The contraceptive pill and Puerto Rico [1]

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Op-Ed by Daniel Colón Ramos / Hartford Courant [3] Fifty years ago this month, the birth control pill went on the market. For most of the world, this revolutionary scientific breakthrough meant empowerment and social change. For Puerto Rico, this history is darker and more complex. The Pill was conceived by Dr. Gregory Pincus in Massachusetts, but the large-scale clinical trials were conducted on poor women of color, mainly in Puerto Rico but also in Haiti and Mexico City. Puerto Rico was chosen because there were no laws against birth control, and because it had an extensive network of family planning clinics. These clinics were the result of a law designed by the Eugenics Board as part of a U.S.-sponsored population control program. The program led to the sterilization of one-third of the Puerto Rican female population, and remains one of the largest mass sterilizations of women in history. The Puerto Rican women who participated in the study were not told that the Pill was experimental, that they were part of a trial or that there could be side effects. Three women died during the trials. It is an example of a scientific breakthrough intimately linked to the colonial relationship of Puerto Rico to the U.S., to Malthusian theories and to eugenic social policies. As a Puerto Rican and a scientist, I often wonder what role the lack of scientific literacy and of a Puerto Rican scientific community played in the history of the Pill. The clinical trials were conducted in Puerto Rico partially because of the belief that if these poor,

uneducated women succeeded with the program anyone could. I can't help but wonder if a group of Puerto Rican scientists could have influenced the establishment of an ethical framework that valued the well-being and right to informed consent of the people in their community? These might sound like hypothetical questions concerning distant historical events, but they address a seldom discussed, but important link between science and society. While our experiments are done in controlled conditions, our research affects our communities and our communities affect our research. In the case of the Pill, for example, Dr. Pincus was able to conduct his research because of a female scientist, suffragist and philanthropist who funded his work, Katharine McCormick. She understood the importance of scientific research, had the means to fund it and recognized the value of women's reproductive health. Her experiences as a woman and as a scientist (and her money) affected the lives of millions of women around the world. These historical questions are relevant today. Last year, a group of Puerto Rican scientists questioned the findings from the Agency for Toxic Substances and Disease Registry of the U.S. Department of Health and Human Services. The agency reported that there was no contamination with heavy metals or other toxic substances on Vieques, a Puerto Rican island, after 60 years of military exercises by the Navy. Health and environmental policies in Vieques were based on the agency's studies. The studies were flawed and had they been conducted 20 years ago, the health of the people of Vieques — an island with one of the highest rates of cancer in the Caribbean — would have been further compromised. But today, Puerto Rico has a small but growing scientific community. Seven Puerto Rican scientists openly refuted the agency and found that there were cancer-causing heavy metals on Vieques. As a result, the agency retracted its conclusions and will generate policy changes in Vieques. In theory, the research and advocacy conducted by the Puerto Rican scientists could have been done by any scientists, regardless of their origin. After all, a scientific study is based on seeking the truth and dispelling ignorance and prejudice. But in practice, it did not and does not happen this way. In practice, it took a female scientist to advocate and fund the development of the Pill. In practice, it took a community of Puerto Rican scientists to question flawed studies on Vieques. Because, in practice, scientists come from somewhere and that somewhere influences their research interests, informs their advocacy and enriches the scientific enterprise. In light of these historical examples, and as we reflect on the effect the Pill had in our society, we should ask how our future investments in science and scientists from disenfranchised populations will affect disparities in health and social equality in 50 years. Daniel A. Colón-Ramos is an assistant professor of cell biology at the Yale University School of Medicine.

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[1] https://www.cienciapr.org/en/external-news/contraceptive-pill-and-puerto-rico [2] https://www.cienciapr.org/en/user/dacr [3] http://www.courant.com/news/opinion/hc-pill-birth-control-0627-20100627,0,885248.story