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Clarence Gamble

Clarence James Gamble, (January 10, 1894 – July 15, 1966)^{[1][2]} married to Sarah Merry Bradley-Gamble, was the heir of the [Procter and Gamble](#) soap company fortune. He was an advocate of birth control and eugenics, and founded [Pathfinder International](#).

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[\[edit\]](#) Biography

Dr. Clarence J. Gamble was elected president by the board of directors of the newly incorporated [Pathfinder Fund](#) on February 27, 1957. But the work of The Pathfinder Fund to make birth control available began some 28 years earlier, in 1929, when Clarence Gamble gave \$5,000 to open a maternal health clinic in [Cincinnati, Ohio](#). His work is carried on by Terry Gamble Boyer of San Francisco and Harbor Point, Michigan.

In the face of intense hostility from both the general public and organized medicine, Clarence Gamble, along with [Margaret Sanger](#) and [Robert Latou Dickinson](#), spearheaded the movement to gain acceptance for [birth control](#) in the [United States](#). Believing that every child should be a wanted child, Dr. Gamble was the quintessential pathfinder, cutting through the underbrush of entrenched convention with innovative solutions born of common sense. He put his energy, persistence, and a substantial part of his wealth behind his conviction that birth control should be available globally.

In January 1914, on his twenty-first birthday, Clarence James Gamble received his first million dollars. As the grandson of James Gamble, co-founder of [Procter & Gamble](#), Clarence was an heir to the family money, which came with a stipulation: at least 10 percent was to be devoted to charitable giving. He later increased this 10 percent to 30 and more. He felt an obligation and responsibility. The pursuit of this vision became the driving force in his life.

After graduating from [Princeton University](#) in 1914 and [Harvard Medical School](#) in 1920, Clarence began his residency at [Massachusetts General Hospital](#). In 1923 Clarence's interest in medical research led him to secure an apprenticeship with Alfred Newton Richards, director of the Department of Pharmacology at the [University of Pennsylvania](#). However, Clarence's plans to begin working with Richards were interrupted by the death of his father, David Berry Gamble.

On June 21, 1924, at the age of 30, Clarence married Sarah Merry Bradley. In Sarah, Clarence found the perfect helpmate and ideal companion. Together they were a team, allowing Clarence to make invaluable contributions to the worldwide [birth control movement](#). In October 1925, three weeks before the birth of the first of their five children, Clarence introduced himself to Dr. Robert Latou Dickinson, who in 1923 had established the National Committee on Maternal Health. Clarence wrote his mother about their first conversation, when Dickinson said that birth control is socially much needed, and that "young men like you ought to take up the work." Dickinson asked Clarence, "Don't you want to help me and keep on with the work when I am through?" Certainly Dickinson's question smacked of prophecy, for in 1929, a number of events converged to send Clarence decisively on the path to helping Dickinson in service of what Clarence would always call the "Great Cause."

In January 1929, Clarence's mother, Mary, died. Clarence wanted to create a memorial for his mother in Cincinnati. In a discussion with her [gynecologist](#), the highly respected Elizabeth Campbell, he learned that his mother had wanted a maternal health clinic in Cincinnati. Dr. Campbell may have related to Clarence the case of a woman who had been pregnant 22 times in 21 years and had 14 surviving children. Clarence became a member of Dickinson's Committee on Maternal Health and through it made his first "pathfinder" grant. **With that \$5,000, Dr. Campbell opened the [Cincinnati Maternal Health Clinic](#) in November 1929 and began dispensing information on [birth control](#) to Cincinnati women.** At that time, few other [birth control clinics](#) existed, other than one in Cleveland, one in [Chicago](#), and Margaret Sanger's [Clinical Research Bureau](#) in [New York](#).

At about this same time, Gamble's college friend from Princeton, Stuart Mudd, had become professor of microbiology at the University of Pennsylvania. His wife, Emily, would pioneer the field of marriage counseling. Together they had formed the Southeastern Pennsylvania Birth Control League, and opened a birth control clinic at in Philadelphia.

In the early decades of the twentieth century, the only acceptable [contraceptive](#) was the [diaphragm](#). The diaphragm was used with [spermicidal jelly](#), and the League needed to determine which [contraceptive jellies](#), among the many advertised, were effective. Clarence, ready at hand with a lab at the University of Pennsylvania, did some very practical research, and soon he and Sarah were actively supporting the League and the clinic with both his research and funding. By 1930, Clarence was chairman of the board of the Philadelphia Maternal Health Centers. In this new capacity, Clarence learned of the innumerable families in Philadelphia whose children were neither planned nor wanted. He was soon convinced that there must be a simple method of contraception, one that did not require a costly doctor's visit as did fitting of the diaphragm, and that was inexpensive and immediately available.

[[edit](#)] National expansion, state by state

He was also convinced that there should be many more birth control clinics. "The best way to get a birth control program started," he wrote, "is to put a field worker on the spot to get things organized and operating while I contribute the needed initial expense." He hired Elsie Wulkop, a social worker whom he had known at Massachusetts General Hospital. She began work in Detroit in 1930 and during the next four years helped to open clinics in Michigan, Indiana, Missouri, Kansas, and Nebraska.

Throughout the late 1930s, always with an eye to strengthening the [US birth control movement](#), Clarence Gamble urged the unification of Margaret Sanger's Clinical Birth Control Research Bureau with the competing [American Birth Control League](#). In 1939, the two organizations became the [Birth Control Federation of America](#).

As he worked to expand access to birth control, Clarence followed a pattern of careful spending, making grants just sufficient to allow a clinic to open, and at the same time moving in response to local politics. He did not have a fortune the size of the Rockefellers; he was both unable to and uninterested in permanently subsidizing the impoverished. Working with a public often upset by birth control, he made sure that his fieldworkers educated the community to the point where members understood the importance of contraception, and would thus be willing and able to take over the work and its costs without further outside assistance. Clarence was then able to explore new frontiers and disseminate the workings of birth control more widely.

With his carefully calculated cash outlays, Clarence planted seeds that years later flourished. He funded early research for the Southeastern Pennsylvania League's work to identify effective spermicidal jellies. After the American Medical Association (AMA) acknowledged in 1937 that contraception merited a physician's attention, Gamble's research became the basis of the AMA Standards Program for testing contraceptives—which was the measure of the AMA for endorsing contraceptive products, and finally the basis for state and federal legislation.

In 1937, he began to fund education and distribution of birth control supplies through the North Carolina State Board of Health, making North Carolina the first state to incorporate birth control in a public health program. This influenced five nearby states—South Carolina, Alabama, Florida, Mississippi, and Virginia—to incorporate birth control into their public health programs.

Throughout the 1930s, Clarence's time was devoted to working with existing birth control organizations, often holding overlapping executive positions. He was president and delegate-at-large of the [Pennsylvania Birth Control Federation](#); state [delegate](#), one of five vice-presidents, and member of the Executive Committee of the Board of the American Birth Control League; medical field director of Margaret Sanger's Birth Control Clinical Research Bureau; and treasurer and member of the board of Robert Dickinson's National [Committee on Maternal Health](#). By 1938, Clarence had left Philadelphia and the University of Pennsylvania. He purchased a house outside of Boston, Massachusetts, and funded eight field workers who were nurturing the beginnings of community-supported birth control clinics in Montana, Tennessee, Virginia, Florida, throughout the East Coast, and in the Midwest. During this decade, Clarence and his fieldworkers were responsible for helping to establish birth control clinics in 40 cities in 14 American states.

Dr. Gamble and his workers explained and promoted simple methods—not the expensive and often impractical diaphragm, but spermicidal jellies, [foam powders](#), sponges to be dipped in salt or other inexpensive solutions—to women who otherwise would never have known of nor been able to afford contraceptives. At the same time, he recognized the need for scientific data to back his promotion of the simple methods, and he set up extensive clinical trials, with his visiting nurses collecting data that measured the effectiveness of the simple methods. Again and again, it was shown that birth rates were reduced by as much as two-thirds or more using these simple methods.

In Logan County, West Virginia, Clarence conducted the most thorough field trial of a chemical contraceptive that had ever been undertaken in the United States. The trial involved 1,345 women who used contraceptive jelly over a three-year period, from June 1936 to August 1939, and decreased their birth rate by 41 percent.

[\[edit\]](#) **Global contacts, global contexts**

In 1949, Clarence was talking with [Frank W. Notestein](#), director of the [Office of Population Research](#) at Princeton and future president of the Population Council. Notestein mentioned that Japan was “ripe for birth control.” Gamble, in his typical fashion, offered to put up a small sum to translate birth control pamphlets into Japanese. This eventually led to correspondence with Dr. Yoshio Koya, director of Japan’s National Institute of Public Health.

At that time, much to the distress of their government, Japanese women were terminating half of their pregnancies by abortion. Koya needed support for a field study to determine whether the Japanese would use contraception, were it available. Somewhat tentatively, Clarence, who knew Koya only through correspondence, advanced \$700. It was a small investment, which in the Gamble way was to yield big results in a very short time.

Koya’s Three Village study began fieldwork in November 1950. By May 1951, the study showed that 92 percent of the Japanese population wanted contraception. Koya took this “rather amazing data” to the minister of welfare, and in 1952, the Japanese government allotted funds to put free birth control clinics into all Japanese health centers.

Thus began a long-term professional relationship between Clarence and Dr. Koya. For the next 15 years, Gamble supported Koya generously and came to regard him as the one who did more for Japan’s birth control program than any other single individual. This Japan venture also marked the entry of Clarence into widespread international activity and the buildup of the Pathfinder team of dedicated colleagues and fieldworkers.

Among the dedicated was John E. Gordon, a retiring professor of epidemiology at Harvard’s School of Public Health. In 1949, Gordon had turned his academic inquiries to population growth and was convinced that the same methodology applied to epidemiology studies could be used to examine population problems. In 1951, Clarence funded an exploratory visit by Gordon to the Punjab state of India. The resulting India-Harvard-Ludhiana or Khanna study examined the use of contraceptives by Indians in that region and continued for 17 years, generating some three dozen articles, a book, and a [monograph](#).

In October 1952, Clarence and Sarah left Massachusetts to meet Dr. Koya in person and attend the November conference in Bombay (now known as [Mumbai](#)), India, of the newly organized [International Planned Parenthood Federation](#) (IPPF). Clarence would be gone for five months, until March 1953. This was the first of his many long trips during the 1950s, in which he did his own fieldwork, going from city to town to village to city, introducing himself and the “Great Cause.”

At the IPPF Bombay conference, Clarence was busily finding foreign doctors interested in testing and collecting data on the effectiveness of simple methods of contraception. In the 1930s he had attempted to do this, working with a list of missionary doctors supplied by his brother Sidney, who was a member of the [Presbyterian Board of Foreign Missions](#). Little had come of that attempt: foreign customs levied large duties, the climate quickly reduced

powder and sponge to paste and gum, and overworked missionary physicians had no time to keep the careful records Clarence needed for substantive clinical studies. The Bombay conference offered new contacts and new opportunities.

[[edit](#)] Tension and disagreement in the field

As the field expanded, tensions arose among PPFA, IPPF, the Population Council, and Clarence Gamble. Many in these organizations regarded Dr. Gamble's simple methods and straightforward approach with disdain; his appointment of nonmedical personnel (and women over 50) as fieldworkers, unprofessional; his travels through Asian countries, patronizing; his intrusion into areas staked out by IPPF as their own, intolerable. This was the attitude of Lady Bengal Rama Rau, charismatic chair of IPPF and leader of its India Ocean region, and of Helena Wright, powerful medical director of IPPF. Declaring themselves highly sensitive to the years of oppression waged by white colonists, Rama Rau, Wright, and IPPF maintained that women of whatever color deserved the best that Western medicine could offer—in this case birth control provided by a fitted diaphragm after a preliminary exam by a professional gynecologist.

From Clarence's perspective, IPPF ignored the reality faced by women wanting to be fitted for a diaphragm. He advocated that health workers could be trained to fit diaphragms. His idea sparked controversy because of the implications that it was appropriate to use different standards of care for women in the developing world than for women in the developed world. While provoking disagreement, Clarence's pragmatic approach reflected the reality of patient-to-physician ratios, which in 1947 was estimated to be 6,000:1 in India, making it impossible for physicians to meet patient demand for diaphragms.

IPPF maintained that white Europeans should not go uninvited into foreign countries to offer birth control information, but as Clarence knew well, many undeveloped countries did not know what birth control was. Unless education and exposure created the demand for birth control, neither the government nor community groups would ever provide it. And so for his efforts, his dedication, his time, and his money, Clarence originally received little thanks from many in the professional birth control community.

At the 1955 Tokyo IPPF conference, which he had helped to organize in committee beginning in 1953, and to which he contributed \$3,000, he was refused admittance to most of the conference sessions. The reports of his fieldworkers were dismissed as mere "travelogues." "Here at the conference," wrote Clarence, "the isolation of our team seems complete."

The Japanese, on the other hand, expressed great gratitude. Dr. Kageyasu Amano acknowledged that it was Clarence who had brought together the roughly 30 Japanese birth control groups into a cohesive organization. At the celebratory dinner for Margaret Sanger on the last night of the Tokyo conference, the Japanese awarded Clarence the [Margaret Sanger Trophy](#), a silver loving cup 18 inches tall, inscribed, "Clarence J. Gamble, the Benefactor of the [Family Planning Movement](#) in Japan."

The Margaret Sanger Trophy was an especially appropriate award for Clarence. Over the years, his relationships with Robert Latou Dickinson and Margaret Sanger were warm and professional. Clarence worked closely with and financially supported Dickinson's National Committee on Maternal Health until Dickinson's death in 1950. Clarence gave both financial support and time to Margaret Sanger's Clinical Birth Control Research Bureau.

After the IPPF Japan conference, Clarence, accompanied by his oldest son, Richard, visited the doctors who had agreed to test the simple methods. Their results were encouraging: typically a reduction from 70 to 20 pregnancies per 100 couples per year. On that first Asia trip, Clarence and Richard promoted birth control in 13 countries, including [Singapore](#), [Hong Kong](#), and [Burma](#), and assisted local leaders in forming family planning associations in [Pakistan](#), [Bangladesh](#), [Sri Lanka](#), [Thailand](#), and [Japan](#).

From 1954 through 1956, Clarence was traveling constantly, visiting and revisiting over a dozen countries on each four- or five-month trip, laying the groundwork for the availability of birth control throughout Asia. Whether traveling or remaining in the States, “Clarence Gamble,” as one distressed IPPF worker wrote, “was everywhere and into everything.” But the task needed more workers.

[\[edit\]](#) Eugenics and Forced Sterilization

Clarence Gamble and James Hanes were founding members of the Human Betterment League of [North Carolina](#) in 1947.^[3] The League was tied to forced sterilization programs that saw both men and women, mostly poor, of low IQ, and predominantly minority extraction, undergo surgical sterilization without consent, with the goal being to reduce the state's welfare burden and improve the gene pool. The program ended in 1977; the state government apologized publicly in 2002. Governor Bev Perdue is advocating for financial restitution to be made to 7,600 victims.^[4]

[\[edit\]](#) The Pathfinder Fund

Clarence would do whatever was most effective at the time with relatively small investments. In addition to paying the salaries of visiting nurses and health workers to staff the clinics, and office workers to manage offices, he paid for and distributed print materials: posters in native languages, comic-book-style pamphlets, flyers, reprints of scientific articles, booklets and books, and contraception manuals. He provided anatomical models of the [pelvis](#), purchased film strips and movies, and supported their production.

Clarence defied the conventionally held views of the role of women at that time and decided to take advantage of the adroit management and diplomatic social skills that he had observed older women often possessed—exactly the skills that were needed to introduce such a potentially controversial topic as birth control into a community. As he had in the 1930s when engaging fieldworkers to open clinics in the States, Clarence chose women in their fifties to be his envoys. Margaret Roots was a widow with three grown children, touring the world with friends, when Clarence met her in India in 1953. She worked first in Sri Lanka, then in Indonesia, India, Thailand, and Korea. Edith Gates had been working for the YWCA and similar organizations internationally for 30 years when Clarence met her in Hawaii in 1954 and asked her to go to Africa and South America.

Clarence and his fieldworkers adapted written materials and tailored their social interactions to local culture. In Puerto Rico, mothers were happy to have a visiting nurse come into their homes. In Hong Kong, this was not acceptable. In Sri Lanka, in 1954, a woman did not walk the streets alone; Margaret Roots made sure that another woman accompanied her when she went out or when she visited a [male authority](#).

Always Clarence advocated simple methods, insisting that the people should decide for themselves the number of children they wanted, and offering family planning methods that could be used without intensive medical supervision, while also providing the diaphragm and jelly when it was appropriate or requested.

He understood that “favorable public opinion regarding family planning takes years to develop,” and so he worked for the long term; if his fieldworkers could not open a birth control clinic within a year or two, they could leave behind a committee that might do so in the future.

In 1957, at the suggestion of his attorney son-in-law, Lionel Epstein, husband of his oldest child, Sally, the ongoing philanthropic activity of Clarence Gamble was incorporated into The Pathfinder Fund. In 1991, The Pathfinder Fund was renamed [Pathfinder International](#).

In a typical report from 1959, The Pathfinder Fund listed its activities and expenditures: the fund was paying the salary of a nurse in Mombasa; a nurse in Burma; a nurse in Maadi, Egypt; supplemental salaries for nurses in Taiwan; part-time salary for secretary of the Associazione Italiana Per L'Educazione Demografica; salaries for three workers in Colombo, Sri Lanka; salaries for persons working for the family planning associations of Thailand

and Bangladesh, both under supervision of Mrs. Roots; consultation fee for Dr. Luigi DeMarchi, (who, with his wife Maria Luisa DeMarchi, were crusaders for the legalization of birth control in Roman Catholic Italy); salary for a nurse in Hong Kong, who worked in an area of “hillside shacks beyond the ends of roads,” occupied by refugees; and in August, supplementary payments of approximately \$5 per month were allowed for nurses in Taiwan because the nurses must live in the village “where they were exposed to snakes, barking dogs, and sleeping behind doors with no locks”. The Margaret Sanger Research Bureau was funded for a study of foam tablets, the salary of an intern, half the salary of the head of their research program, and general expenses. Miscellaneous grants were made to Princeton, PPF, and local community groups.

In 1960, Edna McKinnon, an attorney, a widow, and an “older woman” joined Pathfinder. In the 1930s, Edna had been opening clinics throughout the South as field representative for Margaret Sanger’s Research Bureau and had worked for Clarence when he was field director of that organization. Edna became a Gamble fieldworker in Malaya, Indonesia, and, briefly, with great difficulty, in Saudi Arabia. Margaret Roots, Edith Gates, and Edna McKinnon were long-term fieldworkers for Pathfinder. They loved their work and were deeply loyal to Clarence. As Edna McKinnon later explained,

“Clarence always worked on the basis that he was no more important than anyone else... You could always be sure that if we were really in a bind, he’d come down and help you get out. It didn’t mean that he was there all the time, but I can’t emphasize enough how much the correspondence made me feel that we were having careful direction. But I will say this, that sometimes I’d have anywhere from six letters a day... When I later worked with PPF, when Clarence wasn’t as closely connected, I didn’t feel that security. I don’t know what it is. It’s a psychological something that he gave to each of his workers that was priceless... He was interested in every detail. There wasn’t anything that was too much or too detailed for him to be interested in.”

At that time, The Pathfinder Fund was also covering the salaries of staff in the home offices in Boston, salaries and expenses of John Gordon and Yoshio Koya, of fieldworkers Margaret Roots, Edith Gates, and after 1960, Edna McKinnon. Beginning in 1962, expenses were covered for volunteer fieldworkers Charles and Bernadine Zukoski. Upon retirement from a successful banking career, Charles Zukoski and his wife, Bernadine, devoted themselves to The Pathfinder Fund, working in the States and overseas, accomplishing much in Turkey, Iran, and Ethiopia. Others, including fieldworkers Ruth Martin and Sarah Lewis, who worked for shorter periods, were supported, as were individuals on scholarship to Harvard School of Public Health.

After incorporation of The Pathfinder Fund in 1957, Clarence took fewer and shorter world trips. With his own organization and a team of fieldworkers in place, administrative duties increased, but he was still able to explore his many innovative ideas related to increasing access to contraception. For example, he considered hiring writers to place stories that mentioned birth control in pulp magazines. With his Public Progress Program, which encouraged personal letters to the media, he managed to get the taboo subject of birth control into such popular magazines as *Colliers* and *Reader’s Digest*.

In the 1950s and early 1960s, Clarence and his fieldworkers visited 60 countries in [Africa](#), [Asia](#), and [South America](#). From these visits, family planning associations and clinics emerged in at least 30 countries, while groundwork was laid in others.

And just as The Pathfinder Fund was being incorporated, Gregory Pincus set up his first clinical trial of the [first contraceptive pill](#) in [Puerto Rico](#). Clarence drew on his contacts from the 1930s in Puerto Rico, when he had rescued Puerto Rico’s birth control program. At that time, the [Franklin D. Roosevelt](#) administration had eliminated federal support for a thriving chain of clinics due to pressure from Catholic bishops, and Clarence had provided the support to keep them going. Two decades later, Clarence organized additional trials of the Pill with Dr. Adaline Satterthwaite at the Ryder Memorial Hospital in Humacao, and in 1961, Dr. Satterthwaite began testing the intrauterine device (IUD) as well. Though Clarence supported trials of the Pill, he regarded it as impractical, due to its daily dose requirement and relatively high cost. The IUD was both practical and low cost, requiring one-time insertion of an inexpensive piece of plastic. Dr. Satterthwaite quickly demonstrated its safety, and Clarence began mailing out the plastic loops. The office space that he rented above Sparrs Drug Store, adjacent to Harvard Medical

School, became a distribution center for IUDs. In Korea, where as many as 2,000 babies were abandoned yearly in the [Seoul](#) streets, the government welcomed this new method of practical birth control. By October 1962, Clarence had sent almost 3,000 loops to Korea.

Predictably, he ran up against the [Population Council](#), who wanted complete control of IUD trials and distribution. Clarence countered by opening his own manufacturing plant in Hong Kong. By 1964, David Burlison, had been brought in to supervise Pathfinder's worldwide IUD project, and Clarence was receiving reports on the IUD from 72 doctors in 32 countries. At the time of his death in 1966, The Pathfinder Fund was delivering IUDs to 504 doctors in 74 countries.

Despite sharp disagreements, Clarence continued to attempt to work with the Population Council, PPFA, and IPPF. The clinics and family planning associations that Clarence funded and his fieldworkers opened were all encouraged to become members of PPFA or IPPF, and, indeed, most did.

When Dr. Koya wanted to include Clarence as co-author of the Three Village Study, acknowledging the many design suggestions he had contributed, Clarence told him not to. The modesty was characteristic of him. He held true to the words of his mother, Mary, "Results are what count, not position. Why care who's given the credit?"

[\[edit\]](#) **The Gamble legacy**

Throughout the many countries where Clarence and his fieldworkers had been working toward the "Great Cause," they left not only clinics and family planning associations, but dedicated individuals, who in their native countries were actively carrying on the work. Clarence's sometimes controversial approach was both lauded and criticized throughout his travels.

In January 1964, Clarence was diagnosed with leukemia. He told very few about it, but in early 1965, Edna McKinnon visited Charles and Bernadine Zukoski. They told Edna that Clarence was no longer able to take care of administrative matters. The board of directors had to intervene and name a new director. They needed to know if Clarence's family want to continue the work of The Pathfinder Fund. Edna and the Zukoskis put together a plan for transition and sent it to Clarence's children. The Gamble children were committed to continuing the work. Edna McKinnon came to Massachusetts. From July through November 1965, she worked with Clarence and the family to organize the transition. It was not an easy job for Clarence, who was growing weaker each day, and whose habits of secrecy and total control were deeply ingrained, or for Edna, who had to confront, cajole, and argue as necessary to ensure the solid future of Pathfinder.

On November 4, 1965, the first meeting of the newly formed Pathfinder Fund Advisory Council was held in Milton, Massachusetts. All of the Gamble family was there, as were John Gordon and long-term fieldworkers Edith Gates, Margaret Roots, Edna McKinnon, and Charles and Bernadine Zukoski, along with old friends Stuart and Emily Mudd. Ellen Watumull of the [Watumull Foundation](#), which had supported both Margaret Sanger and Clarence Gamble for years, had been invited, and Alan Guttmacher, president of [Planned Parenthood-World Population](#), was there to speak.

An unidentified public health physician said, "The only reason that our government was now able to officially help these countries [institute birth control] was that private foundations such as Pathfinder paved the way by starting things. [Pathfinder] carried on such successful programs with the people and did such a fine job of education that the government was now able to operate in these areas."^{[[citation needed](#)]}

This essay drawn from the Clarence James Gamble Papers, [Countway Library of Medicine](#), [Harvard Medical School](#), and the Sarah Merry Bradley Papers, Schlesinger Library, [Radcliffe College](#).

[\[edit\]](#) **Literature**

Harvard's Countway Library of Medicine has the proposals of Clarence J. Gamble

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[\[edit\]](#) **External links**

- [Pathfinder History](#)
- [\[2\]](#)