. Details in this report, will demonstrate that US population control specialists characteristically manufacture consent by making unfounded claims that Depo Provera is needed to curb exploding populations of Africans and those in the developing world to support half-century outdated and unproven theories of a "Population Bomb."⁶² International charities are also questioning the excessive funding for dangerous population control. The Catholic News Agency's Hillary Senour quotes Dr. Robert Walley, the head of Canada-based MaterCare International, as saying: "The objective is not to reduce maternal mortality but to eliminate motherhood⁶³". Dr. Walley was explaining the excessive billions spent on "reproductive health" in the developing world.

FACTS ABOUT AFRICA'S POPULATION COMPARED TO THE UNITED STATES⁶⁴

The African continent is far from overcrowded, and it is only in major cities inflated by urban migration that one could gain such a skewed perception. Most of Africa is rural and sparsely populated, and the lack of infrastructure, public services, and meaningful job opportunities in the agrarian sector, now, conflated with the predatory land-grab activities by developed countries has exacerbated the urban influx of formerly subsistence farmers to overcrowded African cities in search of work. Private foundations have been heavily focused on funding NGO programs, emergency programs, and health aid for vaccines, contraceptives, etc. However, they should invest in sustainable comprehensive human resources development and rural infrastructure development to reduce Africa's dependence on foreign aid.

- ***Africa has a normal rate of population growth.*** In 2011, Africa's 55 countries had a total population of 1,032,532,974, which is **3.3 times** that of the United States with a population of 315,510,000 people.
- ***Africa's 55 countries have a landmass*** of 11.7 million sq. miles-- that is **3.3 times** that of the United States with a landmass of 3.5 million sq. mi.
- ***In Africa*** there is an ongoing "Land Grab"⁶⁵ of considerable areas of land by western and industrialized nations to feed and fuel⁶⁶ the rest of the developed world. While U.S. government officials and academics falsely and preposterously postulate that Africa is overpopulated and cannot support itself, Africa's arable lands are pillaged for pennies an acre.
- ***So why are USAID, Gates, Pfizer, Population Council, Rockefeller, Ford, Moriah and Planned Parenthood*** concealing harm to coercively use Depo Provera to reduce Africa's normal population growth, when Africans live in healthy African environments that are free of carbon emissions, rich in minerals and abundant in arable land?

Without contradiction, one can state that four billion dollars spent on additional contraceptives is excessive and not essential to sustainable effective humane reproductive health programs in the developing world. A more rational and sustainable approach to the needs of Africa would be to utilize merely 20 percent of the \$4 billion (\$800 million) to fund comprehensive sustainable human resources development programs that include: 1) scholarship programs that train African doctors to specialize in gynaecology, internal medicine, obstetrics, oncology, pediatrics in U.S. Universities, 2) scholarship programs for African students to study medicine and nursing in American Universities with guaranteed salaries paid as Foundation fellowships for a period of up to 10 years as a pre-condition to return to their home country and work in their communities; 3) building and renovating African medical schools and teaching hospitals for maternal and childcare care, and 4) instituting informed consent health procedures, which have protected and benefited American women, in all aspects of medicine and human subject research as a pre-condition to comprehensively support health programs and hospitals. The collective goodwill of Casey, Buffet, Ford, Gates, Kaiser, Robert Wood Johnson, Rockefeller, MacArthur and several other foundations can formulate a comprehensive health scheme co-created by a new innovative team of African intelligentsia who are not already entrenched participants in US funded programs.

⁶⁰ Id.

⁶¹ Speidel, Sinding, Gillespie, Maguire and Neuse, *Making the Case for US International Family Planning Assistance* (2009).

⁶² Paul R. Ehrlich, *The Population Bomb* (1968)

⁶³ Hillary Senour, *Global Contraception Push Aims to Eliminate Motherhood*. Catholic News Agency (Jun 7, 2013)

⁶⁴ *United Nation Statistics Division* (2010).

⁶⁵ GRAIN, *The G8 and land grabs in Africa*  (March 2013)

⁶⁶ GRAIN.org, *Land grabbing for biofuels must stop*  (February 2013)

PLANNED PARENTHOOD–MARGARET SANGER: CO-OPTING BLACK CLERGY AND LEADERSHIP

Margaret Sanger is America's infamous [eugenics](#)⁶⁷ and population control advocate. In 1916, Sanger opened the first birth control clinic in the United States. In 1921, Sanger founded the American Birth Control League that was renamed Planned Parenthood Federation of America (PPFA) in 1942, and later founded the International Planned Parenthood Federation in 1952. Sanger's successful rebranding of eugenics, which included forced sterilizations and abortions, as reproductive rights and healthcare for women, significantly contributed to US family planning policies that have serious racist implications and still deeply divide America today. American politicians and religious leaders cannot defend Sanger's [forced sterilization](#)⁶⁸ policies, nor can they defend the bigotry manifested in her speeches, writings and life's work. Sanger persistently dehumanized low-income children, the disabled, mentally ill, immigrants, impoverished women and incarcerated women, by classifying them as "[human weeds](#)⁶⁹"; "[spawning... human beings who never should have been born](#)⁷⁰". Euphemisms and code words, for instance, "[feeble minded](#)"^{71,72} were used to describe targeted women of color, such as [Elaine Riddick](#)⁷³, who were sterilized as a policy without their consent and with support from the highest courts in the United States⁷⁴.

Sanger also created and directed the racist Negro Project, which co-opted Black ministers in leadership roles. Sanger stated in a letter to her eugenics colleague, Clarence Gamble (*Proctor and Gamble*), "[we do not want word to go out that we want to exterminate the Negro population and the minister is the man who can straighten out that idea if it ever occurs to any of their more rebellious members](#)⁷⁵." In that effort, Sanger and PPFA targeted civil rights leader Rev. Dr. Martin Luther King. In 1966 PPFA presented an award to Rev. King. However, Dr. King did not attend the ceremony and his wife delivered the speech on his behalf⁷⁶. In the prepared speech Coretta Scott King generously acknowledged PPFA's work in concise themes hailing civil rights, dignity, humane, treatment and humanity. Obviously, two years after the historic signing of the Civil Rights Act, Rev. King could not afford to make enemies with the powerful funders of Planned Parenthood and their supporter President Lyndon Johnson who signed the historic Civil Rights Act in 1964. Dr. King made a *Sophie's Choice*, because he needed the political and funding support for the *civil rights movement*. An excerpt from Rev. King's speech, with purposely chosen words to teach, temper and touch the darkest souls, states: "[...Sanger launched a movement which is obeying a higher law to preserve human life under humane conditions...](#)" Taken in its precise context and style of Rev. Martin Luther King, he was preaching and using his life principles of "[obeying a higher law to preserve human life under humane conditions](#)" to speak tactfully to Sanger to support the dignity of men and women in her work. Therefore, 1) Sanger's policies that supported tens of millions of forced sterilizations in India for US food aid, was an excessively draconian and inhumane condition that would be rejected by Rev. King; 2) Sanger's policies that supported the draconian one-child China policy that sterilized and aborted tens and millions of human beings, is an excessively inhumane condition that would be rejected by Rev. King; and 3) Sanger's policies that forcibly sterilized Black females in the United States, and her enduring policies that administer the lethal contraceptive Depo Provera to tens of millions women of color and low-income women, while fraudulently concealing life-threatening side-effects, is an inhumane policy of [genocide](#)⁷⁷ that would be rejected by Rev. Dr. Martin Luther King, a devout Christian minister.

Surely, Planned Parenthood's claim of support from Rev. Dr. King's is exaggerated as a shield for violating the very rights of people Rev. King sacrificed his life protecting. Furthermore, Sanger was an ardent atheist who described poor, vulnerable women and children of God as human weeds. Her worldview was in complete contradiction to Dr. King's teaching of dignity, grace and humanity as devout Christian minister who was martyred leading the [Poor Peoples' Campaign](#). Rev. Martin Luther King was diametrically opposed to Sanger's genocidal eugenics views that had earlier been adopted by Nazi Germany to rid the world of so-called unwanted inferior races. Nazis captured after WWII stated that American eugenicists inspired Hitler's racial purification laws, and on trial at [Nuremberg](#) they justified mass sterilizations by referring to the United States as their inspiration⁷⁸, which led to the [Holocaust](#).

"Never forget that everything Hitler did in Germany was legal." — Rev. Martin Luther King Jr.

LIFE-THREATENING POPULATION CONTROL TARGETING AFRICAN-AMERICANS

In 2011, according to the Centers for Disease Control and Prevention (CDC), Black women had 583,079 births, while white women had 2,150,926 births. The birth rates⁷⁹ for Black women dropped dramatically by approximately 30%

⁶⁷ [American Eugenics Society \(AES\). List of Prominent founders](#)

⁶⁸ Mark Crutcher. [The Black Holocaust Pt.4 Forced Sterilization. Black Genocide in 21st Century America.](#)

⁶⁹ [Margaret Sanger. "High Lights in the History of Birth Control." Oct 1923.](#)

⁷⁰ Margaret Sanger, *The Pivot of Civilization*, Chapter 8 (1922)

⁷¹ Mark Crutcher. [The Black Holocaust Pt.5 Forced Sterilization. Black Genocide in 21st Century America](#)

⁷² [Margaret Sanger. "High Lights in the History of Birth Control." Oct 1923.](#)

⁷³ *Id.* Elaine Riddick, an African-American was forcibly sterilized in 1968 after being declared feeble minded by a state "board".

⁷⁴ Andrea Pitzer, [U.S. Eugenics Legacy: Ruling on Buck sterilization still stands](#) (6/24/2009)

⁷⁵ "[Birth Control or Race Control? Sanger and the Negro Project](#)". Sanger letter to Clarence Gamble, Dec. 1939. NYU *Margaret Sanger Papers Project*.

⁷⁶ Planned Parenthood website: [The Reverend Martin Luther King Speech: Delivered by Coretta Scott King.](#) (May 5, 1966)

⁷⁷ [Rome Statute of the International Criminal Court, art. cited, July 17, 1998, 2187 UNT.S. 90.](#)

⁷⁸ Stefan Kühn. *The Nazi connection: Eugenics, American racism, and German National Socialism* (New York: Oxford University Press, 1994)

⁷⁹ D'Vera Cohn and Gretchen Livingston. "[U.S. Birth Rate Falls to a Record Low; Decline Is Greatest Among Immigrants, by Race, Ethnicity and National Origin](#)". Pew Research Center (November 2012).

and for White women only 5%. Meanwhile, Blacks – [only 13 percent of the US population](#) – account for approximately 35% of all abortions⁸⁰ (approx. 7% of Black population are women). In addition to a drastically decreasing birthrate, according to the [Committee on Women, Population, & the Environment \(CWPE\)](#), approximately 84% of all Depo Provera is administered in the United States to Black women and Black children⁸¹. Clearly, from those statistics stated, it can be deduced that Depo Provera is disproportionately administered and promoted to women of color. Moreover, African-Americans experience significant health disparities and lower life spans. African-American women do not live as long as Whites and the leading causes of death for Black women are: heart disease, cancer, stroke, diabetes, and HIV/AIDS. The use of Depo Provera can also cause or exacerbate all of those diseases. In contrast, the use of Depo Provera by [women in Western Europe](#) (including Canada and Australia) is less than 0.7%; one could then extrapolate that less than 2% of white women in the US are administered Depo Provera without **Black Box warnings**; however, Whites are [78 percent of the US population](#) (approx. 39% are White women). White women generally encounter a special category of implanted and injected dangerous contraceptives (eg., *Depo-Provera*, *Norplant*, *Nexplanan*, *Implanon* and *Mirena*) during visits to subsidized clinics that mostly serve communities of color, low income communities and college students.

There is a prevailing culture of arrogance among an elitist in the United States with foundations in eugenic ideology, too often condoned by Black leaders who are singularly focused on economic advancement, acceptance from abortion rights advocates and financial support from the pharmaceutical industry, which falsely postulates that people of color in the U.S. and Africa are overpopulating the earth. That rationalization justifies the draconian and social Darwinian⁸² reproductive health policy that aggressively prohibits births, violating women's inalienable rights in the process.

USAID'S ADMINISTRATOR RAJIV SHAH PROMOTES DEPO PROVERA

According to USAID's Dr. Rajiv Shah, "[Depo Provera] is one of a number [of contraceptives] that we are supporting that expand contraceptive method choice... help make methods more [accessible to more than 200 million women](#)⁸³ in the poorest countries of the world." While Dr. Rajiv Shah, a first generation American from India, has no qualms with women of color in America and Africa being injected with Depo Provera, he conveniently omitted the fact that his parents' native India, in 2002, banned this dangerous drug from all family welfare programs⁸⁴. Shah is not blind to the fact that India's population of 1.2 billion is greater than the whole of Africa with eleven times less landmass. The prevaricative flair of Dr. Shah and Pfizer's communications specialists have succeeded in rebranding Depo Provera, to illegally promote and market it as a safe and effective drug for women of color, despite the fact that white women in the United States and Europe scarcely use Depo Provera and have sued Pfizer for millions of dollars for harm. Given the controversial history of India's population control efforts often biased against low-caste Indians who are often [victims of unethical medical experimentation](#)⁸⁵, Shah's indifference to similar sentiments felt by millions of women of color in Africa, the Americas and Southern Asia, is troubling and it begs the question of his concern for marginalized women who are viewed as expendable by those in power.

Dr. Shah's Depo Provera policies are an extension of the first director of the population program at USAID Reimert T. Ravenholt (1966-1979) who could be described as an abject racist. The foundation of Dr. Ravenholt's USAID strategy, just as others at the Population Council and Columbia University's Mailman School of Public health, was to treat fertility and birth of children as a disease that had to be eradicated⁸⁶. In 2000, Dr. Ravenholt said, "[American blacks should thank their lucky stars that the institution of slavery did exist in earlier centuries; if not, these American blacks would not exist: their ancestors would have been killed by their black enemies, instead of being sold as slaves.](#)⁸⁷" Dr. Shah's population control strategy with partner Melinda Gates, to use Depo Provera to immorally eradicate births of people of color globally, is lock, stock and barrel Ravenholt's predatory racist family-planning policy in sheep's clothing.

Dr. Shah, a distinguished Bill Gates employee before his current USAID position, recognizes that BMGF's perceived stamp of approval on Depo Provera serves as a strategy to effectively insulate Pfizer from criminal and civil

⁸⁰ CDC Morbidity and Mortality Weekly Report (MMWR): [Abortion Surveillance --United States, 2009, November 23, 2012 / 61\(SS08\);1-44](#)

⁸¹ Depo Provera Fact Sheet, Committee on Women, Population, and the Environment (2007).

⁸² Charles Darwin. "*On the Origin of Species by Means of Natural Selection, or the Preservation of Favoured Races in the Struggle for Life.*" (1859)

⁸³ PATH News. [Innovative partnership to deliver convenient contraceptives to up to three million women](#) (2012).

⁸⁴ Different Takes, Population and Development Program at Hampshire College (No. 32 2005).

⁸⁵ Dhananjay Mahapatra. "[2,644 died during clinical trial of drugs in 7 years: Govt to SC](#)". Times of India (Apr 25, 2013)

⁸⁶ Steven Sinding, "[Learning by Doing: Testing the Supply-Side Hypothesis at USAID](#)". Seminar on the Production and Dissemination of Population Knowledge, Brown University, Providence, RI, March 20-25, 2001. Steven Sinding was a Professor Mailman School of Public Health and School of International and Public Affairs Columbia University at the time of this publication.

⁸⁷ Robert Zubrin, "[The Population Control Holocaust](#)," *The New Atlantis*, Number 35, Spring 2012, pp. 33-54.

prosecution, and public criticism. USAID, Pfizer, and Gates' legal teams also recognize that the multiple legal options available to women in the U.S. and Europe are not available to millions of harmed women of color globally, who have to depend on the [Alien Tort Statute](#) 28 U.S.C. § 1350 (ATS) to seek redress. However, ATS claims are filed in US district courts that are usually in the offending corporation's home state and, therefore, put foreign plaintiffs at a disadvantage. Nigeria is the only African nation that had the fortitude to seek and successfully sue Pfizer⁸⁸ in the United States. In 1996, Pfizer conducted illegal human experiments in Nigeria, killing or permanently disabled dozens of children in Kano with the FDA approved drug Trovan. It should be noted that the only time a pharmaceutical company or foundation has built a hospital (not for human research and experimentation) in sub-Saharan Africa, was because it was demanded by Nigerian officials in Kano as part of the Pfizer settlement⁸⁹ for a total of approximately \$75-100 million dollars.

INDIA: A PERMANENT TARGET OF UNITED STATES POPULATION CONTROL POLICY

India was the first developing country to begin voluntary population control strategies in 1951⁹⁰. In 1952 eugenicist Margaret Sanger created the [International Planned Parenthood Federation](#)⁹¹ (IPPF) in India with the help of socialite Dhanvanthi Rama Rau. Then by 1959, India evolved from a fairly voluntary, humane, population control program to conducting mass sterilizations⁹² utilizing funds first provided by USAID, followed by IPPF and UNFPA with funding that was funneled by USAID and US private foundations⁹³. In 1966, facing a food crisis, Prime Minister Indira Gandhi's pleas for food aid were manipulated by the US. Gandhi came to Washington and on March 28, 1966 met with President Lyndon Johnson.⁹⁴ Prior to that meeting Gandhi was advised by then-Secretary of State Dean Rusk that the terms of US aid included massive sterilization population control efforts. Gandhi, in a deep economic crisis, accepted dehumanizing sterilization population control measures and received US funding. Two years later, World Bank President Robert McNamara, implemented the same policy of providing foreign aid when developing countries accepted drastic population control measures. The Ford Foundation financed the academics that launched the World Bank forced sterilization program in India in the early 1970s. The program killed approximately 1,774 people in botched medical procedures. At the height of her power, Prime Minister Gandhi (a Hindu) set up appalling forced sterilization camps and denied food rations to lower caste Indians who were unsterilized. In the last six months of 1976 alone, Gandhi forced the sterilizations of 6.5 million Indians⁹⁵. For adopting those extreme population measures, Gandhi received a substantial flow of foreign aid. Unfortunately, Gandhi's dehumanizing population control directives coupled with other fascist dictates against Sikhs and other marginalized groups ultimately led to her assassination in 1984.

For those historical reasons, India's democratic government heeded women's rights advocates who exposed Depo Provera's life-threatening harm and in 2002, Depo Provera was removed from all India's national family welfare programs⁹⁶. If private citizens or private birth control providers in India want to purchase or supply Depo Provera, they are free to use private funds. That should be the Depo Provera policy in the United States with no federal subsidies for a special category of implanted and injected dangerous contraceptives (e.g., *Depo-Provera*, *Norplant*, *Nexplanan*, *Implanon* and *Mirena*) targeted to low income women and women of color and women who receive federal and state subsidized healthcare at clinics. Unfortunately, USAID and its contractors continue promoting Depo Provera, through private channels with US taxpayer funds^{97,98}. Regrettably, India continues inhumane sterilizations with monetary incentives; however, upper-caste Hindu Brahminical elites have used population control efforts in reducing populations of the Dalit⁹⁹ (i.e. scheduled tribes and scheduled castes) and Muslims. Although assumed to be a thing of the past, extreme caste and sectarian prejudice remains strong and inextricable in India¹⁰⁰, and it is more probable than not that the Dalits are subject to a draconian contraceptive regime. Other inhumane population control methods have been adopted in India through the selective abortion of girls. Tragically, the mortality rates for Indian girls resulting from selective abortions of increased sharply from approximately 4.2 to 12.1 million between 1980 and 2010¹⁰¹. Furthermore, according to the NY Times, Indian Census data has already confirmed that the problem has accelerated since 2001, and the 2011 census numbered about 7 million fewer girls than boys under the age of six¹⁰².

⁸⁸ Pfizer v Abdullahi, 562 F.3d 163 (2d Cir. 2009): http://www.scotusblog.com/wp-content/uploads/2009/09/09-34_pet.pdf. In July 2009, a U.S. Court of Appeals ruling against Pfizer found that the prohibition of non-consensual medical experimentation on humans is binding under customary international law, thereby allowing Nigerians the right to seek relief for damages against Pfizer in U.S. courts.

⁸⁹ Trovan: <http://www.business-humanrights.org/Categories/Lawlawsuits/Lawsuitsregulatoryaction/LawsuitsSelectedcases/PfizerlawsuitreNigeria>

⁹⁰ Paige Whaley Eager. *Global Population Policy: From Population Control to Reproductive Rights* (2004).

⁹¹ Robert Zubrin, "The Population Control Holocaust," *The New Atlantis*, Number 35, Spring 2012, pp. 33-54

⁹² Matthew Connelly. *Fatal Misconception: The Struggle to Control World Population*. (2008)

⁹³ *Id*

⁹⁴ *Supra* at 92

⁹⁵ Paige Whaley Eager. *Global Population Policy: From Population Control to Reproductive Rights* (2004)

⁹⁶ [Introducing Depo Provera Injectable Contraceptives to Private Medical Practitioners in Urban Gujarat](#). *Frontiers in Reproductive Health / Population Council New Delhi, India*; In collaboration with DKT India / EngenderHealth. *CORT* (March 2003).

⁹⁷ *Id*

⁹⁸ FHI 360 issue brief. [Topic: Injectable Contraception in India](#). FHI360 is a collaboration of Family Health International and former USAID contractor Academy for Educational Development (AED). AED was forced to shut down after it was prosecuted by the DOJ for fraud, bribery and false claims.

⁹⁹ [Over 260m victims of caste-based bias: UN](#). *Times of India* (May 26, 2013)

¹⁰⁰ [Dalit body alleges discrimination](#). *Times of India* (Jun 2, 2013)

¹⁰¹ Prabhat Jha et al., [Trends in selective abortions of girls in India: analysis of nationally representative birth histories from 1990 to 2005 and census data from 1991 to 2011](#). *The Lancet*, Volume 377, Issue 9781, Pages 1921 - 1928, (4 June 2011)

¹⁰² Jim Yardley. [As Wealth and Literacy Rise in India, Report Says, So Do Sex-Selective Abortions](#) *NY Times* (May 24, 2011)

GATES CONCEALS ITS OWN FUNDED RESEARCH OF DEPO PROVERA'S HIV/AIDS RISK

In July 2012, Melinda Gates [announced her billion dollar Depo Provera media campaign](#)¹⁰³ blitz, incorporating USAID's established partnership with Becton Dickinson, PATH, and Pfizer, which led to the [development of Uniject](#)¹⁰⁴. Gates and USAID's goal is to use Pfizer's [Depo Provera as the optimum contraceptive for Africa](#).¹⁰⁵ The new Uniject delivery system obviates the use of licensed healthcare professionals.¹⁰⁶ By utilizing PATH's "self-injection" system USAID circumvents and violates [FDA](#)¹⁰⁷ regulations that require healthcare providers counsel patients about Depo Provera's drug warnings. USAID, Melinda Gates and any trier of fact cannot reasonably expect a mother in a village in Botswana, Cameroon, Cape Verde, Ethiopia, Ghana, Guinea, Lesotho, Malawi, Nigeria, Senegal, South Africa, Swaziland and Zimbabwe, who is self-injecting with Uniject, to read and understand medical FDA **Black Box** warnings and Depo Provera's deadly side effects. BMGF participates in a pattern of fraudulently promoting Depo Provera, by illegally concealing fatal harm and/or circumventing FDA patient counseling requirements, to support their [population control goals](#)¹⁰⁸.

Ms. Gates minimized the proven risk of acquiring HIV/AIDS with Depo Provera by directing the public to a contrived eight-page ["Technical Statement"](#)¹⁰⁹ published by the United Nations World Health Organization (WHO) five months before Melinda Gates' announcement. It informed the public that Depo Provera was safe; and that all contrary scientific research that linked Depo Provera to HIV infection was "inconclusive". The W.H.O. statement was repeated by several mainstream reporters and experts without questions or investigation. A simple question arises: how could all research that points to Depo Provera's harm be inconclusive, when that is the overwhelming findings of the majority of research, and why are stakeholders with institutional conflicts of interest making that decision?

Paradoxically, the glossy, superficial W.H.O. [Technical Statement](#) was achieved by lobbying from BMGF, Pfizer, Population Council and others in the Depo Provera policy/profit system to repudiate and discredit BMGF's own funded research findings by distinguished researcher Renee Heffron and colleagues. Those findings proved to be unfavorable towards both Depo Provera and the USAID/Gates contraceptive policy. *Heffron et al.* published their findings in 2012 in *Lancet Infectious Diseases* medical journal. In their report, Heffron et al. explicitly recommended informed consent in their "interpretation" of research findings as the following: ["Women should be counseled about potentially increased risk of HIV-1 acquisition and transmission with hormonal contraception especially injectable methods"](#)¹¹⁰. The fact that preeminent researchers and scientists paid by Gates and NIH made explicit recommendations contradictory to the views of their funders that support Depo Provera and other injectables, underscores the seriousness of HIV/AIDS risk and Depo Provera use. The Gates Foundation arrogates to itself a contradictory standard of regulatory oversight and believes it can coerce, influence or contradict officials and regulators, and discredit preeminent scientists that conduct research with findings contrary to Gates' worldview.

UN-W.H.O. INFLUENCED BY GATES/USAID/POPULATION COUNCIL AND PFIZER OFFICIALS

As previously discussed, in early 2012, an article in *Lancet Infectious Diseases* [Heffron et al.](#), reported that a study in Africa found that women who used injectable contraceptives (primarily Depo-Provera) were more likely to contract HIV/AIDS compared to women not using hormonal contraception. Furthermore, *Heffron et al.* specifically recommended informing women of harm and using alternative low dose contraceptives. However, extreme population control advocates and Pfizer intermediaries disingenuously attacked Heffron's research findings without conducting any scientific research to substantiate their claims. The Heffron critics included BMGF, Planned Parenthood, UN, and USAID via the Guttmacher Institute^{111 112}, [Ronald Gray](#)¹¹³ (John Hopkins University), [James Shelton](#)¹¹⁴ (USAID), and [David Hubacher](#)

¹⁰³ Chris Wickham, [Melinda Gates pledges \\$560 million for contraception](#), Reuters (2011).

¹⁰⁴ Bill & Melinda Gates Foundation and PATH. [Home-Based Administration of Depo-Subq in The Uniject Injection System](#).

¹⁰⁵ PATH News, [Innovative partnership to deliver convenient contraceptives to up to three million women](#) (2012).

¹⁰⁶ Holly Grigg-Spall, [The Global Implications of Putting Population Control Over HIV Prevention](#), EDGE BOSTON (2012).

¹⁰⁷ Pfizer, [Depo Provera Warning and Precautions](#) (2012).

¹⁰⁸ Holly Grigg-Spall, [The Global Implications of Putting Population Control Over HIV Prevention](#), EDGE (Dec 2, 2012).

¹⁰⁹ WHO, Department of Reproductive Health and Research, [Hormonal contraception and HIV Technical statement](#) (February 16, 2012).

¹¹⁰ Heffron et al, [Use Of Hormonal Contraceptives And Risk Of HIV-1 transmission: A Prospective Cohort Study](#), Lancet Infect Dis (2012).

¹¹¹ Guttmacher Institute. [Hormonal Contraceptives and HIV Risk—Emerging Evidence in Context](#) (July 2012). Funded by Gates.

¹¹² From 1962-1974, Dr. Alan Guttmacher was one of the most effective and ruthless population control policymakers to lead Planned Parenthood and the International Planned Parenthood Federation. Dr. Guttmacher also the Vice President of the American Eugenics Society advised US and foreign government officials on policies that forcibly sterilized men and women. Guttmacher advised and collaborated with USAID and UNFPA on the most inhumane forced sterilization programs in India.

¹¹³ In Ronald Gray's July 2012 critique of Heffron in Lancet, Dr Gray of John Hopkins conceals important conflicts of interest (COI): Pfizer, Gates, NIH and USAID amongst others. Gary was a principle investigator in a Depo Provera-Gates funded study on [HIV infected women in Rakai Uganda](#) – the Rebecca Project has no documentation of valid informed consent for that study. [John Hopkins actively promotes Depo Provera without respecting the FDA's Black Box warnings](#). In the past JHU recommended treating male sex-offenders with Depo Provera (informational- not a COI). Gray unethically declared he has no conflict of interest in his critique of

DEPO-PROVERA: DEADLY REPRODUCTIVE VIOLENCE AGAINST WOMEN, Rebecca Project for Human Rights (June 2013) (*Family Health International 360*¹¹⁵), and others with vested interests at Ford, Gates, NIH, Pfizer, Rockefeller or USAID, who facilitate the use of Depo Provera in US family planning policy. However, [Heffron et al. responded effectively](#)¹¹⁶ to the unsubstantiated transparent [attacks by Gray, Shelton and Hubacher](#) to minimize Depo Provera's HIV/AIDS harm.

Renee Heffron's distinguished research warning African women about Depo Provera, led to an international debate rigged by USAID, Gates, Planned Parenthood, Population Council officials, lobbyists and extreme population control advocates. The debate was about whether or not to subsidize and promote Depo-Provera to African women, as well as whether or not to enforce mandatory warning to African women that taking the drug increased risk for HIV/AIDS. When enforced, mandatory warnings for African women translate to a significant loss of income for Pfizer and a complete reevaluation of outdated U.S. and UN family planning policy with racist implications. Therefore, the UN-WHO, which depends heavily on Gates and other philanthropists to support its programs, convened a closed meeting in Geneva on January 31, 2012, to guarantee that the Melinda Gates \$4 billion-Pfizer-USAID partnership was secured.

CLOSED U.N. MEETING IN GENEVA, SWITZERLAND FROM JANUARY 31 TO FEBRUARY 1, 2012

From January 31 to February 1, 2012, WHO staff met in Geneva, Switzerland to discuss the HIV research evidence in a closed meeting with invited experts (who were sworn to secrecy). The WHO staff subsequently reached a decision through WHO's "Guidelines Review Committee," and on February 16, 2012, WHO announced its decision in Geneva, Switzerland stating that: *Women living with HIV/AIDS or at high risk of HIV/AIDS can safely continue to use hormonal contraceptives to prevent pregnancy*¹¹⁷,

CDC/USAID DOCUMENT EXAMINED IN W.H.O. GENEVA DEPO PROVERA DEBATE¹¹⁸

The document analyzed at the meeting, which the WHO claimed presented insufficient reason to withdraw Depo Provera and enforce mandatory warnings to women was withheld from the public. This analysis was apparently prepared by two careerists, Chelsea Polis, of the USAID and Kathryn Curtis of the CDC. Polis and Curtis provided Gates, USAID and WHO with the cover needed to promote Depo Provera without enforceable mandatory warnings of HIV risk, after Gates and NIH's own research conducted by Rene Heffron et al. demonstrated findings to the contrary. The Polis/Curtis manuscript used in the WHO decision was submitted to *Lancet Infectious Diseases* (LID). However, as of early May 2013, their draft manuscript has not been published by *Lancet*-- [the document can be downloaded here](#).

Chelsea Polis (USAID) and Kathryn Curtis (CDC) Barter the Lives of Women to Advance Careers:

Comments in the following paragraphs are based on their [draft manuscript](#) submitted to *Lancet Infectious Diseases* (LID): With some caveats, Polis' and Curtis' review found most relevant studies of HIV/AIDS incidence in women with vs. without injectable contraceptives, and their initial account of the evidence is also reasonable. A good summary of this evidence can be found in [Figure 3 on page 37](#). However, elsewhere in the paper, several research reports are rejected as an effort to water down available evidence not supportive of Depo Provera's use in high-risk areas. However, the attempt to discredit [Heffron et al.](#) fails, because the Heffron research is backed by eleven other independent research experiments, while only four experiments support the use of Depo Provera in high HIV regions. Find the detailed explanation below.

- 1) In [Figure 3](#), each line reports the relative risk (RR) of contracting HIV/AIDS for women who take injectable contraceptives vs. other women in a single study (the dot, square, or triangle shows the RR; read the scale at the bottom of the Figure) and the 95% confidence interval around this RR.
- 2) An RR=1 means that women who take injectable contraceptives are at equal risk to get HIV/AIDS compared to other women.
- 3) As is evident from Figure 3, most studies found women taking injective contraceptives to be at higher risk to contract HIV than women who were not taking such injections; the majority of the dots, squares, or triangles are to the right of the vertical line, showing RR>1.

Heffron, when in fact he has significant institutional conflicts of interests. Though conflicts do not preclude Dr. Gary from critiquing Heffron, deliberately concealing conflicts of interest suggests a lack of ethical independence.

¹¹⁴ In James Shelton's July 2012 critique of Heffron in *Lancet*, Shelton of USAID conceals conflicts of interest (COI): Pfizer, Gates, NIH, & USAID. Shelton declares no COI in his critique. Though conflicts do not preclude Shelton from critiquing Heffron, deliberately concealing conflicts suggests a lack of ethical independence.

¹¹⁵ In Hubacher's July 2012 critique of Heffron in *Lancet*, Hubacher conceals several conflicts of interest with Pfizer, Gates, USAID and others. His only declared conflict is Bayer, which coincidentally is licensed to sell Pfizer's other dangerous contraceptive Norplant to developing countries after it was pulled from the US market. FHI360 is a permanent USAID contractor with no substantive independence from USAID regarding family planning. Furthermore, FHI360 is a collaboration of Family Health International and former USAID contractor Academy for Educational Development (AED). AED was forced to shut down after it was prosecuted by the DOJ for fraud, bribery and false claims. Though conflicts do not preclude Hubacher from critiquing Heffron, deliberately concealing conflicts suggests a lack of ethical independence. See *Authors' Reply, Correspondence, The Lancet*, Vol 12 (July 2011)

¹¹⁶ Renee Heffron, Helen Rees, Nelly Mugo, Jared M Baeten. *Authors' Reply, Correspondence, The Lancet*, Vol 12 (July 2011) – Renee Heffron et al. ethically declare all institutional conflicts with the Gates Foundation and NIH.

¹¹⁷ United Nations Media: [WHO upholds guidance on hormonal contraceptive use and HIV](#) (16 February 2012)

¹¹⁸ Information and manuscript provided by confidential source.

IS THE GATES FOUNDATION MORE POWERFUL THAN THE FOOD AND DRUG ADMINISTRATION (FDA)?

The untrammelled power of Bill and Melinda Gates is even more evident in the twenty-page Gates/PATH document, [*Home-Based Administration of Depo-Subq in the Uniject Injection System*](#)¹¹⁹, which authorizes the use of a self-inject Depo Provera system at home. The Gates/PATH document details a four-year Depo Provera self-inject strategy, which: 1) circumvents FDA **Black Box** warning by obviating health professional counseling requirements, and; 2) is in violation of United States of America’s most stringent drug warnings authorized and promulgated by the FDA—i.e., **Black Box** warnings. In effect, it supersedes Department of Health and Human Services and FDA statutes and regulations. The document is void of following words, “*FDA*”, “**Black Box**”, “*warning*” and “*osteoporosis*”, which are essential in describing and counseling women of Depo Provera’s life-threatening harm as ordered by the FDA. However, to promote Depo Provera as a more advantageous optimum contraceptive with minimal side-effects, Gates and PATH make several illegal off-label claims that Depo Provera provides: (i) protection against endometrial cancer and uterine fibroids, (ii) reduced sickle cell crises in women with sickle cell anemia, and (iii) decreased risk of iron-deficiency anemia (see page 3). It should be noted that [Depo Provera has not been approved as a cancer prevention drug or for other medical uses](#). Since it is illegal for Pfizer to promote off-label claims, it utilizes intermediaries to evade US law.

Moreover, as controlling principal intermediaries for Pfizer (see page 14), Gates and PATH effectively obliterate the authority of the FDA to regulate Depo Provera by transferring the FDA’s regulatory jurisdiction to the United Nations. In their document [*Home-Based Administration of Depo-Subq in the Uniject Injection System*](#), Gates and PATH minimize and downplay mineral bone density loss, by referencing the **United Nations World Health Organization** with an implied overriding authority, stating the following ([*page 3, footnote: c*](#)), “...data indicates that DMPA reduces bone mineral density (BMD) in women using DMPA who have attained peak bone mass, and impairs the acquisition of bone mineral among those who have not yet attained peak bone mass.... when DMPA use is discontinued, BMD increases again in women, regardless of age, except for those who have reached menopause.” *The WHO recommends that there should be no restrictions on the use of DMPA, including restricting the duration of use, for women age 18-45 years who are otherwise eligible to use the method.*” These statements taken in totality are contextually false to specifically circumvent **Black Box** warnings. If Depo Provera is genuinely a safe and effective contraceptive, with only minimal side effects, why then are Gates, Hopkins, USAID and Pfizer’s other controlling principal intermediaries deliberately concealing the plain “**Black-Letter**” **FDA Black-Box** warnings in their effort to minimize and conceal Depo Provera’s life-threatening harm?

A NOTE ABOUT THE UNITED NATIONS WORLD HEALTH ORGANIZATION (W.H.O.)

The [W.H.O.](#) executive body is comprised of 34 international government bureaucrats, technocrats and some public health doctors who are bereft of experience in conducting scientific research on progestin contraceptives (Depo Provera/Norplant), breast cancer, HIV/AIDS or cardiovascular disease and they lack expertise in human rights law or health law. There is a joke among Africans that the WHO will in all likelihood endorse and approve any banned or rejected substance in the U.S. for use in Africa. Examples that validate these claims include Monsanto’s DDT and Pfizer’s Norplant, which were withdrawn from US markets, but are actively used in developing nations with the approval of USAID and the UN. Though W.H.O. representatives are well meaning government officials, they are in fact not independent representatives of the interests of their countries. In reality, they are constructively held captive to the directives of multinational corporations, USAID and billion dollar foundations. Those institutions financially support the developing world’s economies and provide government officials with financial incentives.

In 2002, amidst a flurry of lawsuits in the US, Pfizer pulled Norplant from the US market. Norplant (implanted in women) similar to Depo Provera (injected in women) are both progestin-only contraceptives. In 1966, the Norplant contraceptive was developed by Sheldon Segal and Horatio Croxatto at the Population Council (the same research institution that hired corrupt Dr. James Phillips of Columbia University to design and conduct the unethical Navrongo Depo Provera experiment in Ghana). Despite the fact that Norplant is considered dangerous and pulled from the U.S. market, WHO continues to approve its sale abroad, and Pfizer quietly peddles Norplant through the Bayer Corporation to developing countries. Furthermore, the Population Council persistently promotes Norplant as a safe contraceptive on its U.S. website (featuring the usual pictures of adolescent African females as models, but never European females) with this statement verifying the WHO stamp of approval “*Although approved by the FDA in 1990, Norplant is not currently available in the United States. This contraceptive implant was [confirmed to be effective for seven years by the World Health Organization](#)¹²⁰”.* This is only one example that reveals the dominant corporate interests influencing WHO officials, because certainly promoting the dangerous contraceptive Norplant does not support the health interests and dignity of women of color and low-income women worldwide.

¹¹⁹ Bill & Melinda Gates Foundation and PATH. [*Home-Based Administration of Depo-Subq in The Uniject Injection System*](#). This is the new self-inject Depo Provera system that obviates required patient counseling to circumvent FDA **Black Box** warnings -- Kenya, Malawi, Pakistan, Rwanda, Senegal are initial targets.

¹²⁰ Population Council Website, Norplant. <http://www.popcouncil.org/what/norplant.asp#insertion>

LEGAL PRECEDENT FOR THE FBI AND US PROSECUTORS TO INVESTIGATE AND FILE CHARGES FOR FRAUD

U.S. prosecutors have legal precedent¹²¹ to prosecute Pfizer and its *controlling principal* intermediaries such as BMGF, Rockefeller Foundation, Ford Foundation, Planned Parenthood and other institutions that collude to conceal harm and illegally market and promote dangerous drugs. Fraud has been associated with Depo Provera's¹²² promotion as early as 1975 and government officials have been regularly bribed by Pfizer¹²³. This system of illegal rebranding, illegal promotion/marketing and kickbacks from Pfizer providing monetary incentives to government officials, health officials, and other stakeholders is not an anomaly associated solely with Depo Provera. The Department of Justice is fully abreast of Pfizer's rebranding fraud. This DOJ lawsuit, endorsed in 2009 by Assistant Attorney General Tony West¹²⁴, details a \$2.3 billion settlement agreement as the result of Pfizer's bribes, kickbacks, Medicaid schemes, and its illegal rebranding, marketing/promotion and distribution of drugs in the United States. As stated earlier in this report it is important to note that Africans do not have immediate access to Pfizer and drug corporations in U.S. courts for the same fraud. Therefore, billion dollar financial losses to Pfizer due to successful prosecutions by the Department of Justice¹²⁵ are offset by aggressively promoting/marketing more dangerous drugs purchased by USAID to the developing world, high populated regions of Southern Asia, and to Medicaid patients in the US, who cannot navigate informed consent procedures and/or US courts to sue for redress.

Since it is illegal for Pfizer to promote off-label claims, it utilizes intermediaries to evade US law who then become liable in the fraudulent promotion, marketing and administering of Depo Provera to women. According to the Rebecca Project for Human Rights, the fundamental distinction between an independent physician in a private practice or institution who recommends Depo Provera (with counseling of *Black Box* warnings) for a specific *off-label* prescription use such as endometriosis, and Pfizer's *controlling principal* intermediaries who are promoting *off-label* claims while deliberately concealing FDA *Black Box* warnings, is that independent physicians are not *constructive participants* nor the proprietors/architects of one or more of the following: (1) innovation, (2) funding, (3) investing, (4) manufacturing, (5) advertising, (6) websites for health clinics and institutions, (7) distributing, (8) supplying, (9) policy, and (10) proprietors of specialized knowledge and research data detailing life-threatening harm, in the Depo Provera policy/profit system. BMGF, USAID, the Population Council, the Ford Foundation, the Rockefeller Foundation, Planned Parenthood and a special category agents and contractors, including public health universities, are indeed *controlling principal* intermediaries for Pfizer. All documents and medical websites promoting Depo Provera to governments, public and private stakeholders must display **Black Box** warnings if affiliated with US federal funding. However, an independent physician/institution is inadvertently a *constructive participant* in the promotion of Depo Provera (whereas not a *controlling principal* intermediary), if physician/institution advertises or promotes Depo Provera on a website or via mass media to the general public. At that point, the physician/institution is required to display the plain "**Black-Letter**" **Black Box warnings** on the website and cannot make false claims or off-label claims. Complying with DHHS/FDA regulations and statutes must be a requirement to maintain *tax-exempt* status.

Reverence for Bill and Melinda Gates is understandable. However, one has to also realize that the Gates family has a background of illegal marketing schemes. New York Times reporter James Kantor, in his report "European Regulators Fine Microsoft...", wrote "*Microsoft has been a special case in the history of European Union antitrust enforcement, racking up a total of \$3.4 billion in fines over about a decade*¹²⁶." Stephen Castle and David Jolly, New York Times reporters, narrated an initial Microsoft \$1.3 billion fine. Castle and Jolly wrote, "*Microsoft was the first company in 50 years of E.U. competition policy that the commission has had to fine for failure to comply with an antitrust decision*¹²⁷," Microsoft's antitrust fines for illegally marketing Windows to maintain a monopoly, are equal or greater than those paid by Pfizer for its illegal marketing drug schemes. For that reason, with Depo Provera being marketed and promoted by two corporate giants that have been investigated, prosecuted and paid the highest illegal marketing/promotion fines in history, it is essential that there is Congressional oversight with Depo Provera's promotion to avoid an impending global health crisis with this billion dollar investment. Moreover, federal scrutiny from the DOJ/FBI and HHS-Office of Inspector General to investigate ongoing patterns of fraud and racketeering is warranted.

¹²¹ Department of Justice, Office of Public Affairs: GlaxoSmithKline to Plead Guilty and Pay \$3 Billion to Resolve Fraud Allegations and Failure to Report Safety Data (July 2, 2012).

¹²² Depo Provera Fact Sheet, Committee on Women, Population, and the Environment (2007).

¹²³ Department of Justice, Office of Public Affairs: Pfizer H.C.P. Corp. Agrees to Pay \$15 Million Penalty to Resolve Foreign Bribery Investigation, SEC and Companies Agree to Civil Disgorgement of \$45 Million (August 7, 2012).

¹²⁴ Dept. of Justice, Pfizer Settlement Agreement with US Department of Justice, Justice.gov (2009).

¹²⁵ Duff Wilson, Drug Makers' Feared Enemy, New York Times (June 4, 2011).

¹²⁶ James Kantor, "European Regulators Fine Microsoft, Then Promise to Do Better", NY Times (March 6, 2013)

¹²⁷ Stephen Castle and David Jolly, "European Fines Microsoft \$1.3 Billion", NY Times (February 28, 2008)

The DOJ should charge Pfizer with fraud for the following and other reasons:

- (a) Pfizer with *controlling principal* institutional intermediaries: BMGF, USAID, the Population Council, the Ford Foundation, the Rockefeller Foundation, Planned Parenthood, Mailman School of Public Health, Bloomberg School of Public Health, are engaged in a pattern of fraudulent and illegal promotion schemes with other agents and contractors, to deceive and defraud patients, US taxpayers, ethical physicians, ethical birth control providers, regulators/FDA, insurance companies, federal and state health programs, to cause prescribing and payments for Depo Provera.
- (b) Pfizer with controlling principal intermediaries: BMGF, USAID, the Population Council, the Ford Foundation, the Rockefeller Foundation, Planned Parenthood, Mailman School of Public Health, other agents and contractors, use a wide variety of monetary incentives and kickbacks as a quid pro quo to induce and encourage birth control providers, US and international government officials, physicians, researchers and/or human rights advocates, to downplay and conceal Depo Provera's harm. Those monetary incentives and kickbacks come in the form of consulting fees, donations, research grants, travel, program grants, research duties as *principle investigators* or *investigators* and publishing opportunities in research/medical journals.
- (c) In furtherance of the fraudulent and illegal promotion of Depo Provera, Pfizer's controlling principal intermediaries: BMGF, USAID, the Population Council, the Ford Foundation, the Rockefeller Foundation, Planned Parenthood, Mailman School of Public Health, other agents and contractors, engage in a pattern of intimidation, threats, obstruction of investigations, withholding information that exposes harm; in addition, colluding to harm organizations, advocates and health professionals who elucidate Depo Provera's harm to protect women.
- (d) Pfizer with controlling principal intermediaries fraudulently promote/market and administer Depo Provera as a safe contraceptive for women, adolescents and children¹²⁸ by concealing, downplaying and minimizing¹²⁹ life-threatening harm. That fraud results in women being forced, coerced and constructively held captive to use Depo Provera without knowledge of FDA warnings and other lethal harm; thereby, denying women their inalienable right to choose a safer contraceptive. The Parties also promote Depo Provera for uses that the FDA has not approved in a pattern of "off-label" claims. This illegal rebranding of Depo Provera to women with Medicaid payments and other disbursements from the US government is illegal under the False Claims Act (FCA), 31 U.S.C. §§ 3729 – 3733.

Pfizer and intermediaries possess specialized knowledge and proprietary research data of the following:

- 1) [FDA Black-box warnings](#)¹³⁰ require that women are informed of significant bone density loss and not use Depo Provera for more than two years.
- 2) Pfizer's own research data from clinical trials and information furnished to US physicians consistently [demonstrate several debilitating side-effects](#)¹³¹, and indicate that even after discontinuing Depo Provera in adolescents, mean bone mineral density loss at total hip and femoral neck did not fully recover by 5 years [\[see Clinical Studies \(14.3\)\]](#)¹³².
- 3) The American Association for Cancer Research also found that women who use Depo Provera have [double the risk of developing breast cancer](#)¹³³.
- 4) BMGF's own privately funded HIV/AIDS research with the NIH, published by the leading medical journal, *The Lancet*, [recommends informing women with HIV/AIDS of the risk of Depo Provera harm and to use alternative non-progesterone based contraceptives](#)¹³⁴, because it exacerbates the rates of HIV/AIDS infections to their sexual partners. Underscoring the importance of this research is the fact that Heffron and her research team funded by Gates and NIH did not succumb to pressure and still maintain their professional integrity even after they were attacked. This Heffron document published by *The Lancet* responds to those attacks.
- 5) Researchers from Rockefeller University, New York University School of Medicine, Harvard Medical School, New England Regional Primate Research Center, and other prominent researchers found that [Depo Provera increases SIV transmission eight-fold in Simian monkeys](#). This finding is supported by research on simian primates, which found that progesterone multiplied their risk to SIV (*simian version of HIV*) by eight times¹³⁵ (Rockefeller University, New York University School of Medicine, Harvard Medical School--New England Regional Primate Research Center, National Institutes of Health-NIH).
- 6) Posted on Planned Parenthood's website (featuring a woman of color as the face model) is the off-label claim: ["The shot \[Depo Provera\] can help prevent cancer of the lining of the uterus \(page 2\)"](#)¹³⁶. A search of [Depo Provera's FDA approval](#)¹³⁷ does not list the contraceptive as a cancer prevention drug specifically; any other approval by the FDA should be stated or is fraud. Gates Foundation/PATH [make similar claims](#) (p.3).

¹²⁸ Katie Thomas, [J.&J. Fined \\$1.2 Billion In Drug Case, New York Times](#), (April 2012)

¹²⁹ [United States ex rel. Greg Thorpe, Et al., v. GlaxoSmithKline PLC C.A. No. 11-10398-RWZ](#), (October 26, 2011)

¹³⁰ Pfizer, [FDA Box-Warnings for Depo Provera](#), Letter to US Healthcare Professionals (November 18, 2004)

¹³¹ Pfizer, [Depo Provera Warning and Precautions](#) (2012).

¹³² *Id* (page 2 and 3)

¹³³ Christopher I. Li, Elisabeth F. Beaver, Mei Tzu Chen Tang, et al., [Effect of Depo-Medroxyprogesterone Acetate on Breast Cancer Risk among Women 20 to 44 Years of Age](#), American Association for Cancer Research (2012)

¹³⁴ Heffron et al, [Use Of Hormonal Contraceptives And Risk Of HIV-1transmission: A Prospective Cohort Study](#), *Lancet Infect Dis* (2012).

¹³⁵ Preston, et. al., [Progesterone Implants Enhance SIV Vaginal Transmission And Early Virus Load](#), *Nature Medicine* 2, 1084 - 1089 (1996).

¹³⁶ Planned Parenthood Website, [Depo Provera Birth Control Shot on Page 2](#), (Retrieved 6/19/2012).

¹³⁷ FDA Approved Drug Products: [Depo Provera's FDA approval](#) @ <http://www.accessdata.fda.gov/scripts/cder/drugsatfda/index.cfm>

RECOMMENDATIONS

The Rebecca Project for Human Rights urges the US Government to enforce mandatory FDA **Black Box** patient counseling requirements, and for health providers to obtain valid informed consent before Depo Provera is administered in the United States, Africa, the Caribbean, Latin America, Southern Asia and the rest of USAID's program areas in the developing world.

Phase I (Executive order): Executive Orders have been used to protect the civil rights of vulnerable and minority groups in the United States. It is our recommendation that birth control providers, before administering Depo Provera, inform women verbally and in writing, with signed informed consent forms, in a patient/client's native language that: 1) Depo Provera significantly reduces bone mineral density, 2) should not be used for more than two years, 3) Depo Provera doubles the risk of breast cancer, 4) Depo Provera increases a woman's susceptibility to HIV/AIDS, due to the high dose of progesterone in Depo Provera inducing thinning of the vaginal epithelium; therefore, 5) condoms should be used during every sexual encounter while using Depo Provera, 6) Depo Provera can cause blood clots and strokes, and 7) Depo Provera contributes to miscarriages and sterility. In cases where women do not read or write, full informed consent can be provided and verified by a video recording. Since phones with video cameras are ubiquitous even in remote villages in Africa, this can be achieved with minimal cost.

This year, during the 150th Anniversary of the Emancipation Proclamation, we honored Rosa Parks as a woman of courage and reflected on Abraham Lincoln, who also had the courage and conviction to begin a process of implementing equal protections when he announced the Emancipation Proclamation on September 22, 1862, by Presidential Executive Order which took effect on January 1, 1863. Two years later, Congress passed the 13th Amendment to the Constitution, stating that "neither slavery nor involuntary servitude shall exist in the United States," and "[neither shall the United States support slavery and involuntary servitude in faraway lands.](#)" Women of color in *Africa and globally are exploited as modern day slaves for human medical experimentation, and their communities have become dumps for dangerous drugs not offered to most privileged White women.* Safe drugs and contraception is not a right for only privileged Americans, an Executive Order can insure that USAID contractors, HMO's and healthcare officials receiving Medicaid and other government payments or tax benefits stop distributing and administering Depo Provera until mandatory full informed consent procedures are implemented and enforced.

Phase II (By Act of Congress): We respectfully urge the following Committees hold Congressional hearings on Depo Provera's fraudulent promotion and funding: 1) House Foreign Affairs and Senate Foreign Relations, 2) House and Senate Judiciary, 3) House Energy and Commerce and Senate Commerce, Science and Transportation and 4) House Oversight and Government Reform and Senate Homeland Security and Government Affairs. The Rebecca Project believes Pfizer has a right to sell Depo Provera to women who want to purchase a potentially lethal drug with private funds, with knowledge of FDA warnings. However, we firmly believe that the American taxpayer has a fundamental right not to support federal subsidies for a potentially lethal drug arguably one of the most expensive contraceptives (i) All Medicaid, state insurance programs and USAID payments to Pfizer and USAID subcontractors for Depo Provera must be terminated. (ii) In addition to the high cost of Depo Provera, US taxpayers are also left to pay billions in additional health costs from Depo Provera's debilitating and lethal effects and indirectly subsidize legal costs from women harmed by Pfizer. (iii) By a prudent and moral Act from Congress ending federal subsidies for Depo Provera, and a special category of implanted and injected dangerous contraceptives (*e.g., Norplant, Nexplanon, Implanon and Mirena*), shall eliminate the pervasive coercion associated with some unscrupulous birth control providers such as Planned Parenthood, who serve low-income women and women of color and characteristically eschew informing women about debilitating side effects.

IMPACT OF ADVOCACY EFFORTS TO COMBAT UNETHICAL RESEARCH & DANGEROUS DRUGS

On September 23, 2011, the Rebecca Project's advocacy work on Depo Provera in Africa culminated in the publication of [The Outsourcing of Tuskegee: Nonconsensual Research in Africa](#). It was launched at Congressman John Conyers' Judiciary Brain Trust during the Congressional Black Caucus (CBC) Conference organized by Keenan Keller, *Senior Judiciary Committee Counsel for Congressman John Conyers*. The CBC Unethical Human Research panel was moderated by Laura Murphy, Director, ACLU (Washington, D.C. Legislative Office) and the panelists were: [Grace Akallo](#), Executive Director-United Africans for Women and Children Rights, [Dr. Avis Jones-DeWeever](#), Executive Director National Council of Negro Women, and [Edee Saada Saar](#) alias [Malika Saada Saar](#)¹³⁸-- former Executive Director of the Rebecca Project. Saar and panelists spoke powerfully in support of the report calling unethical research in Africa a "crime against humanity". At that same CBC Braintrust, Rebecca Project Policy Director Kwame Fosu spoke to Civil

¹³⁸ Malika Saada Saar, named, rewrote portions, edited and art directed the report's cover prior to CBC launch in 2011. Saar actively promoted report on Capitol Hill and to media. However, Saar colluded with foundations (except Jessie Smith Noyes Foundation) to discredit report when funders threatened to terminate grants.

Rights Asst. Attorney General Tom Perez, who briefly reviewed the document, expressed interest and asked Fosu to contact him or Counsel Emily Loeb. Rebecca Project's CBC forum was followed up with two forums on unethical research at Georgetown University Law Center attended by Congressional staffers, advocates and public health experts.

Following the report's presentation during the Congressional Black Caucus Conference, Rebecca Project for Human Rights' efforts were lauded. In October 2011, the President of the [Population Council](#), [Peter Donaldson](#) and his General Counsel, [Patricia Vaughan](#), came to the US Congress to discuss the Rebecca Project's report on unethical research in Africa with Mr. Keller. During this meeting, Mr. Donaldson relayed that he welcomed the Rebecca Project's report stating that, "anybody who denies what is explained in the report is 'suspect'." Mr. Donaldson communicated to Mr. Keller that improvements need to be made in research in Africa and supported efforts to achieve this goal.

Mr. Donaldson further agreed that he welcomed a GAO report that Mr. Keller suggested to study the [Navrongo Experiment](#)¹³⁹ to improve oversight and ensure compliance of grantees with the World Health Organization's ethical human research guidelines. This was particularly rewarding, because Dr. James Phillips and Population Council researchers involved in this fraudulent Navrongo Experiment had erected a white-wall of silence. Further requests to open a review of the Navrongo Experiment were sent to USAID,¹⁴⁰ [Dr. Linda Fried of the Mailman School](#)¹⁴¹ and [Dr. Judith Rodin of the Rockefeller Foundation](#)¹⁴², they all employ the services of corrupt and unethical researcher Dr. James Phillips. Drs. Fried and Rodin responded through agents denying knowledge of Dr. Phillips' unethical research.

WHO DIRECTS UNITED STATES' POPULATION CONTROL POLICY?

Eugenics is an ideology advocating the improvement of human population by stringently controlled breeding through the promotion of higher reproduction of desired "preferred" people, and reduced reproduction of less desired "unfit" people. To put eugenics in its contextual power dynamic, just as the sin of slavery was supported by the "*Founding Fathers*" of the United States, all "*founders*" of the eugenic movement were from white academia and industry during a period in the America when dehumanization and overt discrimination of Blacks was acceptable. Some of our notable eugenicists are: Clarence Gamble (*Proctor & Gamble*), Dr. Alan F. Guttmacher (*PPFA, IPPF and Guttmacher Institute*), Henry Ford, John Harvey Kellogg, (*cornflakes*), JP Morgan, Linus Pauling (*absolute genius*), Margaret Sanger (*contraception/forced sterilizations and abortions*), John Rockefeller III, Dr. Marie Stopes¹⁴³ (*contraception/reproductive rights*), and so on. Eugenics in all its intellectual permutations is simply an euphemistic manifestation of hate in all its variations: bigotry, racism, and the dehumanization of the disabled, mentally ill and downtrodden.

The United States has created a normative population control worldview directed through a surreptitious patchwork of policies promulgated by organizations whose ideological formation and funding have been provided by eugenicists. At the **top tier** of population control policy are organizations created by pioneers and patrons of the eugenics movement: [Planned Parenthood Federation of America](#) (PPFA), [International Planned Parenthood Federation](#) (IPPF), [Population Council](#), [UNFPA](#) (The United Nations Fund for Population Activities), and their patrons: the [Ford Foundation](#), the [Rockefeller Foundation](#), and [USAID](#). The newcomer to this elite group of eugenicist policymakers is the Bill and Melinda Gates welcomed with their foray into promoting the injectable contraceptive Depo Provera while concealing life-threatening harm. On the **secondary tier** are a cadre of research institutions, foundations, advocacy groups and advocates who act as credible academic references, experts and enforcers to insure that the fundamental goals of eugenic funders are carried out unchallenged with a contradictory global anthem of a woman's right to choose and women's empowerment, while denying women of color and low income women their inalienable right to choose safe contraceptives. Some of these institutions, foundations, advocacy groups and advocates are: [Guttmacher Institute](#), [CHANGE](#) (*Serra Sippel*), [RHrealityCheck](#) (*Jodi Jacobson*), [Ibis Reproductive Health](#), [Moriah Fund](#) (*Shira Saperstein*), and [NoVo](#) (*Pamela Shifman*) and others, who routinely illegally collude as enforcers¹⁴⁴ to obliterate dissent.

Background: In 1952 Catholic doctors joined their national delegations to the World Health Assembly to defeat a plan to use WHO for population control purposes. That same year (1952) there was closed meeting in Williamsburg, Virginia, (similar to the 2012 closed UN meeting in Geneva, Switzerland to approve Depo Provera) led by eugenics patron John D. Rockefeller III seeking an alternate vehicle for population control. That led to the creation of the Population Council by Rockefeller. The Ford foundation also donated seed money for the Population Council. Coincidentally, that same year (1952) eugenicist Margaret Sanger created IPPF in India. The UN Fund for Population Activities (UNFPA) was created between 1967 and 1969 (initiated by Lyndon B Johnson who was an ardent proponent for population control). Since UNFPA's inception it has been funded mainly by the United States (about 50% of funding) as an international population control vehicle. USAID funnels money through UNFPA to other population control vehicles like IPPF that contributed to atrocious sterilization programs in India, Peru and the one-child policy program in China. The heads of UNFPA may be people of color, but they make decisions in the interests of major funders (US, Canada and Western Europe).

¹³⁹Debpuur C, Phillips JF, Jackson EF, Nazzar A, Ngom P, Binka FN. The impact of the Navrongo Project on contraceptive knowledge and use, reproductive preferences, and fertility. *Studies in Family Planning* (2002).

¹⁴⁰Retrieved REBECCA PROJECT archives: Electronic communication with N. Schiegg (September - October 2010).

¹⁴¹Retrieved REBECCA PROJECT archives: Electronic communication with Fried, Phillips (July - October 2010, Sept 2011).

¹⁴²Retrieved REBECCA PROJECT archives: Electronic communication with J Rodin via Shari Patrick (July 30 2010).

¹⁴³Dr. Marie Stopes was based in the United Kingdom and did not allow forced sterilizations and abortions to be performed in her clinics while she was alive.

¹⁴⁴Retrieved RPHR archives via confidential source: Email indicating funder colluded with [Malika Saada Saar](#) and others to discredit report (2011)

APPENDIX

African Union, African-American Clergy and Human Rights Coalitions fighting Depo Provera's Genocide

Genocide is knowingly causing serious bodily harm to members of a group; deliberately inflicting on a group conditions of life, calculated to bring about its physical destruction in whole or in part; and [imposing measures intended to prevent births within the group](#)¹⁴⁵. A global coalition to fight this institutionalized violence and genocide against women of color and their families include: the African Union ([AU](#)), African NGOs, the Anti-Depo Provera Clergy Coalition, Dignity of Women's Health Coalition; and several Human Rights groups together with: Black Autonomy Network Community Organization ([BANCO](#)), Center for Renewal and Education ([CURE](#)), National Action Network-DC Chapter ([NAN](#)), Partnership League for Africa's Development ([PLAD](#)), Priests for [Life](#), and United Africans for Women & Children Rights ([UAWCR](#)). They have joined together to fight for policy change urging the US Congress and the Obama Administration to enforce mandatory informed consent procedures and FDA regulations that require health providers to inform consumers of serious side-effects. Furthermore, to terminate federal subsidies for Depo Provera and a special category of implanted and injected dangerous contraceptives (e.g., *Norplant*, *Nexplanan*, *Implanon* and *Mirena*), beginning with a moratorium on Depo Provera prescriptions, as instituted in Israel to protect and save the lives of women, until such time enforceable mandatory informed consent procedures are implemented by birth control providers.

In May 2010, the Rebecca Project secured detailed information of research fraud concerning Depo Provera and the Navrongo Experiment from a doctor at Johns Hopkins University who had worked with Dr. James Phillips. As part of its due diligence, the Rebecca Project contacted by phone and/or email all significant parties accused of wrongdoing in the *Outsourcing of Tuskegee* report for comments. The report was made available to Keenan Keller, Judiciary Committee Counsel and was reviewed by him and staffers. Report was also reviewed by Congressional staffers on the Africa, Global Health Human Rights committee, and Health committees. The report was also made available to veteran reproductive rights advocates, authors and program officers. The report was sent to public health experts, researchers and reviewers for the UN programs. Finally, the report was read and praised for its veracity by Peter Donaldson, the President of the Population Council. To date no material errors or false statements have been established.

If parties accused of wrong doing in the report were not available to respond, the Rebecca Project contacted program officers, general counsel or heads of research institutions. The Rebecca Project conducted a thorough investigation for truth, and the allegations of research fraud were sent to the Grameen Foundation, Ford Foundation, and Rockefeller Foundations. In light of the fact that Dr. James Phillips was the principal investigator involved in unethical conduct in the Gates Foundation research study called MOTECH, which precipitated the information about the seminal Depo Provera Navrongo Experiment, the Rebecca Project made special efforts to contact Mary Taylor (MOTECH program officer--Gates) and Connie Collingsworth (General Counsel-- Gates). Documents were also forwarded to the DOJ, USAID, DHHS and DOS.

REBECCA PROJECT FOR HUMAN RIGHTS CONTACTS THE GATES FOUNDATION ABOUT DR. PHILLIPS

On July 26, 2010, in order to determine the veracity of reports of unethical experimentation using Depo Provera on women in Africa, the Rebecca Project for Human Rights' International Policy Director, Kwame Fosu called the Bill and Melinda Gates Foundation's (BMGF) General Counsel, Connie Collingsworth. Mr. Fosu had forwarded a document to BMFG Program Officers regarding the activities of Dr. James Phillips, who is a Population Council researcher who also worked for the Bill and Melinda Gates Foundation, in Navrongo, Ghana. In February 2010, Dr. Phillips was accused of unethical conduct in another BMGF research project in Navrongo by his Program Manager on a MOTECH project in Navrongo (the Program Manager (PM) was his former student, MPH graduate from Columbia University, NY). When these new allegations went public, it prompted doctors and researchers who had worked with Dr. Phillips to come forward about detailed fraud in a previous Phillips experiment called the [Navrongo Experiment](#)¹⁴⁶. After several months of resisting pressure to commit research fraud on behalf of Dr. James Phillips and the Gates Foundation, the PM was fired by Phillips for insubordination, but PM continues to maintain professional integrity to research and African women. Dr. Phillips, described by those who know him professionally as a mild mannered researcher, is referred to as the "Godfather" of reproductive health research in Africa. He remains protected by the Population Council, U.S. government officials and Columbia University Mailman School of Public Health, because they are complicit and knowledgeable of his extensive research fraud across the African continent and Asia, and have to cover up his fraud to maintain academic legitimacy.

BILL AND MELINDA GATES FOUNDATION RESPONDS TO REBECCA PROJECT

On August 11, 2010, the Bill and Melinda Gates Foundation General Counsel, Connie Collingsworth, returned Kwame Fosu's call. Fosu discussed several [documented cases of unethical research](#) that were discovered. Attorney Collingsworth listened attentively, and at the close of the conversation, Collingsworth remarked, "This is a lot of work... it is going to be a difficult task... please let us know how we can help." When Collingsworth's associate counsel contacted Fosu a week later at Collingsworth's request, to determine if there were any additional updates, she also inquired if any assistance was needed. Fosu shared the need to locate humanitarian benefactors and funders dedicated to forging a coalition of socially conscious funders to end unethical research in

¹⁴⁵ [Rome Statute of the International Criminal Court, art. cited, July 17, 1998, 2187 UNT.S. 90.](#)

¹⁴⁶ Debpuur C, Phillips JF, Jackson EF, Nazzar A, Ngom P, Binka FN. The impact of the Navrongo Project on contraceptive knowledge and use, reproductive preferences, and fertility. *Studies in Family Planning* (2002).

DEPO-PROVERA: DEADLY REPRODUCTIVE VIOLENCE AGAINST WOMEN, Rebecca Project for Human Rights (June 2013)

Africa. However, the Rebecca Project for Human Rights' modest request to BMGF for assistance to create an institutional rampart for improved enforcement of [ethical research laws](#) to counter unethical scientific research in Africa never materialized. Two years later, with Pfizer, USAID and PATH, BMGF launched a misguided [billion-dollar humanitarian contraceptive campaign](#)¹⁴⁷ incorporating USAID's established partnership with Becton Dickinson, PATH, and Pfizer, which led to the development of Uniject. [Gates and USAID's goal is to use Pfizer's Depo Provera as the optimum contraceptive of choice in Africa](#).¹⁴⁸ The new Uniject delivery system obviates the use of licensed healthcare professionals.¹⁴⁹ By utilizing PATH's "self-injection" system USAID circumvents and violates [Pfizer/FDA](#)¹⁵⁰ regulations that require healthcare providers counsel patients about Depo Provera's drug warnings.

¹⁴⁷ Chris Wickham, [Melinda Gates pledges \\$560 million for contraception](#), Reuters (2011).

¹⁴⁸ PATH News, [Innovative partnership to deliver convenient contraceptives to up to three million women](#) (2012).

¹⁴⁹ Holly Grigg-Spall, [The Global Implications of Putting Population Control Over HIV Prevention](#), EDGE BOSTON (2012).

¹⁵⁰ Pfizer, [Depo Provera Warning and Precautions](#) (2012).