Eugenics, demography and family planning in Greece, 1950-1980: the activities of the Hellenic Eugenics Society

Alexandra Barmpouti (2015)

https://radar.brookes.ac.uk/radar/items/c48ed7f2-098f-439e-8bb5-cbe7d6e8c4c5/1/

Note if anything has been removed from thesis: pp 326-341 have been removed from the electronic version due to potential confidentiality and copyright issues

Copyright © and Moral Rights for this thesis are retained by the author and/or other copyright owners. A copy can be downloaded for personal non-commercial research or study, without prior permission or charge. This thesis cannot be reproduced or quoted extensively from without first obtaining permission in writing from the copyright holder(s). The content must not be changed in any way or sold commercially in any format or medium without the formal permission of the copyright holders.

When referring to this work, the full bibliographic details must be given as follows:

PhD, Oxford Brookes University

Thesis submitted for the degree of Doctor of Philosophy

Alexandra Barmpouti

Department of History, Philosophy and Religion

OXFORD BROOKES UNIVERSITY

November 2015
Table of Contents

Abstract 2

Acknowledgements 4

Abbreviations 6

Introduction 7

Chapter 1: Eugenics and Health Policies, 1900-1950: An Overview 37

Chapter 2: The Conception of the Hellenic Eugenics Society 66

Chapter 3: The Establishment of the Hellenic Eugenics Society and its Activities in Greece 92

Chapter 4: The Hellenic Eugenics Society on the International Scene 129

Chapter 5: Clarence J. Gamble’s Contribution to Family Planning in Greece 165

Chapter 6: Population Problems and Demography 209

Chapter 7: Eugenics and Family 248

Conclusions 290

Appendix I: Biographical Notes 317

Appendix II: Images 325

Bibliography 342
Abstract

During the twentieth century systematic population studies brought international demographic problems, such as overpopulation, to light. Contrary to the global overpopulation problem and its consequences, Greece experienced low birth rates, high rates of induced abortion and mass emigration to Western countries. After the end of the Civil War (1949), the central preoccupation of the Greek population experts, physicians and academics was mostly demographic stability at a time when, with the onset of the Cold War, having a large and robust army became a priority. At the same time the lack of health and hygiene education and a poor infrastructure exacerbated the deterioration of the health condition of the population.

As a consequence, the Greek state adopted pro-natalist policies to encourage demographic growth, whilst simultaneously prohibiting any contradictory efforts such as birth control. Thus, it is not surprising that until the 1980s family planning advice and female contraception were illegal. Because they were unable to use modern contraceptive methods, Greek women underwent induced abortion as the only alternative to an unwanted pregnancy.

Greek eugenicists, who advocated in favour of family planning and, quality over quantity, in terms of birth, challenged the state’s policy. Beyond the borders of the country, birth control enthusiasts offered their broad support to a group of Greek physicians who shared their views. It was in this context that the Hellenic Eugenics Society was established in Greece.
This dissertation addresses the population problems experienced by Greece during the period from the 1950s to the 1980s, from the vantage point of eugenics and family planning. Attention will be especially devoted to the establishment and activities of the Hellenic Eugenics Society, and its impact on domestic and international contexts. Eugenic ideas and policies, the institution of family, hereditary diseases, population distribution and contraception will be the central discussion areas.
Acknowledgements

This dissertation is dedicated to my mother Sofia and my brother Nikolaos for their moral encouragement, love and trust.

Although completing a PhD dissertation was often a lonely journey, the only person who actually understood my worries, recognised my effort and offered the most valuable and manifold support was my supervisor Marius Turda, to whom I am extremely grateful.

I owe special thanks to the individuals who I had the honour of interviewing in 2012: Dimitrios Trichopoulos, Professor of Public Health and Epidemiology at Harvard School of Public Health; Georgios Maniatis, Professor Emeritus of Biology at the University of Patras; Constantinos Crimbas, Professor Emeritus of Genetics and History and Philosophy of Biology at the University of Athens; and Dimitrios Loukopoulos, Professor Emeritus of Hematology at the University of Athens. Unfortunately, the first two passed away before the completion of this dissertation.

Moreover, I would like to thank members of staff at a number of institutions whose help was essential to my research. I am grateful to: Constantinos Trompoukis, Associate Professor of History of Medicine, Department of History of Medicine, Faculty of Medicine, University of Crete and President of N. Louros Foundation, and Mrs. Anna Manidaki, Scientific Assistant, Department of History of Medicine, Faculty of Medicine, University of Crete for granting me access to the N. Louros Archive and for their valuable assistance and hospitality during my research trip to Heraklion; Mrs. Jessica Murphy, Reference Archivist, Center for the
History of Medicine, Francis A. Countway Library of Medicine, Harvard Medical School for granting me access to Clarence Gamble Papers; Mrs. Jesse Kline, Reference Staff, Sophia Smith Collection, Smith College for granting me access to the Dorothy Hamilton Brush Papers; Mr. Athanasiou, Librarian at the K. Karamanlis Foundation, for granting me access to the Lina Tsaldaris Archive; and the Executive Board of the Athens Medical Association for granting me access to their archive.

Additionally, I would like to express my gratitude for the financial support of the Berendel Foundation, London (Research Fellowship 2010/2011) and the Centre for Health, Medicine and Society: Past and Present, Oxford Brookes University (Fellowship 2013/2014).

Furthermore, I would like to thank my close friends, especially Minas Giannopoulos, for their encouragement and compassion. Last but not least, my friend Angela O. Lazaraki for her comments on this dissertation.

Alexandra Barmpouti, November 2015
Abbreviations

AES: American Eugenics Society

AMA: Athens Medical Association (Ιατρικός Σύλλογος Αθηνών)

BES: British Eugenics Society

HES: Hellenic Eugenics Society (Ελληνική Εταιρεία Ευγονικής)

ICPP: International Committee on Planned Parenthood

IPPF: International Planned Parenthood Federation

NUSE: National Union of Sanitary Education (Εθνικός Σύνδεσμος Υγιεινολογικής Διαπαιδαγωγής - ΕΣΥΔ)

PIKPA: Patriotic Institution of Social Welfare and Awareness (ΠΙΚΠΑ)
(Pατριωτικό Ίδρυμα Κοινωνικής Πρόνοιας και Αντίληψης - ΠΙΚΠΑ)

UN: United Nations
Introduction

The Hellenic Eugenics Society (Ελληνική Εταιρεία Ευγονικής, hereafter HES) is unknown to the general public and scholars, both in Greece and abroad. The society was established shortly after the Civil War—that terrible fratricidal conflict that engulfed Greece at the end of the Second World War. It consisted of physicians, academics and governmental employees; at the time all were well-known in Greece and some of them were also internationally acclaimed scientists. Why was this society founded then and not earlier, as was the case in other European countries? Moreover, why establish a eugenics society at a time when most scientific societies were gradually distancing themselves from eugenics, especially after the crimes of the Third Reich became widely known? The word “eugenics” was generally avoided and replaced by a new term, “human genetics”. In Britain, the birthplace of modern eugenics movement, the journal *Annals of Eugenics* was renamed as the *Annals of Human Genetics* in 1954 and *The Eugenics Review* became the *Journal of Biosocial Science* in 1968. These considerations notwithstanding, there are a number of reasons why the HES was established at the beginning of the 1950s in Athens; and here I discuss them briefly, together with a number of other topics related to eugenics, demography and medical genetics, before turning to wider historical developments that provide the context for the chapters that follow.

The history of Greek eugenics, especially during the post-war period, is a neglected subject. Addressing this historiographic neglect, this dissertation explores eugenics and family planning in Greece in the light of
the demographic problems Greece experienced during the post-war period and up to the 1980s. A probable explanation for the scarcity of historiographic debates, at least in Greece, could be explained by the problematic legacy of eugenics globally. When researching the existence of the eugenics movement in Greece, one finds that existent literature refers almost exclusively to the first half of the twentieth century. However, the most important step towards the study and dissemination of eugenics in Greece was the foundation of the country’s first and only eugenics society, the HES, in 1953. The main difference between the development of eugenics during the first half of the twentieth century and its institutionalisation during the second half is the focus on family planning. In the first case, eugenics was expressed through the collective purpose of racial regeneration and protection; the safeguarding of the “strong nucleus” of the Greek race, as Ioannis Koumaris, the Greek physical anthropologist, had argued in 1959.

However, after the Great War, eugenics in Greece focused on individual reproductive choices; albeit not entirely disassociated with its pre-war connotations of racial regeneration and social improvement.

---


Seemingly, the HES was a rare and outdated exception among similar eugenics societies in Western Europe and the USA, which flourished at the beginning of the twentieth century; in reality though, the HES followed the international tendency to disseminate birth control in conjunction with demographical concerns. The HES distanced itself from ideas and practices which tarnished eugenics ideology during the Third Reich in Nazi Germany, such as ideas of racial purity, sterilisation and euthanasia, and focused on issues of family, reproduction and demography. Eugenics was not totally abandoned as an ideology only because some societies, journals and university chairs were renamed, but continued to exist during the post-war period having other than solely racist motives.

The atrocities against humanity carried out in the Third Reich prompted the adoption of universal conventions, which would prevent the repetition of similar practices in the future. These were the Convention on the Prevention and Punishment of the Crime of Genocide (1948) and the Universal Declaration of Human Rights (1948). As eugenics was at the time associated with Nazism and racism, these universally agreed conventions

---


condemned it, albeit not explicitly. However, the international eugenics movement did not cease to exist. What essentially changed was that the word “eugenics” was limited to private discussions. It became “politically incorrect” to endorse eugenics publicly.

Therefore it is not surprising that post-war historiography on eugenics is inadequate. On the one hand, scholars of the time incorporated their eugenic ideas into debates about overpopulation and other relevant demographic issues. On the other hand, most historians rarely discuss post-war eugenics, either because they claim that it ceased to exert any influence or because it is easier to do research on interwar eugenics, when it flourished and was endorsed officially by many scholars and politicians.\(^6\)

This study, however, discusses the history of eugenics in Greece during the post-war period, and thus argues that eugenics remained an important component of debates on demography, family planning and social progress, more generally. The example of Greece was not exceptional, but, as the relationships of the Hellenic Eugenics Society with British and American Eugenics Societies and the International Planned Parenthood Federation reveal, was part of a global network. As such, this study sheds light on the neglected topic of the existence of post-war eugenic movements, both in its local and international contexts. It is also a significant addition to the history of eugenics, mainly because it proves the continual development of eugenics in Europe and the USA during a period when it supposedly went into disrepute. Furthermore, the study challenges the belief that the eugenic mentality in Europe and the USA was abandoned

after the Second World War. Although there are still voices claiming that eugenics disappeared during the 1950s, this study demonstrates the contrary. Due to the fact that the study of the history of eugenics in Greece is examined in local and international contexts, it provides important information and analysis for both the Greek and international historiography of eugenics.

On the global scale, post-war eugenics was expressed through preoccupation with family planning and the world population problem, namely overpopulation.⁷ During the 1950s there was an international movement supporting birth control to allegedly protect some countries from overpopulation and the Earth from its catastrophic consequences. At the time many international alliances emerged to tackle demographical and ecological issues, such as the IPPF and UNESCO, mainly supported by eugenicists such as Julian Huxley, Margaret Sanger, William Vogt, Carlos Blacker and many others.⁸

In the national contexts, social and biological degeneration was mostly attributed to irresponsible child bearing and to the lack of preventive medicine. Eugenicists were then mostly interested in guiding individual reproductive choices and cultivating the “procreation instinct” and parental responsibility.⁹ Therefore, post-war Greek eugenicists focused on the protection of pregnant women and the proper raising of children,

---

irrespective of their social status. Emphasis was placed upon the protection of mothers and children, improvement of living conditions; preventive health and public hygiene, individual marital and reproductive choices and control of the (female) body.\textsuperscript{10}

As will be discussed in Chapters 4 and 5, foreign encouragement was decisive for both the establishment of the HES and the development of eugenics and family planning in Greece during the 1950s.\textsuperscript{11} The IPPF was one of the foreign institutions working closely with the HES; its regional department dealing with Europe, the Near East and Africa was established in 1952. Furthermore, the American demographer Pascal K. Whelpton visited Greece in 1952 and evidence shows that he was the one who motivated the Greek physicians and demographers to form a eugenics society. Clarence J. Gamble, another prominent American birth control advocate and eugenicist, also became interested in offering assistance to those involved in the dissemination of birth control in Greece.

It is important to keep in mind that the post-war period in Greece as elsewhere was a time of reconstruction and renovation. Greek society was trying to modernise and to draw closer to the Western world. In the health sector, major hospitals were built or renovated, such as the Alexandra Maternity Hospital and Marika Iliadi Maternity Hospital and the Aghia Sofia Children’s Hospital in Athens.

At the same time state authorities and health professionals promoted preventive public health and hygiene policies. On the one hand, the state


\textsuperscript{11} See D. V. Glass, “Family Planning Programs and Action in Western Europe”, \textit{Population Studies}, 19, 3 (March 1966), pp. 221-238.
adopted laws for the transformation of hygienic services and a law for public education on health and hygiene; and on the other hand, physicians and health professionals tried to disseminate their knowledge to the public—the general aim was the regeneration of society. For instance, Law 2032, adopted in 1952,\textsuperscript{12} announced the formation of a new public service which would promote public education on preventive health and hygiene. This new service was meant to facilitate the establishment and function of institutions, associations or individuals that accorded with its purpose.

Above all, physicians, particularly gynaecologists and paediatricians, played an important role in the rise of eugenics and birth control movement in Greece during this period. Influential personalities, such as Nikolaos Louros, Maro Kanavarioti, Vasilios Valaoras, Spyros Doxiadis, Georgios Pantazis and Panayiotis Panayioutou, played a critical role in the establishment of the HES and in shaping its activities, both in Greece and abroad. Most importantly, Nikolaos Louros was the “heart” of the HES and its president for 20 consecutive years, between 1953 and 1973. The participation of eminent physicians in the above mentioned institutions and their association with the big hospitals of Athens resulted from the general tendency of the authority to strengthen Greek society, physically and spiritually, to rest in the hands of the much respected health professionals. At the same time, physicians’ national protectionism stemmed from their alleged ability and obligation to promote social prosperity and robustness through eugenics education.\textsuperscript{13}


\textsuperscript{13} See Marius Turda, \textit{Modernism and Eugenics} (London: Palgrave Macmillan, 2010), p. 73.
Furthermore, the changes in demographic patterns and the emancipation of women were also important factors in the development of eugenics and birth control. As was clearly depicted in the demographic and statistical analyses of the time, contrary to the global overpopulation problem, Greece experienced demographic stability during the 1950s. This was primarily due to the loss in human capital during the Second World War and the Greek Civil War; infant mortality and the high increase of induced abortions. Most importantly, there has been a continuous decrease of birth rates from the 1950s to the present-day: from 28.8 per cent in 1951 to 14.4 per cent in 2010. Although mass emigration and/or high rates of mortality play a significant role to a population, the decline of births is often the most important of all, because it often leads to population stability and might refrain the population quantity from renewal in future generations.\textsuperscript{14} When this demographic problem became apparent in Greece, political authorities and some members of the scientific community opposed any birth limitation practice, simultaneously adopting pro-natalist policies, such as the introduction of financial aid to large families. There was, however, another group in the medical and scientific community who were influenced by the global problem of overpopulation—which was also becoming central to demographic research during this period—and who embraced neo-Malthusianism and warned against overpopulation, food scarcity, unemployment and space limitation. As a result, there were those who opposed contraception, perceived as a birth limitation method; and those

who supported it, translating it into conscious family planning and pregnancy-spacing.

The polarisation of opinions about family planning was intensified by the issue of induced abortions, which became one of the most important socio-medical and population problems in Greece after 1950.\textsuperscript{15} Induced abortion, the use of contraceptives and birth decline formed a vicious circle.\textsuperscript{16} Some argued that there was no infertility issue in Greece, but that induced abortions led to birth decline; whilst others claimed that the use of contraceptives led to birth decline, because women used them to avoid conception. At the same time, the proponents of birth control argued that a woman should control her reproduction, having the desired number of children at the desired time. They argued, paradoxically, that the only way to avoid abortion was contraception, and that contraceptives did not lead to a decrease in births, but only to better family planning. Greek gynaecologists were also divided into two groups: those who opposed abortion and promoted contraceptive techniques, and those who indirectly supported induced abortion because they earned large sums of money from performing it. Finally, the absence of sex education in Greece should not be overlooked in the discussion of the socio-medical problem of abortions and unwanted pregnancies. The lack of family planning advice and sex education narrowed the reproductive choices of Greek women, often choosing abortion as the only means to deal with an unwanted pregnancy.


As will be shown in Chapter 5, the legal framework of the country for abortion and contraception was constructed upon the pro-natalist perspective, which condemned both abortion and contraception. In fact, this attitude indirectly imposed state biopolitics on the reproductive freedom of the individual. Albeit illegal, abortion was equally performed by married and single women, both in urban and in rural areas. As was argued at the time, induced abortion was a condition of “legal illegality”, because there were no prosecutions for the violation of the existing law which prohibited abortion.\footnote{17}

The legalisation of abortion, the use of (female) contraceptives and family planning advice occurred during the 1980s. Thus, it is observed that while there is abundant scholarship on the history of family planning in Greece after the 1980s,\footnote{18} it is practically non-existent before that time. In order to fill this gap, this dissertation commences in the 1950s, when eugenics and family planning began to gain wide support among physicians and academics in Greece, and continues until the 1980s, when a new era in reproduction politics began, raising a wide range of new issues, both medical and ethical. Equally important, the selected period also covers the entire period of the existence of the HES, from its establishment in 1953 to its gradual demise in the early 1980s.

\footnote{17} Konstantinos Roukas, \textit{Sexual Intercourse and Induced Abortion Rates of Students in Athens} (Athens: Laboratory of Hygiene and Epidemiology, University of Athens, 1979); see also Alexandra Halkias, \textit{The Empty Cradle of Democracy: Sex, Abortion and Nationalism in Greece} (Durham and London: Duke University Press; 2004).

The introduction of this dissertation includes a short but succinct account of the major historical facts of the first half of the twentieth century in order to familiarise the reader with the Greek socio-political context. Then it discusses the emergence of the first debates on eugenics during the same period. This historical discussion is followed by a short report on terminology and the meaning of eugenics in Greek. This is important as in Greece there are simultaneous terms used to express ideas of human improvement. Next, I outline the research and methodology used in this dissertation; and, finally, I provide an overview of each chapter.

**Historical Background**

In order to understand the context of post-war Greek history within which the events described in this thesis played out, a short overview of the main events characterising the first half of the twentieth century is provided.

A number of historical factors, most notably during the first half of the twentieth century, influenced both the quantity of the Greek population and its living conditions. However, the problems began earlier, following the 1897 war with the Ottoman Empire, which concluded with the defeat of Greece and provoked many long-term political and social consequences. A few years later, Greece participated in the Balkan wars of 1912-13.19 The Treaty of Bucharest, signed on 30 July 1913, secured the doubling of Greek territory and consequently the increase of its population.20 However, the

---

composition of the population and the administrative system were different between the “old” and “new” lands. The Greek government had to overcome a number of socio-political problems in order to bring stability to the country. The priority was no longer war but the internal unification of the country.\footnote{Gardikas-Katsiadakis, \textit{Greece and the Balkan Imbroglio}, p. 272.}

The outbreak of the First World War, however, made this task very difficult. Unfortunately, the victorious ethos and the signs of political stability were short-lived. The period of First World War was as decisive for Greece as it was for other countries in Europe. On the one hand, hundreds of soldiers lost their lives on battlefields while on the other hand, many people died due to various epidemics. In many cases, the latter claimed more casualties than the former. For Greece, the end of First World War did not mark the end of the warfare: in 1922, the Turks, under Kemal Ataturk, invaded the city of Smyrna, resulting in a forced population exchange on both sides, which was decided by the Convention (January 1923) and Treaty (July 1923) of Lausanne. Thus, Greeks who lived in Turkey (the Republic of Turkey was established in 1923 by Kemal Ataturk) were forced to go to Greece and Turks who lived in Greece were forced to go to Turkey. This massive movement of populations had significant consequences on many levels for both sides, but for Greece they were almost catastrophic. The number of Greeks who were transferred represented 25 per cent of Greece’s total population, while the Turks only 4 per cent of Turkey’s population.\footnote{Renée Hirschon, “The Consequences of the Lausanne Convention” in Renée Hirschon (ed.), \textit{Crossing the Aegean. An Appraisal of the 1923 Compulsory Population Exchange between Greece and Turkey} (Oxford: Berghahn Books, 2003), pp. 13-14.}
The small Greek state was suddenly overpopulated, particularly Athens, and this led to many social, economic and cultural problems.

In Greece, as in other European countries, in the wake of the First World War there was much discussion about the health of the population. The protection and multiplication of healthy citizens, who would be future soldiers, was one of the primary targets of the Greek state. Health protection and prosperity of the population would result in a well-prepared army, consisting of trained and physically active soldiers. Governmental actions to this end would have mutual benefits for the state and its citizens. On the one hand, the country would be better prepared to confront enemies and on the other hand, poor citizens would gain public healthcare. “Health”, as Karakatsani and Theodorou have put it, “became an important factor for the reconstruction of the nations”.

Amongst the many ways to create and maintain healthy human capital, the Greeks focused on the protection of motherhood and childhood. Since the interwar period, there had been a number of discussions and policy initiatives due to the low birth-rate and high rate of infant mortality. The Greek state had to take measures to avoid the continued spread of contagious, venereal and hereditary diseases that greatly affected the population. The most prevalent diseases were malaria, tuberculosis, trachoma, cholera, leprosy, smallpox, plague and syphilis.

Moreover, the issue of the hygienic state of buildings preoccupied both hygienists and architects much earlier than the arrival of refugees in the

---

23 For a comparative analysis of the European perception of children as the human capital of the nation, see: Karakatsani, Theodorou, “Hygiene Imperatives”: Medical Observation and Social Care of the Child during the First Decades of 20th century, pp. 108-117.

24 Karakatsani, Theodorou, “Eugenics, Childcare and Hygienic Concerns in Interwar Greece”, p. 484.
country. A crucial and pioneering work was *The Hygiene of Buildings* (*Υγιεινή των οικοδομών*), written by Nikolaos Saliveros in 1893. Of course, the situation worsened after the influx of refugees from Asia Minor in the 1920s. They were placed in small houses and lived in harsh conditions, an ideal environment for the incubation of disease and the spread of viruses and bacterial infections. The lack of hygienic living conditions in the surrounding buildings also produced the same outcome. Often, the structure of the buildings favoured the transmission of diseases and, in particular, of resilient microbes such as tuberculosis. Most importantly, during the interwar period, spatial hygiene corresponded to the protection of school buildings. Given that at the time school hygiene became central to the Greek eugenics argument, a healthy school environment, protected from contagious diseases, was a priority.

After a short period of peace (1922-1938), albeit one that was socially turbulent and politically unstable, Greece was drawn into the Second World War. By June 1941 Greece was under the occupation of Germans, Italians and Bulgarians simultaneously. In Greece, the situation was particularly harsh: people died either from enemy bullets or starvation. Unfortunately, even though the war against fascist Italy and Nazi Germany was over in 1945, Civil War followed (1946-1949). The country was divided into two camps: the National Army (nationalists) and the Democratic Army (communists). It ended with the Convention of Varkiza of 1949, which

---

confirmed the defeat and disarmament of the Democratic Army. The Civil War has had devastating consequences for the Greek nation to this day, polarising society and thus resulting in hundreds of thousands of murders and excessive political violence from both sides. For example, about 20,000 communists were killed; 50,000 imprisoned; 10,600 soldiers were killed; 31,500 wounded; 5,400 missing; and 3,500 civilians murdered.\textsuperscript{28}

Democracy was only restored in 1950 but the Communist Party remained illegal for many years after the war.

As alluded to above, the first half of the twentieth century was characterised by poverty and health problems. The recurrent health and medical problems caused many demographic changes. These can be summed up into three major categories. First of all, there had been a great loss of men, both on the battlefields and due to a wave of emigration to Western countries. Secondly, the infant mortality rate was high.\textsuperscript{29} Last but not least, infectious and venereal diseases prevailed due to the bad health of the population and lack of hygienic environment. Even if venereal and infectious diseases were medical in their nature, they were perceived as social.

Due to the lack of funds, the Greek state was unable to react and tackle the problems promptly. Many efforts were made for the advancement of the public health sector, but most of them were never realised. Physicians and other scientists often proposed eugenic policies, including the

---


\textsuperscript{29} The term “infant mortality” indicates the stillborn; those who died in few hours or days after birth and those who died at an early age.
prohibition of marriage for certain groups of people and state intervention. The general task was to regenerate Greek society so as to develop healthy, strong and intelligent citizens.

**Pre-war Eugenics**

Following Francis Galton’s distinction between “positive” and “negative” eugenics, one can claim that in Greece the former dominated. Eugenics was regarded as a way of improving the quality of living conditions, nutrition and childcare. It was also closely related to preventive medicine and was, as a consequence, often endorsed by physicians. Paediatricians and gynaecologists took the lead to promote the study and popularisation of eugenic theories for the protection of the nation. Like elsewhere, it was assumed that the Greek nation needed protection from its alleged continued decay.\(^{30}\) Centuries of foreign occupation and various wars contributed to the social and biological deterioration of the nation. Nevertheless, some extreme eugenic views were expressed, regarding race purity and superiority, by eugenicists such as Ioannis Koumaris,\(^{31}\) Nikolaos Makridis\(^{32}\) and Moisis Moisidis,\(^{33}\) which will be discussed below and in detail in the first chapter of the dissertation. They endorsed certain eugenic policies aimed to protect the Greek race from degeneration. They adopted a positivistic approach of eugenics, focusing on the growth and amelioration of the population.


\(^{31}\) Koumaris, *The “Indigenous” Race*.

\(^{32}\) Nikolaos G. Makridis, *For the Protection, Improvement and Ennobling of the Greek Race* (Athens: Anatoli, 1940) [in Greek].

\(^{33}\) Moisis Moisidis, *Eugenics and Marriage* (Constantinople: n. p., 1922) [in Greek].
Concern for the Greek nation’s racial quality reached its peak during the 1940s. Even malaria was regarded as a cause of race degeneration, due to its long-lasting effects. The state of the nation’s health was allegedly deteriorating so rapidly that physicians and scholars worried about the future of the race. Ultimately, physicians believed that the protection of the Greek race was their responsibility.

Many scholars discussed the issue of the protection of the Greek race, but anthropologist Ioannis Koumaris was the most persistent. He was the president of the Greek Anthropological Society, within which pre-war eugenics emerged. In the 1950s, he went as far as to reject the UNESCO declaration on race. Koumaris was an extreme nationalist and a defender of the superiority of the Greek race. Above all, he suggested prohibition of miscegenation to protect the “virtuous” Greek race from further mixtures with “inferior” foreigners.

In agreement with Koumaris, Nikolaos Makridis, a physician, added that the Greek, and maybe the Jewish race, were those who suffered most throughout the ages. Despite the fact that their blood had been mixed several times, Greeks did not lose their identity and primary vitality, which remained vigorous. Moreover, Makridis claimed that the main characteristics of the superiority of the Greek race were its unique virtues

---

34 Nikolaos Economopoulos, Social Hygiene: Social Care-State Care (Athens: Petrakis, 1922), p. 27 [in Greek].
36 See details about the Greek Anthropological Society in Trubeta, Physical Anthropology, Race and Eugenics.
38 Makridis, For the Protection, Improvement and Ennobling of the Greek Race, p. 7.
and abilities. No other nation, no matter how important, had ever survived under so difficult situations and pressure as the Greeks. The reasons for the survival and vitality of the Greek race were believed to be connected to its noble origin, the wisdom of its ancestors, its spiritual and artistic superiority, and the unique landscape.\textsuperscript{39}

Concerns with race degeneration led many Greek eugenicists to offer solutions to this significant social and national problem. This was the reason why Makridis, for instance, expressed the view that institutions offered little to this end; they proposed only superficial solutions. His suggestions contained more effective actions such as the adoption of a hygienic attitude by the population and the introduction of preventive medical measures by the state. The Greeks should be awakened and taught how to protect their race both at individual and national levels. Yet, in the period under examination here, scholars, academics and state officials focused mainly on preventive medicine and the protection of mothers and children. Those general terms were understood and interpreted in many ways by different people. Some supported the view that preventive medicine was in the hands of the physicians, others that hygienic protection was better performed individually, whilst others suggested that state intervention in family planning was the optimal solution.

Moisis Moisidis, one of the most popular promoters of social Darwinism in Greece, belonged to the last category. He argued that eugenics, along with the knowledge of hereditary laws, offered the solution to the problem of degeneration. He focused on two ways of applying

\textsuperscript{39} Makridis, \textit{For the Protection, Improvement and Ennobling of the Greek Race}, p. 13.
eugenics: on the one hand, the improvement of the individual’s physical and moral hygiene and the amelioration of his financial situation, and on the other, the improvement of procreation by reforming the institution of marriage and controlling “child-making” (παιδοποιία).\textsuperscript{40}

As already mentioned, the first half of the twentieth century was characterised by consecutive wars and political instability, which led to numerous population problems (mortality, decline of birth-rates, disease, etc.). These problems were also the result of the lack of a well-organised public health system. State healthcare was often inadequate for the protection of the health and the social prosperity of the Greek population. The lack of health support was the cause of high mortality rates, widespread diseases and the short lifespan of the population.

The desire to create a robust nation consisting of healthy and resilient soldiers to successfully confront the enemy led some physicians and anthropologists to suggest eugenics as the ultimate solution. Although negative eugenic thinking was not dominant, the eugenics movement gained ground during the first half of the century, primarily expressed through ideas of national and racial superiority.

**Greek Terminology**

The Greek language permits flexibility in the choice of words describing certain eugenic terms. There are many words with the same meaning, each having a positive, negative or “ethically” neutral sense. For example, there

\textsuperscript{40} Moisidis, *Eugenics and Marriage*, p. 4.
are the two words for “abortion”: the word “ektrosis” (έκτρωση),\textsuperscript{41} which has a negative sense, and the word “amblosis” (άμβλωση),\textsuperscript{42} which is milder and used in medical/academic terminology. Likewise, there are two words for “eugenics”. Two Greek words “eugonia” (ευγονία) and “eugoniki” (ευγονική) are translated as “eugenics” into English. In fact, “eugoniki” refers to the science of eugenics, the branch of genetics that studies the ways for physical or spiritual enhancement of human kind by the application of the laws of genetics and heredity,\textsuperscript{43} whereas “eugonia” means to have healthy and sometimes many descendants; and to be fruitful or, indeed, to be productive.\textsuperscript{44} The latter choice is closer to the Ancient Greek meaning, as used by Plato,\textsuperscript{45} which simultaneously is a positively charged term. However, the word “eugoniki” sounds more scientific, albeit having a negative bias. The use of appropriate terminology was essential in introducing the new Hellenic Eugenics Society. Therefore, although its name in Greek was “Ελληνική Εταιρεία Ευγονικής” and the word “eugoniki” which sounds more formal was used, in the first public lecture

\textsuperscript{41} The word “έκτρωση” stems from the combination of the preposition “εκ” (ek) meaning “from” and the verb “τιτρώσκω” (titrosko) meaning to injure, to do harm in G. Bampiniotis, Dictionary of the Greek Language (Athens: Kentro Lexicologias, 1998), p. 585 [in Greek].

\textsuperscript{42} The word “άμβλωση” is the medical term for the induced termination of pregnancy by the embryo’s separation from the womb, ibid., p. 135.

\textsuperscript{43} Bampiniotis, Dictionary of the Greek Language, p. 688.

\textsuperscript{44} Henry George Liddell and Robert Scott, A Greek-English Lexicon (revised and augmented throughout by Sir Henry Stuart Jones with the assistance of Roderick McKenzie), vol. 2 (Oxford: Clarendon Press 1940); Bampiniotis, Dictionary of the Greek Language, p. 688.

\textsuperscript{45} [546] “To all living things, not only plants that grow in the earth, but also to animals that live upon its surface, come times of fertility and or bareness of soul and body as often as their revolutions complete for each species the circumferences of circles, which are short for the short-lived, and long for the long-lived. Now these whom you have trained to be leaders of the city, in spite of their wisdom will not be able by calculation and perception to manage the production of offspring in your race so that it shall either be good or not be at all, but it will escape them, and they will some time or other beget children wrongly. Plato, The Republic, translated by Lindsay Alexander Dunlop (London: J.M. Dent & Sons Ltd, 1948), pp. 240-241.
on behalf of the HES, Nikolaos Louros, the then president of the HES, tactfully talked about “eugonia”, assuming that the general public would find it easier to identify the positive experience of eugenics with this term.

The word “Hellenic” instead of “Greek” was also chosen on purpose. “Hellenic” is associated with Ancient Greece, whereas “Greek” is the word that foreigners use to describe the Greek nation. “Hellenas” (Ελληνας) is the Greek word for “the Greek” which stems from the word “Hellas” (Ελλάς), not from the word “Greece”. Moreover, the word “Hellenic” alludes to the entire Greek nation, both the inhabitants of Greece and the Greek Diaspora. Aiming at building a formal and academic profile for the eugenics society, the word “Hellenic” might be used because again it is more formal than “Greek”. Moreover, the word “Hellenic” shows the national/racial continuity from antiquity to the present. The admiration for Ancient Greece, in conjunction with the desire of the HES to strengthen Greek national identity and improve the health and prosperity of society to become a robust nation, might be the reasons why “Hellenic” and not “Greek” was used.

The Ancient Greek legacy was praised by eugenicists at large and not least by the “father of eugenics”, Sir Francis Galton. As he put it: “The ablest race of whom history bears record is unquestionably the ancient Greek, partly because their master-pieces in the principal departments of intellectual activity are still unsurpassed, and in many respects unequalled, and partly because the population that gave birth to the creators of those
master-pieces was very small”. Based on the above considerations regarding the essential meaning of certain words describing eugenics in Greek, we can surmise that the HES had consciously chose its name as an illustration of both the historical continuity and ideological specificity it arguably represented.

**Research and Methodology**

The largest part of my research is based on hitherto inaccessible primary sources and original archival material, including the Louros Archive; the Clarence Gamble Papers; the Athens Medical Association’s Minutes; the Dorothy Brush Papers; the Lina Tsaldaris Archive, and the Wellcome Collection. Part of the uniqueness and importance of this research study derives from the fact that Louros Archive has never been used by scholars and thus it is the first time that this archive has been publicly discussed. Indeed, Greek archival material has never been studied in combination with the Clarence Gamble Papers. These two archives, in particular, complement each other: for example, Gamble kept Louros’ letters and Louros kept Gamble’s responses. Therefore, in some cases, the whole picture of their correspondence can be revealed only when both archives are used. Equally important, the Louros Archive reveals all important information about every aspect of the HES’s activities. Crucially I could establish, first, that it was not Louros who was HES’s first president, as is widely believed, but Athanasios Mantellos, President of the Athens Medical Association at the

---

time; secondly, I discovered that the real inspiration for the organisation of the HES came not from established eugenicists but from Mrs Maro Kanavarioti, its first secretary. Information about Kanavarioti’s personality and activity is also presented here for the first time.

The activities of the HES were only known through the publication of its public lectures and conferences in collective volumes and articles which appeared in the Greek press. The essential information was kept in the Louros Archive which this dissertation brings to light for the first time, thus offering unprecedented information about the only eugenics society in Greece. However, detailed analysis of every conference and lecture of the HES is beyond the scope of this dissertation. Rather, it focuses on a number of selected activities, notably those regarding population problems and demography, heredity, and issues of family and reproduction.

The N. Louros Foundation gave me the unique opportunity to be the first to research, examine, analyse and compare it with other information. Nikolaos Louros was renowned gynaecologist and obstetrician with international reputation. His career combined medical practice and educational work; at the same time he was a professor at the University of Athens and practiced gynaecology in health institutions. Louros’ interest in eugenics was keen and throughout his lifetime he dealt with eugenics by organising and participating in conferences; most importantly he was President of the HES for twenty consecutive years. Therefore, his archive is the most valuable source of information for the Greek history of eugenics.
More specifically, it was not the publications of the conferences of the HES that were significant, but archives that cannot be found elsewhere, such as:

- Louros’ and Kanavarioti’s personal correspondence with members of the HES; the IPPF; Gamble and his associates; other individuals in Greece and abroad
- The newsletter of the HES which was not officially published, only type-written and destined for internal distribution
- Hand-written notes by Louros for the meetings, the contacts and future plans of the HES
- Minutes of the meetings of the Executive Board
- Original invitations to the conferences
- Lists of participants
- The original text of the statutes of the HES

Certainly, a research study on Greek eugenics without the above information would be at least inadequate; for bibliography for the HES and the post-war history of eugenics in Greece is scarce and unexploited. Few publications might have included information about the HES, but this was only based upon the publications of its minutes and articles in the press. Thus, this dissertation is the unique combination of internal and published information for the history of the HES so far.

Furthermore, Gamble’s archive revealed another side of the HES: its international role as a representative of the International Planned Parenthood
Federation and its close contact with Gamble himself, his institutions and his associates. Added to this, this dissertation illuminates Gamble’s activity in Greece which is also largely neglected by the current historiography. A common topic constantly appearing in the two archives which is unlikely to be found in existing accounts is the distribution of contraceptives in Greece, supplied by Gamble. The archival research I carried out also sheds light on the established network among the Greek, British and American eugenics societies; and the IPPF and Gamble. This too is a unique finding.

In addition, Lina Tsaldaris’ archive was important to this research study. The originality of information taken from there included the statutes of the National Union of Sanitary Education (hereafter NUSE), which was not found published. Furthermore, while Lina Tsaldari’s personality and activity as President of the PIKPA and as Minister of Social Care is more or less known, her participation in the NUSE and the HES, as well as her listing as Honorary Associate of the IPPF, was completely unknown.

As far as Dorothy Hamilton Brush’s Papers is concerned, the most significant element was the copy of the journal *Around the World News on Population and Birth Control* including a paragraph for the HES (see Appendix II). Additionally, a personal letter from Kanavarioti to Brush, written in a friendly tone, was found. This was to confirm the development of a close friendship among Maro Kanavarioti, the secretary of the HES; Dorothy Brush, important member of the IPPF; and Vera Houghton, the secretary of the IPPF’s office in London.

However, the archival research is supported with the appropriate literature to become more substantial. The bibliography of this dissertation
includes books and articles on history, history of medicine, medicine, demography and population studies, anthropology, sociology, legal texts, encyclopaedias and collective volumes. Internet sites were also used with due prudence.

Moreover, I was fortunate enough to conduct interviews with four individuals who were partly involved with the HES, albeit in its later stages. They were reluctant to associate themselves with eugenics. Therefore, they claimed that it was one of their random activities, not something they took too seriously. Unanimously they expressed their belief that the HES was only a “think tank” of physicians and scholars; or at least when they participated in it. All of them thought of Louros as the leader of the HES, whose authority declined after his resignation (1973). While oral history is of great value in research, in this case the interviews did not provide new elements to this research, but only confirmed the information obtained from archives and libraries.

**Aims**

While each topic has its own interest, the aim of this dissertation is to provide a cohesive, comprehensive and explicit narration of the history of the post-war Greek eugenics movement by:

a). revealing the internal structure and activities of the Hellenic Eugenics Society since its very beginning as a think-tank of a group of physicians;
b). presenting its effort in gaining recognition, acceptance and prestige in Greece;
c). portraying the connection of the HES with similar Greek scientific-academic associations, such as the NUSE which is also bibliographically neglected;

d). disclosing the so far undisclosed information about the relationship with the IPPF and the fact that the HES was its representative in Greece;

e). illustrating the role of the PIKPA, both in relation with the HES and as a contact of the IPPF;

f). showing the foreign interest in the Greek eugenics movement by individuals such as Dorothy Brush and Joseph van Vleck, but most of all Gamble’s persistence in getting involved in the Greek family planning movement;

g). discussing and analysing selected conferences of the HES in terms of the content of the papers; the importance of its members; and their repercussions.

**Structure**

Chapter 1 addresses issues of eugenics, health policies and hygiene implemented in Greece during the first half of the century. More specifically, it refers to the relevant legislation which shaped the activities and organisation of the public health sector, including practical solutions of health and hygiene such as the student health card, and eugenic views of some leading physicians and pedagogues.

Chapter 2 discusses the first period of the HES, from the beginnings of 1953 until the end of 1954, which was characterised by the strong
connection of the HES with the Athens Medical Association (hereafter AMA). It examines the preliminary meetings that were held at the premises of the AMA, where the HES was then based. Athanasios Mantellos was simultaneously President of both the AMA and the HES, holding both posts until August 1954 when he was replaced by Nikolaos Louros. The first period included a series of meetings with regard to the structure, aims and activities of the HES. In this context, the participants of those meetings decided the content of the statutes too. Chapter 2 thus also includes the text of the official statutes.

Chapter 3 follows with the description of the second period of the HES. It began when Louros became its president and the HES was transferred to the Alexandra Maternity Hospital. Consequently, the HES separated from the AMA and became an independent association. Louros made endless efforts to establish the HES as a respectful institution. He exploited his important connections in academy, politics and health services to fulfil his aims. The hallmark of his efforts was the first public lecture of the HES under the title “Eugenics: An Appeal” (Ευγονία. Μια Έκκλησις), given in March of 1955 attracting an audience of 800 people. Since then, the HES gained more public acceptance and respect. Moreover, it cooperated with similar associations, such as the NUSE, which was the Greek department of the Union International d’ Education Sanitaire, an international non-governmental organisation. They organised a series of public lectures on subjects of eugenics and heredity during 1955-1956. PIKPA, an institution for the protection of mothers and children, also collaborated with the HES. PIKPA’s President Lina Tsaldaris and its
Medical Director, Konstantinos Saroglou, were also members of the HES.

In Chapter 4 HES’s international recognition is examined through the correspondence between the HES and its foreign contacts. Correspondence and visits abroad led to the development of a profound relationship among the HES, the IPPF and other foreign associations. Maro Kanavarioti, the secretary of the HES, was the protagonist in the developed network. Her visits to Stockholm, London, Oxford and Rome were decisive to the international recognition of the HES and Greek eugenics.

In this context, Chapter 5 deals with the relationship between Gamble and Greek eugenicists. In this respect, it shows how the birth control movement developed in Greece and many gynaecologists outside the HES got involved with it too. Furthermore, Gamble’s delegates visited the country and assessed the level of family planning awareness and usage of contraceptives. Their interest in exploring the socio-medical perspective for family planning led them to women’s associations; the PIKPA; and clinics for prenatal care. In this chapter the divergence in Louros’ viewpoint for contraceptives is illustrated as well. Although he was initially a keen supporter of contraception and accepted, with gratitude, Gamble’s offer for supplying him with contraceptives to distribute to his patients; he ended up questioning their practicality and gradually became disassociated from Gamble.

As a continuation of the previous chapter, Chapter 6 is devoted to the conferences organised by the HES about population problems and demography and Chapter 7 tackles matters of heredity and the institution of family. Further, these conferences are considered in the wider context of the
attitudes of Greek society and the academic and scientific community. Presenters at the conferences were members of the HES and guests who were eminent scholars and scientists; and sometimes politicians too. As such, the minutes of the conferences provide a window on prevailing views.

Finally, the appendices included at the end of the dissertation illuminate some important aspects of this study. Appendix I includes brief biographical notes of the most important supporters of eugenics and birth control in Greece and abroad, as discussed in the dissertation. Appendix II includes a collection of images and photos.
Chapter 1

Eugenics and health policies, 1900-1950: An Overview

This chapter discusses the contribution of health experts, as well as governmental actions, for the improvement of the demographic state of the country during the first half of the twentieth century. The hygienic measures adopted were often unsuccessful and inadequate, because the conditions were rarely favourable, alongside financial limitations.

Similar to the rest of the Southeast European countries, such as Bulgaria, Yugoslavia and Romania, the Greek public health system was practically non-existent before the 1920s, although the relevant legislation did exist. The Balkan Wars and the First World War, as well as the disastrous warfare in Asia Minor, had negative consequences for the general health of the population. Nevertheless, private initiatives by individuals like Konstantinos Savvas and Emmanuel Lambadarios were decisive for the reform of public health in Greece during the 1920s. There was an obvious duality in the role of the physician, who was concerned more with society in general than the individual solely, trying to connect individual physical health with morality, and public health with social norms. On the other hand, government actions, with the aid of international organisations, produced remarkable results in terms of health and hygiene policies and medical training.

2 Ibid., p. 520.
Public Health System

Political polarity and instability throughout the first half of the century impacted negatively on the development of the public healthcare system. However, only a radical reform of the public health system could offer viable solutions, which meant the adoption of new regulations.

The existing Law 4 029 for the labour of women and minors, introduced in 1912, already stipulated that placing heavy labour on children led to the feebleness of their body and mind, unavoidably leading to an unhealthy population. This view echoed wider European developments towards the protection of children from hard labour in factories, in addition to establishing obligatory education and passing laws for the protection of children.

For a long period, the principal concern of the Greek state was the creation of a durable army. Although the health of the population was in decline, there were no important initiatives towards its protection. During the period from the late nineteenth century until 1914, the public health sector was very poor and lacking proper infrastructure. In this context, many health institutions and hospitals were obliged to cease operation.

A leading figure of the hygienic movement was Konstantinos Savvas. Long before his classic handbook of hygiene was published in 1928, he took many initiatives for the protection of the population.

---

4 Karakatsani, Theodorou, *Hygiene Imperatives*, p. 117.
Indicatively, as early as 1905, he organised a hygienic movement, the “Anti-malaria League” (Σύλλογος προς περιστολή των ελειογενών νόσων). The first attempt at the elimination of the disease occurred in 1908, when a law, providing for the free distribution of quinine, the medication for tuberculosis and malaria, was passed. A year after, in 1909, the First National Conference on Tuberculosis took place in Athens.

Moreover, during the Balkan wars (1912-1913) there was a coordinated effort, under the direction of Savvas, to eradicate disease among Greek soldiers. Savvas made great efforts to help the Greek soldiers on the battlefields, while also protecting the population of Northern Greece, where the fighting took place and many diseases were endemic.

In 1910, Savvas and Lambadarios proposed the first complete plan for the reform of sanitary services and the supervision of public health, which gained parliamentary approval. Primarily, it concerned the protection from contagious diseases and the regeneration and healthy reproduction of the race. The plan was aimed at the reconstruction of health institutions and policies in order to protect mothers and children from conception until school age. They claimed that the quality of children’s health was crucial for the biological quality of the race; the state was thus obliged to provide the best conditions for mothers. The rationale was that children who were born and raised under optimal conditions would renew and strengthen the nation’s human capital.

---

8 Savvas, Handbook of Hygiene, p. 38.
9 Ibid., p. 69.
10 Ibid., p. 38.
In this context, the most significant action of the Greek state was the passing of Law 346 for the unification of public health services into one central Hygiene Service introduced in 1915.\textsuperscript{12} It included detailed description of the new organisation of public hygiene, including required qualifications of the personnel at Hygiene Services, the duties of the Medical Council (Ιατροσυνέδριον) and the Inspector of Hygiene;\textsuperscript{13} the role of the prefectural medical officer (Νομίατρος), the duties of the personnel at isolation hospitals (λοιμοκαθαρτήρια), the duties of the representatives of public hygiene abroad, the regulation of vaccinations, the duties of those who collected dead bodies, and finally, the amount of taxes for isolation hospitals.

Until then, the most important hygiene service was the Medical Council, which was founded in 1834,\textsuperscript{14} as a part of the Secretariat of the Ministry of the Interior. It was composed of a president and six members, four physicians and two pharmacologists. Later, one or two veterinarians were added. The main duty of the Medical Council was to inspect the work of physicians, surgeons, dentists, veterinarians, pharmacologists and midwives. Secondly, the Council was responsible for undertaking issues of medical jurisprudence. Thirdly, it was the official consultant of the Secretariat of Interiors for any medical matter. As it was the advisory board

\textsuperscript{13} See more details about the role of health inspector in: Karakatsani, Theodorou, \textit{Hygiene Imperatives}.
\textsuperscript{14} Official Government Gazette, Royal Decree: “For the Establishment of the Medical Council”, 24 (12 July 1834).
on every matter of health and hygiene, its members and its work were highly respected.\(^\text{15}\)

All public health services resided at the Ministry of the Interior.

In 1917, the Health sector was separated from this ministry in order to form a separate Ministry of Social Care.\(^\text{16}\) In 1920, Savvas made continuous efforts for its reform and its change into the Ministry of Hygiene and Social Care.\(^\text{17}\) Law 2882, which included Savvas’ proposals for the improvement of public health and hygiene, was indeed passed by the Third Constitutional Assembly (Γ’ Εθνοσυνέλευση), but never implemented, because of the military catastrophe in Asia Minor and its tragic consequences.\(^\text{18}\)

The wave of refugees from Asia Minor to mainland Greece (1922) was a decisive point for the reform of the public health system, mainly because of overpopulation and the uncontrolled transmission of diseases.\(^\text{19}\) Due to this unexpected growth in the population, there was a need for new health policies.\(^\text{20}\) It was then that the inadequacies of the public health system came to light. Thus the need to protect and help the citizens became urgent. In 1922, the Ministry of Social Care was incorporated into the new Ministry of Hygiene, Care and Perception.\(^\text{21}\) For the next four years the

\(^{15}\) Konstantinos Savvas was President of the Medical Council from 1897 to 1908.


\(^{17}\) Dardavesis, “The Historical Course of the Ministry of Health in Greece, 1833-1981”, p. 52.

\(^{18}\) Ibid.

\(^{19}\) Ibid.

\(^{20}\) Karakatsani, Theodorou, “Eugenics, Childcare and Hygienic Concerns in Interwar Greece”, p. 492.

ministry was organised and developed through many legal enactments, which defined its services.

Support received from international organisations was also essential. In 1923 the Epidemic Commission of the League of Nations Health Organisation (LNHO) visited Greece, helped the sanitary organisation of refugee camps, and undertook preventive vaccinations. Institutions like LNHO were manned by health experts who worked mainly on research and eradication of epidemics, like malaria, tuberculosis, and leprosy.\(^{22}\) The LNHO collaborated with the Rockefeller Foundation,\(^ {23}\) which was also very active in Greece during the 1930s and 1940s, especially with the anti-malaria campaign. In 1928, health experts from LNHO conducted research on malaria and tuberculosis and offered their findings and advice to the Greek government. Their contribution helped the re-organisation of public health policies,\(^ {24}\) by advancing the organisation of the public health system and introducing local physicians to international standards of hygiene, sanitary housing and nutrition.

Yet, for a short period, during the dictatorship of General Pangalos (1925-1926), the Ministry of Hygiene was abolished and its services were allocated to the Ministries of the Interior, Education and Military.\(^ {25}\) Once more, political instability disrupted the organisation of the public health sector. However, it was during Pangalos’ government when the law for the


protection of the children until the age of two as well as their mother’s protection was implemented.\textsuperscript{26} The objective of this action was to tackle the growing problems of infant mortality, abortion and abandonment. A few months later, the government of Georgios Kondylis re-established the Ministry of Hygiene, Care and Perception and added the Secretariat of Hygiene.\textsuperscript{27}

Once more, during the 1930s the presence of infectious diseases motivated the various governments to pay close attention to the level of hygiene among the population and adopt sanitary measures, particularly with respect to the prevention of tuberculosis and malaria, which were endemic in Greece. During the period under examination, the battle against tuberculosis and other diseases became more active and effective. Activities and initiatives like the organisation of open-air camps and schools; the re-organisation of the Sotiria Sanatorium in Athens, the biggest in Greece; the founding of more sanatoria; as well as many preventive medical examinations and vaccinations in schools were some examples of the methods to eradicate infectious diseases. In 1928 a dengue fever epidemic ravaged a large part of the population.\textsuperscript{28}

In 1929, during the last period of the Liberal government, the Ministry of Hygiene, Care and Perception was renamed again as the


Ministry of Hygiene. Moreover, an important step taken by the Liberal government towards the protection of mothers and children was the creation of a scientific committee in the Ministry of Hygiene to supervise all institutions associated with the protection of mothers and children. In addition, the government contributed financially towards the activities organised by the Patriotic Institution of Healthcare (Πατριωτικό Ίδρυμα Περιθάλψεως). Generally, the government’s objective was to gradually replace the private charity funds that had undertaken the healthcare of the nation with government funding. During the same period, they created a special school for children with tuberculosis. These children were categorized in five groups, according to their mental and physical state. They were: very thin (καχεκτικά); mentally distorted (πνευματικώς ανώμαλα); foreign language speakers (ξενόφωνα); illiterate (αναλφάβητα) and working (εργαζόμενοι).

Eleftherios Venizelos was not only Prime Minister but also Minister of Health, a fact which contributed to the high level of effectiveness of hygienic measures next to the political stability of the period 1928-1932. In 1932 the Departments of Hygiene and Healthcare were unified, and formed the Ministry of State Hygiene and Perception (Υπουργείο Κρατικής Υγιεινής και Αντιλήψεως).

---

31 Karakatsani, Theodorou, “Eugenics, Childcare and Hygienic Concerns in Interwar Greece”, p. 496.
32 Ibid., p. 499.
34 Karakatsani, Theodorou, Hygiene Imperatives, p. 377.
A year earlier, the School of Hygiene was established in Athens. Similar schools were established in other countries at the same period, in London (1924), Zagreb (1928) and Ankara (1936), all with the support of the Rockefeller Foundation. The School’s purpose was epidemiological research and education, research on the impacts and effectiveness of medication against diseases and theoretical and practical teaching of malarial diseases. It was an institution for higher education and the first to offer specialisation in hygiene. Norman White, the representative of the League of Nations in Greece, was the first Director of the School. From the beginning of its activity, a group of experts belonging to the Rockefeller Foundation was established in the School, contributing to both the educational work and the anti-malaria campaign. Among them were M. Balfour, M. Barber, J. B. Rice, R. C. Shannon and D. E. Wright. The Rockefeller Foundation also offered scholarships for overseas training. The contribution of the Rockefeller experts to the anti-malarial campaign was significant; and despite the fact that they left Greece in 1938, the campaign was continued by Greek experts who they had trained.

Alexander Koryzis, Minister of Health during the government of Ioannis Metaxas (1936-1941), appointed a committee under the direction of Fokion Kopanaris, for the comprehensive study of malaria with the purpose of finding effective ways for its eradication. A combination of specialised

---

35 Official Government Gazette, Law 4069: “For the Establishment in Athens of the School of Hygiene and the Physicians' Postgraduate Studies on Hygiene Abroad”, A, 94 (5 March 1929).
37 Gardikas, "Relief Work and Malaria in Greece, 1943-1947", p. 494.
38 Dardavesis, “The School of Hygiene in Athens and its Development to National School of Public Health”, p. 25.
personnel, sufficient funding and major drainage works in Northern Greece, Thessaly and Epirus, made the work of this committee very successful. However, a second wave of malaria incidents followed the famine outbreak in 1942. Therefore, the eradication of malaria was claimed later than the aforementioned effort, during the 1950s and 1960s. Daniel Wright, for instance, returned to Greece as a director of the UNRRA Medical Division Mission to supervise the country’s anti-malaria program. After the Second World War, he supervised the DDT spraying in the country (1946), a radical method of eradicating mosquitoes, which transmit the disease between people.39

Laws 5733/1932 (introduced by Venizelos’ government)40 and 6298/1934 (introduced by Tsaldaris’ government),41 regarding the Institution of Social Insurance (Ιδρυμα Κοινωνικών Ασφαλίσεων, IKA), contributed to the strengthening of social welfare and security in Greece. Funded partly by employers and partly by workers, the IKA would respectively offer pension for the aged and insurance in sickness. Indeed, the state’s contribution to the IKA was just the management of its budget, since it could not offer financial aid.42 Nonetheless, these laws were implemented only during the “4th of August” dictatorship, when General Metaxas tried to establish a programme for social care in favour of the lower classes. In this context, the government

passed a series of laws to accomplish this. Among them, the Law 965\textsuperscript{43} regarding the organisation of public health institutions and hospitals and the Law 547\textsuperscript{44} for the eight-hour workday were the most significant. As in the last period of the Liberal government, the political stability of the period 1937-1940 benefited the implementation of new legislation for public healthcare. Notwithstanding, its application was often restricted due to limited public funds.\textsuperscript{45}

**Pedagogy and Pedology**

In general, during the pre-war period public health policies in Greece focused on children because this target group was regarded as an investment in future citizens and soldiers. In turn, the state focused not only on their protection, but also on their health improvement. Implementation of preventive medicine had been the state’s priority, due to its effectiveness, in terms of both health improvement and cost.

The pedological movement in Greece, which was popularised by Lambadarios, offered the theoretical concept of building a new health system directed towards the protection of children. The science of pedology was introduced by Lambadarios in the beginning of the twentieth century and by 1936 it became a university course at the University of Athens.\textsuperscript{46}

\textsuperscript{46} Antonios Ch. Papaioannou, *Student’s Health Card* (Athens: n. p., 1939) p. 26 [in Greek]; the book was dedicated to his professor Emmanouel Lambadarios.
Lambadarios also founded the Pedological Institute and during the 1910s founded children’s camps, student polyclinics,47 and open-air schools for pupils who were susceptible to tuberculosis. Such works of social perception were usually funded by private organisations,48 whose contribution was vital for the development of the public healthcare sector. In 1920, the journal Pedology (Παιδολογία) and in 1936 the journal School Hygiene (Σχολική Υγιεινή) were published as a means of disseminating pedology.

Apart from physicians, scholars from other scientific branches were interested in the protection of children’s health. For example, Nikolaos Exarchopoulos49 was a pedagogue and supporter of experimental pedagogy. He argued that it was almost impossible to separate the scientific fields of pedology and pedagogy. Pedology approached childhood theoretically, whereas pedagogy was more practical.50 In order to justify the association of pedagogy with practical sciences, Exarchopoulos also described its connection with biology. He argued that although the contribution of the advances and discoveries of biology were important, at the same time they were limited to the biological side of the individual. Pedagogy regarded and researched the child holistically. Notwithstanding, Exarchopoulos admitted that evolutionary biology directed all pedagogical research, because it permitted the proper education of children according to heredity, fitness and

47 The first student polyclinic was founded in Athens in 1915.
49 Nikolaos Exarchopoulos was also President of the Academy of Athens in 1942, see “Academy of Athens’ Presidents since its Establishment” in: [http://www.academyofathens.gr/ecPage.asp?id=211&nt=18&lang=el accessed 4 March 2013].
Indeed, his studies of children were inextricably linked to certain eugenic practices, such as adhesion to the mathematical interpretation of the individual and its classification according to its proximity to “normality”.

Equally important, Exarchopoulos founded the Experimental Laboratory (Πειραματικό Εργαστήριο του Πανεπιστημίου Αθηνών) in 1923 and the Experimental School (Πειραματικό Σχολείο του Πανεπιστημίου Αθηνών) in 1929, both belonging to the University of Athens. The Experimental Laboratory aimed at introducing the practical pedagogical methods to students of pedagogy. Its target was the holistic research of Greek pupils from the physical, psychological and moral viewpoint. As far as physical research was concerned, the projects focused on the development of Greek pupils. To this end, they used a variety of special tools to define accurate anthropometric dimensions of pupils. They investigated and registered height, weight, thorax perimeter, head diameter and muscle strength, in order to specify the level of normality at each age and underline the differences between the sexes and social classes. Another of Exarchopoulos’ important studies was to compare Greek children to those of other nations. Biometry was one of eugenics’ methodologies, widely practiced at the beginning of the twentieth century, in combination with Mendelism and pedigree studies. Biometry was used to prove the

---

51 Exarchopoulos, Introduction to Pedagogy, p. 69.
52 The Experimental Laboratory still exists; details could be found at its website: [www.ergastirio.ppp.uoa.gr accessed 4 March 2013].
53 Exarchopoulos also founded the Psychological Laboratory of Athens (Ψυχολογικό Εργαστήριο Αθηνών) and the Psychological Laboratory of Thessaloniki (Ψυχολογικό Εργαστήριο Θεσσαλονίκης).
54 Exarchopoulos, Introduction to Pedagogy, p. 179.
hereditarian nature of a trait or behaviour. One of the most renowned examples of institutionalised research on biometrics was the Galton Laboratory at the University College in London.\textsuperscript{56} Undoubtedly, Exarchopoulos was inspired by its research.

As far as the psychological research was concerned, the students of the laboratory researched the intelligence level, the differences among social classes, between sexes, and drew comparisons with pupils of other countries. Moreover, they registered the consistency of teachers’ work and pupils’ perceptiveness, acuity, and critical ability. Furthermore, they investigated the level of attention, concentration, fitness and the familial influence on a pupil’s intelligence.\textsuperscript{57} In addition, it is important to mention that Exarchopoulos created the Greek version of the Binet-Simon I.Q. test in 1931.\textsuperscript{58}

The Experimental School was where the above mentioned studies took place. They used psychographs and medical records of the pupils in order to create indexes of the children’s performance. Based on these studies, they characterised them as uppermost (υπερέχοντας); inferior (υστερούντας) or mediocre (μετρίους).\textsuperscript{59} The classification of pupils was a common phenomenon, made either by pedagogues and teachers or by school doctors, because pedology and pedagogy were also linked with school hygiene. All three scientific branches researched and endeavoured to


\textsuperscript{57} Exarchopoulos, 	extit{Introduction to Pedagogy}, p. 181.

\textsuperscript{58} See N. Exarchopoulos, “The Diagnosis of the Level of Intelligence on the Basis of Experimental Research. A New Version of the Binet-Simon Test”, 	extit{Academy of Athens Minutes}, 6 (1931) in: Exarchopoulos, 	extit{Introduction to Pedagogy}, p. 182.

\textsuperscript{59} Ibid., p. 186.
improve children’s mental and physical health and intelligence. Nonetheless, their practices often crossed the border between health improvement and positive eugenics.

**School Hygiene**

School hygiene was part of the public hygiene, but it was particularly favoured by the Greek state. The teaching of hygiene practices in schools was used to implement wider ideas and practices of hygiene in every household. Children, who would acquire hygienic knowledge and attitudes at school, would then carry them home and so affect the attitude of the rest of the family.\(^6^0\) In the long run, pupils with better hygienic attitudes would become stronger workers, forceful soldiers and healthier people, who would produce future healthy families. The first Office of School Hygiene, which organised activities regarding school hygiene, was founded in 1908\(^6^1\) and its first director was Georgios Drosinis.

School hygiene worked in two areas: on the one hand, with school buildings and on the other hand, with teachers and pupils. School premises were populated areas where infectious diseases could be easily transmitted. Therefore, school buildings were to be built in accordance with the basic rules of hygiene: clean, airy and sunny. Furthermore, access to the school premises was prohibited to pupils or teachers who lived at the same house with someone suffering from a contagious disease or prone to such a

---

\(^{60}\) Karakatsani, Theodorou, *Hygiene Imperatives*, p. 113.
disease, like tuberculosis. In this context, an excellent example for the prevention of diseases was the organisation of open-air camps and open-air schools, introduced by Lambadarios. Children who were prone to tuberculosis benefited from those open spaces, where they could both be educated and amused. Monasteries offered the ideal environment to be used as open-air spaces for children.

Given that school hygiene was based on the work of school doctors (σχολίατροι), a law for school doctors was passed in 1914. School doctors were physicians who specialised in school hygiene and had at least three years experience. Their duties were medical treatment of pupils; promotion of preventive hygiene; and isolation of the sick from the healthy. They were responsible for supervising the building, checking the teaching methods, and examining and vaccinating pupils. In fact, school doctors were more responsible for preventive than curative medicine. School doctors were to be attentive and vigilant with the patients and their examination results. According to Law 240, they were allowed to take research leave to travel to Western Europe to learn new methods of school hygiene. Countries like Belgium and Germany were already experienced in the activities of school doctors, as they had appointed them at their schools much earlier than Greece had.

Moreover, the work of the school doctor was aided by school nurses and assistants. The role of the school nurse was equally as essential as that

---

63 Exarchopoulos, *Introduction to Pedagogy*, p. 16.
66 Ibid., p. 109.
of the doctor, mediating between the doctor, the pupil and the pupil’s family. School nurses visited sick pupils at their own houses and built up a relationship with their family. Usually, female school nurses could approach the pupils’ mothers much easier than the doctor. As a result, they could educate them about hygiene. Therefore, school nurses played a more important role outside the school than inside it.67 During the period when Lambadarios was Director of the Service for the School Hygiene at the Ministry of Public Education he appointed 15 inspectors of school hygiene, 70 school doctors, and many more school nurses.68 However, during the period between 1926 and 1933, due to limited public funds, the Service for the School Medicine was abolished and only 20 school doctors were working around the country.69

Along with the examination, school doctors filled up the newly introduced personal health card of each pupil (ατομικόν δελτίον νησίας μαθητού). The physician examined the pupil both physically and mentally and registered the results on this card. The process was repeated frequently, in order to register and monitor the progress of the child. This record of each pupil would be kept until the age of 18. Papaioannou’s work, Student’s Health Card,70 offered the most detailed analysis of the purpose and the use of student health cards.

Primarily, Papaioannou highlighted the dangers of childhood, such as childhood diseases, abnormal development and bad schooling conditions.

School hygiene, in general, and the health card, in particular, aimed at the

---

67 Karakatsani, Theodorou, Hygiene Imperatives, pp. 206-207.
68 Savvas, Handbook of Hygiene, p. 363.
69 Papaioannou, Student’s Health Card, p. 28.
70 Ibid.
elimination of these degenerative factors. Furthermore, contributing factors over the course of life of every pupil which needed attention by the school doctor included: family life, school life, housing and nutrition.\textsuperscript{71} The harsh living conditions of the period under examination were depicted in the health of the population, most notably that of vulnerable pupils. The health card was indicative of their physical and psychological state. This record was often regarded as a means of preventive medicine. As already mentioned, school doctors examined their pupils frequently, in order to keep a record of their development. The continuity of the results offered the possibility of predicting the state of health of the examined person or to prevent the spread of a disease. In this way school doctors were alerted to an undesirable result and sought for ways to improve the physical and mental health of the child.

As far as the actual examination was concerned, parents participated as well. They were present during the examination and they had access to the results and the health card. Furthermore, parents were asked for the medical history of the family. Their presence was crucial, because it permitted school doctors to obtain a better image of the pupil’s health. Regarding the family, the rest of the members could be protected from a latent disease or a variation from normality detected in the pupil. At that point, Papaioannou underlined the usefulness of the health card regarding protection against malaria.\textsuperscript{72}

By 1920, school doctors used a variety of tools to measure the physical characteristics and dimensions of the pupils. They measured the

\textsuperscript{71} Papaioannou, \textit{Student’s Health Card}, p. 34.

\textsuperscript{72} Ibid.
head, thorax, height, and weight, etc. Based on the statistics of their findings, they could assume the “factor of robustness” and estimate the “average Greek pupil”. Karakatsani and Theodorou argued that these practices established which pupils were “eugenic” and which were “dysgenic”. 73 Similar assumptions could be reasonably argued due to the mathematical nature of the examination. It was unavoidable to find the average measurement and compare it with the rest. According to Papaioannou, pupils were categorised in three categories; healthy, under surveillance and sick or under treatment. 74 As previously shown child classification continued to be used in experimental pedagogy (1923) and in the planning of health policies, promised by the last Liberal government (1928-1932).

Apart from being a preventive measure, the health card served as a way to evaluate the results of theoretical and physical education. On the one hand, there was a series of measurements, records and statistics for each pupil, while on the other hand closer observation and comparison among health cards revealed the condition of each school as a whole. The role of pedagogy was to gather those statistical facts, in order to evaluate its own work based on those findings and use proper guidelines to construct a forward-thinking, more effective educational system. As a consequence, there was a mutual and significant relationship between pedagogy and school hygiene.

73 Karakatsani, Theodorou, “Eugenics, Childcare and Hygienic Concerns in Interwar Greece”, p. 494.
74 Papaioannou, Student’s Health Card, p. 27.
Public Hygiene and State Intervention

As already mentioned, ideas about preventive medicine often led to positive eugenic proposals. Papaioannou, for instance, was one of those who supported state intervention in public health by examining the health of Greek people at a larger scale, not only in schools. He argued that the possibility of issuing a health card in many public sectors simultaneously and continuously could solve racial and national problems. Health cards at schools, military camps and workplaces would aid the creation of family trees and the advance of racial research.\(^75\) He obviously admired and endorsed Galton’s ideas. Although he briefly described the condition in other European countries, he particularly praised Britain. He attributed the success of school hygiene in Britain to the dissemination of eugenics and the work of Galton and his laboratory.\(^76\) It was obvious that he would have liked to apply the same eugenic methods in Greece to fight racial degeneration.

Apostolos Doxiadis on the other hand presented a clear plan for state intervention in family planning.\(^77\) According to A. Doxiadis, it was the state’s obligation to intervene in families in order to enhance the biological value of the race. Therefore, state intervention in family matters was unavoidable. He argued that every family should have on average four children, provided that it had the ability to raise them properly in a hygienic

\(^{75}\) Papaioannou, *Student’s Health Card*, p. 35.

\(^{76}\) Ibid., p. 21.

\(^{77}\) Apostolos Doxiadis was Minister of Healthcare during 1922-1924; Minister of Hygiene and Care 1924-1928; elected Senator in 1932; President of the Patriotic Institution of Social Welfare and Awareness (PIKPA) during 1924-1932. Apostolos Doxiadis was father of Spyros and Konstantinos, who will be mentioned in the following chapters.
environment, at least until the age of five. Similarly to Papaioannou, A. Doxiadis suggested that every family retain a record of births, congenital diseases, bad habits, such as alcoholism and drug addiction, profession and education of each member. These details would allow a biological evaluation of the family by the state. At this point, the state would decide whether to encourage or discourage this family from reproduction. One of his significant suggestions was that the state should financially aid those poor families which had high biological value. A. Doxiadis did not associate biological quality with social class. On the contrary, he acknowledged the possible biological value in every person or family regardless of their financial state. In addition, he claimed that the reconstruction of society should be done on the basis of race, not of social class. A. Doxiadis’ alternative eugenic ideology in that matter was important because the majority of eugenicists - especially during the first half of the twentieth century – supported the links between low social class and low biological value or intelligence. It was unlikely for a eugenicist to have a broader conception of the origin of intelligence apart from a combination of heredity, high social class, proper education and good nutrition. However, A. Doxiadis supported his own views and did not hesitate to propose additional taxes on unmarried individuals. In accordance with A. Doxiadis, Makridis another eugenicist also proposed to legalise a tax on the unmarried. In order to justify his claim, he referred to the same measure that was imposed in 434 BC by Lycurgus in Ancient Greece.

78 Karakatsani, Theodorou, “Eugenics, Childcare and Hygienic Concerns in Interwar Greece”, p. 505.
79 Makridis, For the Protection, Improvement and Ennobling of Greek Race, p. 103.
Among the suggestions for state intervention in family matters, Greek eugenicists expressed their disapproval of mixed marriages. For example, Makridis argued that there should be a strict prohibition of marriage between Greeks and foreigners, which was up to that point valid only for soldiers and officers. He argued: “There was the opinion that when an inferior race was mixed with a superior one, the former would become better. In our case, there was undoubtedly no other race superior than the Greek, so we were not going to be profited by any racial mix. Moreover, we would not like to advance inferior races with a mix, because we have already been mixed with the blood of inferior races throughout the centuries”.\(^8\) It was obvious that he shared Ioannis Koumaris’ ideology about the superiority of Greek race.\(^8\) Above all, it was believed that miscegenation would undermine the quality of the Greek race. There were more cases which enforced marriage prohibition, such as marriage among relatives (incest marriages) up to the fifth grade, or marriage between spouses who had an age difference of more than 10 years. Makridis’ advice to young people to prefer brown-haired, because fair-haired were, allegedly, more prone to tuberculosis, was also provocative.\(^8\) In this context, Savvas proposed the prohibition of marriage of women having deformed pelvises, because delivery would be very hard or impossible.

Additionally, during the first half of the twentieth century there was lack of information about the method of transmission of infectious and venereal diseases. Therefore, people who suffered from diseases, which were not transmissible by sexual intercourse, they might be excluded from

81 See Trubeta, *Physical Anthropology, Race and Eugenics in Greece (1880-1970s)*.
82 Makridis, *For the Protection, Improvement and Ennobling of Greek Race*, p. 112.
marriage because they could transmit the disease to their spouse. In this context, Economopoulos suggested the compulsory teaching of the medical details of tuberculosis in schools, professional schools and the army. Moreover, he underlined the necessity of the declaration of tuberculosis incidents and the compulsory hospitalisation of dangerous cases. Venereal diseases, he claimed, were a danger to society and race because they caused population decline and birth defects. He proposed founding special health centres for free preventive examination as well as for the compulsory reporting of incidents by physicians. Furthermore, Savvas shared his view for the founding of these special centres at each hospital, where examination and medication would be free of charge. He agreed with the compulsory declaration of an infectious disease and the legal punishment of spouses who hid it. At the same time, doctors’ confidentiality was also compulsory. Physicians were legally obliged to protect the anonymity of the patient, but also to declare any incidence of an infectious disease to the appropriate state authority, usually the most proximate Hygienic Centre. Physicians, who did not act thus, were to be punished. The archives of the Athens Medical Association record that physicians were punished for similar cases during the post-war period too.

Ideas, such as Makridis’, were representative of physicians who emphasised the protection of family and procreation. He constructed a plan of action, including specific interventions by the state, in order to facilitate

---

86 Athens Medical Association Archive, proceedings of the 30th regular meeting, (1 February 1952) [in Greek].
the creation of robust Greek families. First of all, he regarded the reinforcement of the institution of marriage as a priority. In addition, the state should implement policies for the protection of pregnant women and the facilitation of workplaces. Facing a rise in the number of induced abortions, Makridis suggested the need to organise the fight against abortions and abandonment of newborns. The great number of abortions became a matter of demographic concern. At this point Makridis criticised Malthus’ theory of population, because it undermined population growth and, therefore, favoured the practice of abortions.\textsuperscript{87}

Regarding children’s health, Makridis supported the close observation of the development of children from their conception until the eighteenth year. According to him, during this period children should be educated and examined by school doctors,\textsuperscript{88} as previously described. Furthermore, he proposed a plan for the protection of every Greek woman who faced problems with procreation and sterility. The state should also care for and help women who needed an operation or treatment to deal with sterility. Moreover, in cases of women who did not wish to have children due to poverty, state authorities would offer financial aid, because it should not be overlooked that those women could give birth to future soldiers, workmen and citizens.\textsuperscript{89} Makridis evaluated the priorities of the state according to their importance towards race regeneration; firstly the

\textsuperscript{87} Makridis, \textit{For the Protection, Improvement and Ennobling of Greek Race}, pp. 74-77.
\textsuperscript{88} Ibid., p. 64.
\textsuperscript{89} At that point Makridis praised the Finnish mother, wife and housewife for her strength and courage to keep her house in good condition, to care about her husband and raise her children with the traditions of her race.
protection of mothers, secondly of children and thirdly of families with many members.\textsuperscript{90}

During the first half of the twentieth century, women maintained the traditional model of mother and housewife. The role of women as individuals having free will and action was far from reality. Considering this situation, it was obvious that the above mentioned proposals for racial improvement regarded women as a necessary component of procreation. Despite the fact that some women worked outside the house, the role of mother was always foremost. Therefore, Makridis, Economopoulos and others argued that it was very important for the mother to stay at home at least during her pregnancy and until the newborn became six months old, in order to breast-feed it. The need for absence from work for a period before and after labour was also emphasised. Economopoulos stressed the need for a public service solely dealing with maternal, newborn and infant care.\textsuperscript{91}

\textbf{Eugenic Literature}

Apart from purely practical solutions to population problems, such as the health card, there was great concern about informing the public about a hygienic and healthy lifestyle. Target groups were mostly couples about to get married and pregnant women. Briefly, the state aimed at altering the lifestyle of people before marriage, during pregnancy and after birth. Sanitary conditions were so bad that they prohibited population increase both in quantity and quality.

\begin{flushright}
\textsuperscript{90} Makridis, \textit{For the Protection, Improvement and Ennobling of Greek race}, pp. 67-70. \\
\textsuperscript{91} Economopoulos, \textit{Social Hygiene: Social Care-State Care}, p. 7.
\end{flushright}
In this context, scholars and politicians argued that eugenics could be a means to cultivate the “procreation instinct”, which would be more effective than any other eugenic policy. Future parents should be aware of the consequences of their decisions regarding procreation. If everyone thought responsibly about future generations, they would have chosen their partner according to his/her health condition and biological value. Furthermore, A. Doxiadis had a similar view on the subject and for the first time mentioned the need to cultivate “biological consciousness”, the feeling of biological obligation of the individual to the community. As already mentioned, he proposed the use of a booklet, which would contain the medical history of every citizen, not only of pupils. More specifically, A. Doxiadis argued that it was very difficult to know the medical history of a family because people would hide information for the sake of marriage. The only solution that would protect the future generations was to instil in the mind of young people the obligation to care about their children. The best way to achieve such a goal would be to modify their mentality. In particular, he pointed out that: “[…] this should become like a new religion […] the efforts of the state, the society and the family should have one target, namely eugenics; the improvement or at least not worsening of the human race”. It was essential to inform those people about the potential dangers or benefits from their choice of spouses.

95 Doxiadis, Fragkou, Hygiene and Nurture of Children, p. 9.
In accordance with A. Doxiadis, Makridis used the theory developed by Karl Pearson to argue about the possibility of achieving good quality of births by proper choice of spouse to secure proper genetic predisposition. Human enhancement in two or three generations could be achieved by the combination of proper choice of spouse along with appropriate education and nurture of the children. He based his assumption for future human enhancement on the findings of Pasteur regarding the enhancement of flowers by proper choice and cultivation. He also justified his argument by showing the studies of Galton in family trees of successful men. According to Makridis, eugenics was a branch of hygiene, which referred to groups (nations, races, humanity). It aimed at the conservation and multiplication of those organisms that had biological, physical and intellectual value. Eugenics was based on the principle that external factors and the environment were not the only factors of good health, but heredity played an equally important role in the evolution, progress and robustness of a race. However, he admitted that eugenic policies would not have obvious results sooner than their application to three or more generations.

As far as pregnant women were concerned, they should be aware of any information that would help them to protect themselves and their children. According to Savvas, the health of a newborn was threatened by its parents; syphilitic parents, for instance, could inhibit the development of the embryo or even cause stillbirth. After birth, most of the health problems were caused by malnutrition. In agreement with Savvas and in order to disseminate eugenics, A. Doxiadis encouraged activities which informed

---

96 Makridis, *For the Protection, Improvement and Ennobling of the Greek race*, pp. 84-85.
mothers, such as Mother’s Day, Children’s Week, giving awards for beautiful children,⁹⁸ and financial aid for families having three or more children.

In this context, eugenics intersected with Adolphe Pinard’s theory of “puériculture” (παιδοκομία) which was easily acceptable by the state, physicians and the public.⁹⁹ Moisidis wrote a book on eugenics and puériculture using ancient Greek texts to validate his views.¹⁰⁰ Puériculture offered the theoretical framework to form state policies for the protection of mothers and children. It included a programme of advice for prospective parents for the periods before conception, during pregnancy and after birth. State propaganda was based on advice on nutrition, care and hygiene of a pregnant woman and the newborn, which was, in fact, a popularisation of puériculture. Savvas insisted on the necessity to inform the illiterate about puériculture by simplifying and popularising it. Moreover, obstetricians and midwives should inform new parents about the protection of their child and teach young girls in schools about the necessity of breast-feeding and puériculture.¹⁰¹

The first half of the twentieth century was characterised by a wide range of health problems in Greece. The most significant were infant mortality and the transmission of dangerous diseases. Due to limited funds,

---


⁹⁹ Adolphe Pinard, De la Puériculture (Lyon: Imprimeries Reunies, 1908).


¹⁰¹ Savvas, Handbook of Hygiene, p. 342.
the Greek state was unable to react and deal with the problems quickly. Much effort was put into improving the effectiveness of the public health sector, but most of the legislation was never implemented. Physicians, paediatricians and scholars who were preoccupied with public health and hygiene often became excessive and proposed eugenic policies, like the prohibition of marriage to certain groups of people and state intervention in families. The bigger picture, though, shows efforts to confront the problems at their root and construct a regenerated Greek society consisting of healthy, strong and intelligent citizens. To this end, the objective was the protection of mothers and children, which became a priority and shaped public health policies. During the Second World War and the Civil War which followed, the public health system collapsed. The situation began to improve in 1951, when the Ministry of Social Care was re-organised.
Chapter 2

The Conception of the Hellenic Eugenics Society

As a consequence of the consecutive wars from the beginning of the twentieth century until 1949, living conditions continued to be very difficult in the early 1950s, and the general health of the population was at a historically low level. What is often ignored by historians is the effect of the famine from May 1941 to April 1943, which not only caused numerous deaths, but also sterility. It has been argued that the chronic malnutrition during the two years of starvation affected the male population more than the female and children.¹

Furthermore, the public healthcare system was disorganised and poor. During the period 1940-1951, the Ministry of National Hygiene and Perception was renamed, and split in different sectors and reunited several times. After a short period of stability, during 1951-1964, it followed the same course of continuous changes of name and ministers. It is remarkable that during the period 1917-1982, 102 ministers of health were appointed by the state to manage the vulnerable portfolio of public health and hygiene.²

During a period of relative political and social stability after the Civil War (1951-1964), Law 2032/1952 was passed which provided for the creation of a new Public Education Service, belonging to the then Ministry of Welfare, responsible for public education (διαφώτιση) and propaganda for health and hygiene. The purpose of this service was to undertake a

² Theodoros Dardavesis, “The Historical Course of the Ministry of Health in Greece (1833-1981)”, p. 54.
campaign to address problems of personal and public hygiene, prevention of diseases and maintenance of physical and mental health. The service was also willing to cooperate with any public or private initiative towards fulfilling its aims.

The Athens Medical Association (hereafter AMA) and other non-governmental institutions took the opportunity to bring problems of hygiene to public attention by organising lectures and conferences. Among these was the union of several non-governmental associations, women’s clubs and scientific societies, which was given the provocative title: “Crusade of the Scientific and Social Organisations for the Psychological, Mental and Physical Health of Greek People” (Εθνική Σταυροφορία Επιστημονικών και Κοινωνικών Οργανώσεων δια την Ψυχικήν, Πνευματικήν και Σωματικήν Υγείαν του Ελληνικού Λαού). This non-official movement was founded by 16 independent, non-governmental associations and organised a series of 35 lectures from 26 May until 29 June 1952. It included lectures on the role of Greek women in society and the family, premarital health certificates, directives for mental health, alcoholism, drug addiction, neurotic children, and sex education. Speakers included well-known eugenicists and future members of the HES such as Popi Spelioti-Bazina, Moisis Moisidis, Konstantinos Konstantinidis, Konstantinos Katsaras, and Nikolaos Drakoulidis.

In their attempt to disseminate rules of hygiene and preventive medicine, the creation of a Greek eugenics society was an idea initially

---

4 Anon., “Announcement: Series of Lectures by the Crusade of the Scientific and Social Organisations for the Psychological, Mental and Physical Health of Greek people”, Deltion Iatrikou Syllogou Athinon, 10, 5 (May 1952), pp. 20-21 [in Greek].
conceived and developed by the AMA. The AMA was the largest of its kind in Greece, both in terms of the number of its members and in the scope of its activities. Discussions about the improvement of personal and public hygiene as well as preventive medicine were abundant throughout the twentieth century. The association tried to improve the health of the Greek population, particularly the poor. One of its targets was to familiarise the public with modern ideas of health and hygiene. Following the model set by the World Health Organisation, the AMA celebrated Health Day, having a different topic every year. In 1953 the topic of Health Day was “Sanitation”. In addition, in 1952, the AMA organised a competition among physicians for the best-written non-professional pamphlet on personal hygiene.

Surprisingly, none of the official minutes of the AMA included any notion or remark about the creation of a eugenics society or anything about eugenics in general. The official minutes of the meetings of the Board of Directors of the AMA dealt with internal affairs, inspection of physicians’ practice and financial matters. Nor did the bulletin of the AMA refer to the foundation and activities of the HES. However, it published articles by Konstantinos Gardikas, a long-standing eugenicist, and also inspired new converts to eugenics, such as Vasilios Valaoras and Spyros Doxiadis.

8 K. D. Gardikas, “Medical Education in England”, Deltion Iatrikou Syllogou Athinon, 10, 10-12 (October-December 1952), pp. 24-26 [in Greek].
9 V. G. Valaoras, “Our Hygienic Problem. Men and Production: the Fundamental Problem of Greece”, Deltion Iatrikou Syllogou Athinon, 11, 2 (February 1953), pp. 5-6 [in Greek];
Notwithstanding the absence of reference to the HES in the AMA publications and official documents, Athanasios Mantellos, President of the AMA from 1951 to 1953, set up the foundation of the HES under the auspices of the AMA. The first meetings aimed at the foundation of the eugenics society took place at the premises of the AMA in Athens. As Mantellos claimed during the meeting on 29 March 1953,\(^\text{11}\) the HES was going to be part of AMA’s work towards the protection and pursuit of the prosperity of the Greek nation. Obviously, the creation of the eugenics society was a natural outcome of this growing interest in Greece in hygiene and population problems.

**Preliminary Meetings**

The first documented meeting, whose purpose was to discuss the possibility of establishing a eugenics society in Athens, was held on 29 March 1953. A few more meetings followed in 1953, but complete minutes are available for only the first two, held in March and May that year. On 22 May 1953, Maro Kanavarioti, the would-be first secretary of the HES, sent a personal letter to the American demographer Dr. P. K. Whelpton,\(^\text{12}\) who at that time was Director at the Population Division of the United Nations. From this letter, we know that Whelpton had visited Greece in December 1952 and gave a lecture on issues of population and eugenics in Athens. Kanavarioti

---


\(^{11}\) Louros Archive, Proceedings of the Meeting 29 March 1953 [in Greek].

informed Whelpton that his lecture impressed the Greek scientists, particularly members of the Athens Medical Association:

I am glad to report to you some success along the lines started when you were in Greece last Christmas. The group you met in the King George Hotel kept busy all this time in the effort to rise [sic] some public interest in the growing population problem of Greece.\(^{13}\)

Kanavarioti also informed Whelpton of a meeting held on 19 May 1953\(^{14}\) at the Medical Association, attended by 40 Greek scientists, who met to discuss the creation of a eugenics society. She summarised the outcomes thus:

They all agreed to go ahead and create this association whose main scope will be eugenics, as it was related with the general population problem of Greece. However, in view of the novelty of the topic and the opposition anticipated from some minor but talkative groups, it was decided to introduce this association under the name of the “Eugenic Association”.\(^{15}\)

Contrary to what Kanavarioti seemed to believe, eugenics was not new to Greece. As already discussed, during the interwar period, Greek physicians

---

\(^{13}\) Louros Archive, Kanavarioti to Whelpton, 22 May 1953.

\(^{14}\) This was, in fact, the second meeting of the HES. The first one was held on 29 March 1953. See Louros Archive, Proceedings of the Meeting 19 May 1953 (hand-written) [in Greek].

\(^{15}\) Louros Archive, Kanavarioti to Whelpton, 22 May 1953.
and anthropologists adopted eugenic ideas and debated various eugenic programmes for Greece.\textsuperscript{16} Yet, there was no eugenic society in Greece prior to the Second World War. This probably was why Kanavarioti described eugenics as a “new topic” in Greece.

As revealed by the minutes of the first meeting, the founding members were aware of the existing opposition to eugenics, a fact also mentioned by Kanavarioti in her letter. It is, however, unclear whether she had a specific scholarly hostility in mind or perhaps she assumed that the general public would react negatively to the Greek eugenic movement. The reluctance to accept the creation of a eugenics society in Greece seems justified, not least because of the very recent memory of the eugenic policies of Nazi Germany and the Holocaust of the Greek Jews. Moreover, the political and social segregation caused by the Civil War was to be avoided during the post-war period. Given that the Civil War ended in 1949, at the time of the foundation of the HES (1953) internal peace was still fragile. The establishment of a eugenics society in Greece was expected to generate negative reactions, either due to its name, “eugenics”, which took such a negative meaning after the Second World War, or due to the fear that it might support policies deemed to be against political cohesion and in favour of social discrimination.

It is due to Kanavarioti’s letter to Whelpton that we now have details about the formation of the HES. It began with a “provisional committee” whose role was to draft “the society’s charter, in which population problems

\textsuperscript{16} See Chapter 1.
would be clearly stated and included”. The committee reported on its activities at a subsequent meeting two weeks later, when the intention to establish a eugenics society was re-affirmed. Indeed, less than a year after Kanavarioti sent Whelpton the letter, the HES was officially established. As Kanavarioti noted, “this [was] the beginning of a new era in this respect for this part of the world”.

What other information can we infer from this letter? First of all, Whelpton’s visit seemed to have had a particular purpose, namely to raise awareness of the importance of eugenics and population research in Greece. To this effect, Kanavarioti praised Whelpton for his “initiation and interest in starting this movement in Greece”, assuring him that she will continue to inform him “of any new developments in the future and will be extremely indebted to him if he would kindly give her any instructions or comments he may wish to offer”. Ultimately, the creation and the subsequent activity of the HES clearly demonstrated that Whelpton had fulfilled his aims.

From the style and nature of their correspondence it seemed that Kanavarioti knew Whelpton already. She claimed that it was Whelpton who motivated the Greek scientists to establish their own eugenics society, whereas Athanasios Mantellos attributed the initiative to Kanavarioti. Kanavarioti eventually became the contact person between Whelpton and the Greek eugenics movement. Moreover, there is a hand-written letter sent by Kanavarioti to William Vogt, dated 10 March 1953, referring to her visit...
to Stockholm, probably to attend the meeting of the International Planned Parenthood Federation. The letter confirms that Kanavarioti was already in contact with foreign institutions regarding birth control and eugenics.\textsuperscript{23}

Kanavarioti remains an enigmatic figure in the history of post-war Greek eugenics. We know little about her life and activities. As the first secretary of the HES, however, she handled its international and domestic relationships, but at the same time, the statutes of the HES refer to her as a “housewife”. We have no evidence of her studies, although she was clearly educated. There was an indication that she might be a physician in a letter from Evangelos Danopoulos, Professor of Pathology at the University of Athens, where he addressed her as “colleague”.\textsuperscript{24} Alexandros Stavropoulos also suggested that Kanavarioti was a physician.\textsuperscript{25} Moreover, she wrote in excellent English, which was rather unusual for women in Greece during the 1950s. She was also a fellow of the Eugenics Society in Britain.\textsuperscript{26} Supposedly, she came from a wealthy family or spent some time abroad, maybe in the USA, where her daughter lived,\textsuperscript{27} or possibly in the UK.

\textsuperscript{23} Louros Archive, Kanavarioti to Vogt, 10 March 1953.
\textsuperscript{24} Louros Archive, Danopoulos to Kanavarioti, 25 August 1953 [in Greek].
\textsuperscript{25} Alexandre M. Stavropoulos, \textit{Bilan analytique et Clinique du Centre Experimental de Consultations Prémarielles et Conjugales de la Société Hellénique d’Eugénisme a Athènes}, (Louvain: Université Catholique de Louvain, 1970), p. 15 [in French].
\textsuperscript{26} In the list of members of the Eugenics Society London Kanavarioti was listed as: Kanavarioti, Mrs. Maro

1 Maros St. Glyfada, Athens, Greece
Eugenics Society Fellow 1954, 1957
\textsuperscript{27} Lelia K. Washburn, Kanavarioti’s daughter, moved to New York in the late 1940s. She received her Master’s degree in American Studies from Harvard University in 1953 and became a professor of ancient and modern history at the American University, Washington DC. Megan McDonough, “Lelia K. Washburn, history professor”, Obituaries, \textit{The Washington Post} (12 March 2013) [www.washingtonpost.com accessed 23 February 2014].
As mentioned above, the first meeting to organise a eugenics society was held on 19 March 1953\textsuperscript{28} at the premises of the AMA. The explicit goal was to “organise a movement for birth control and eugenics”\textsuperscript{29}. The following Greek scientists were present: Moisis Moisidis, a paediatrician and well-known eugenicist; Nikolaos Drakoulidis, a psychiatrist; Vasilios Valaoras, a physician and biostatistician; Athanasios Mantellos, a physician and President of the Athens Medical Association; Dimosthenis Eleftheriadis, a physician; Georgios Fylaktopoulos, a psychologist; Maria Maslarinou, a physician; and Maro Kanavarioti.

Although there was consensus about the need to introduce eugenic policies in Greece, disagreement persisted over which ones were necessary. Eleftheriadis, for instance, was against the control of reproduction, as it would be against the interest of the nation, because Greece had already experienced low birth rates. Instead, he promoted quantitative reproduction, by which he meant numerous births, rather than fewer and better cared for children.

Valaoras, on the other hand, believed that since mortality rates had decreased, some policies regarding birth-control should be adopted by the state. He thus answered Eleftheriadis’ claim that birth control would lead to low birth rates and affect population growth in Greece. Moisidis also endorsed birth-control and insisted in founding a society responsible for dealing with issues of procreation and eugenics. Moisidis was already a famous eugenicist, having published a number of articles and books on

\textsuperscript{28}Louros Archive, Proceedings of the meeting 29 March 1953 [in Greek].
\textsuperscript{29}Here the exact phrase in Greek was: “Θα έπρεπε να οργανώσουμε κάποια κίνηση για τη ρύθμιση της τεκνοποίησης και την ευγονία” where the word “ευγονία” was chosen instead of the word “ευγονική”. See the section “Greek terminology” in the introduction of this thesis.
eugenics since the beginning of the twentieth century. Moreover, he was aware of the function of similar societies abroad and desired the same for Greece.

Mantellos interpreted eugenics within the framework of state-supported policies aimed at encouraging the birth of healthy children. Furthermore, he identified eugenics not only with the birth of healthy children, but also with the ideal living conditions for raising a child. As the president of the AMA and a physician himself, Mantellos wanted to enlist the new eugenics society’s help for the AMA’s efforts towards the improvement of the living standards and the health of the Greek people. He thus argued that the eugenics society should not limit its activities to birth control propaganda, but be active in many other areas of public health as well.

Equally important, all participants agreed that they wanted to establish a good relationship with the state. Maslarinou was the first to mention a possible negative attitude by the state. As noted earlier, the same view was expressed by Kanavarioti in her letter to Whelpton. Drakoulidis mentioned that the Greek state had not implemented any effective policies to tackle the population problem of the country, therefore it needed to be better informed. The HES could play exactly this role, namely to advise the state in these matters. With regard to political intervention, Drakoulidis recalled an incident that had happened 30 years previously (ca 1923), when he had delivered a speech about the campaign against venereal diseases, but

---

Moisidis’ most famous works were: *Eugenics and Marriage; Eugenics and Puericulture in Ancient Greece. Contribution to the history of Puériculture* (Athens: n. p., 1925) [in Greek]; *Abortion in Ancient Greece: Forensic, Clinical and Pharmacological Study,* (Athens: n. p., 1928) [in Greek]; *Woman: Hygiene of Marriage and Married Woman,* (Alexandria: n. p., 1925) [in Greek].
was interrupted by a policeman who had the power to do so. However, ten years after this incident, in 1932, Drakoulidis attended a conference organised by the Commercial Chamber, when the former Prime Minister, Eleftherios Venizelos, expressed the view that the state should punish “infected people” rather than help them. Drakoulidis used these incidents to argue that if the state authorities did not agree with the new eugenics society, they would not be deterred from restricting its establishment and activity. It would be better, Drakoulidis suggested, to be on good terms with the Greek state.

Fylaktopoulos agreed with Drakoulidis and added that they should also have good relations with the Orthodox Church. The Holy Synod of the Greek Orthodox Church was already informed about the HES’s activities. Although constitutionally not pervasive or authoritative, the Orthodox Church played an important role in the Greek people’s lives. As the dominant religion in Greece, Orthodoxy was influential over daily affairs. According to Fylaktopoulos, the HES should be very well-organised before getting in touch with the state and the Church in order to decide which would be the optimal “form” of the eugenics movement. He estimated that up to two years were required for this purpose. Fylaktopoulos also raised the issue of “national duty”. The members of the HES perceived their activity as their duty to protect the nation. National protectionism has always been part of the eugenics rhetoric even from the early twentieth century. According to Quine, “men of science and medicine saw themselves as the guardians of
the future with a mission to apply their knowledge socially for the common good”.

During this first meeting it was decided that a second, more formal meeting was necessary, in order to begin with the actual organisation of the eugenics society. The themes proposed for discussion were overpopulation, demographic problems and “conscious” reproduction. To this end, four members, Mantellos, Moisidis, Fylaktopoulos and Kanavarioti, formed a temporary committee to undertake the preparation for the second meeting, held on 19 May 1953. Forty-six people attended to discuss and decide on the foundation of a eugenics society. Most of them were physicians and among them there were four women. The official statutes of the new society, however, were signed only by twenty-seven of them.

This meeting was important for two reasons. Firstly, the first Executive Board was formed, with Mantellos as President, Kanavarioti as Secretary, and a temporary committee of seven members, including Spyros Doxiadis, Konstantinos Katsaras, Konstantinos Konstantinidis, Andreas Pournaras and Konstantinos Saroglou — all physicians. Secondly, on this occasion, Mantellos announced that it was Kanavarioti’s idea to establish an organisation for the study of birth problems and population movement in Greece from the scientific, familial, social, financial and national point of view. Members of the AMA and other scientists were impressed by this idea and agreed that such a society would play a vital social and national role in the study and evaluation of findings regarding eugenics and the biological progress of the Greek nation.

32 Louros Archive, Proceedings of the meeting 19 May 1953 [in Greek].
On behalf of the AMA, Mantellos repeated that the attempt to establish a eugenics society in Athens related to its social work; thus, the AMA would offer its premises to house the new society. Furthermore, Mantellos emphasised the necessity of taking specifically oriented actions towards the biological enhancement and the improvement of the living conditions of the Greek nation; adapted, however, to the current socio-economic conditions. During this meeting, Mantellos asked each participant to express his/her views on the subject.

Among those who agreed with the establishment of a eugenics society was Nikolaos Tsampoulas, who proposed the cooperation with similar organisations and the state; the idea of giving the prospective eugenics society the role of a scientific committee intended to advise the government in matters of population eugenics was also shared by Pournaropoulos and Antonopoulos. Konstantinos Katsaras argued that eugenics was a very important issue, particularly for the poor. He added that a eugenics association could aid the Greek state to implement its policies aiming at the “cure of great social injuries”. In addition, Mrs. Chrysoula Ioakimidou claimed that the birth of healthy children was of ultimate importance to the nation. Moreover, Valaoras argued that there were already many governmental and non-governmental associations dealing with the health of pregnant women, mothers and children, although inadequately. If finally established, the eugenics society should more intensely pursue the enlightenment and education of both those intending to marry and the newly-married, because it was at this point that hereditary, biological and environmental factors should be considered and evaluated according to the
quality and quantity of the population. Georgios Gonos imagined a eugenics society which would examine theories and practices of eugenics and adapt them to the Greek reality, aimed at the biological and social prosperity of the Greek people. Adding to Gonos’ perspective, Evangelos Danopoulos mentioned that the new society should assess both positive and negative eugenics and propose viable solutions to demographic problems. Above all, it would be a scientific society intending to educate the public. Another issue raised by Danopoulos was the imitation of foreign examples, namely the work of other European eugenics societies. Georgios Igoumenakis argued that it was all doctors’ duty to deal with problems of eugenics. Telling, the purpose of the new society would be to advise the state about degenerative factors of the population, such as venereal diseases, in order to eradicate them accordingly. Moreover, Ilias Katsaniotis claimed that the country had already suffered from demographic problems, so the problem of eugenics should be profoundly examined. Spyros Doxiadis underlined the advantages of precise public education by the use of statistics. Problems like urbanism and child mortality should be considered as well.

It is also interesting to discuss Dionysios Travlos’ views. Travlos, Professor of Gynaecology at the University of Athens, argued that the eugenics society should pursue achievable goals, meaning that their plans should be adapted to the Greek lifestyle and living standards. He pointed out that eugenicists should opt for a gradual change and not an immediate one, leaving out unrealistic theories. He was the only one who focused on the practical aspects regarding the eugenic society’s potential list of activities,
and proposed a reasonable plan of action from simple to the more difficult tasks.

Mantellos then summarised the opinions of the participants and came to the following conclusions: the eugenics society should be primarily an advisory board, a scientific association, but its ultimate purpose would be to lobby for the implementation of its findings in specific legislative, administrative and social policies. Therefore, its members should be not only physicians, but also sociologists, economists, journalists and mothers. The society thus formed would be named *Hellenic Eugenics Society* (Ελληνική Εταιρεία Ευγονικής).

A group of members, including Kanavarioti, Mantellos, Travlos, Fylakopoulos, Doxiadis, Saroglou, Konstantinidis, Katsaras, Pournaras, Tsampoulas and Moisidis, were asked to prepare a draft of the statutes for the next meeting. Eventually, the statutes had 14 articles and were deposited in the Court of First Instance for legal approval. During the meeting, the aims of the society were also outlined, including: a). the research and study of problems of eugenics in Greece; b). the dissemination of eugenics; and c). the cooperation with the state and non-governmental organisations regarding public education on matters of eugenics. These aims were also outlined in Article 1 of the official statutes.

One of Mantellos’ letters to Kanavarioti reveals that there was another meeting on 26 May 1953, again convened by the AMA.³³ Kanavarioti also mentioned this meeting in her letter to Whelpton. However, there were no findings in N. Louros Archive regarding its proceedings. The

---
³³ Louros Archive, Mantellos to Kanavarioti, 23 May 1953 [in Greek].
only surviving information is that the meeting was organised with the purpose of editing the society’s statutes. In any case, the final text of the statutes was signed on 16 July 1953.  

The Statutes

On 16 July 1953, the final version of the statutes was signed by 27 members, namely:

1. Alivizatos Gerasimos (Professor at the University of Athens)
2. Antonopoulos Dimitrios (Professor at the University of Athens)
3. Valaoras Vasilios (Professor at the University of Athens)
4. Danopoulos Evangelos (Professor at the University of Athens)
5. Doxiadis Spyridon (physician)
6. Igoumenakis Georgios (physician)
7. Kaminopetros Ioannis (physician)
8. Kanavarioti Maro (housewife)
9. Katsaras Konstantinos (physician)
10. Katakouzinos Evangelos (Professor at the University of Athens)
11. Konstantinidis Konstantinos (Professor at the University of Athens)
12. Malikiosis Xenofon (physician)
13. Mantellos Athanasios (physician)
14. Moutoussis Konstantinos (Professor at the University of Athens)
15. Moisidis Moisis (physician)

Louros Archive included the original statute as it was deposited in the Court of First Instance in Athens. It was signed on 16 July 1953 and officially recognised by the Court on 19 April 1954, having the register number 7479/19/4/54. The text of the statute was published alone as a booklet in 1956, three years after the signing of its final version by the members.
The officially approved statutes of the HES consisted of 14 articles. Article 1 referred to the title, base and purpose of the HES. As already mentioned, the official name was “Hellenic Eugenics Society”, based in Athens. Its aims were:

1. The study of issues of eugenics in Greece and their connection to the quality and quantity of the population, on the basis of its genetic factors and the specific environment of the country.

2. The communication of the acquired knowledge from these studies to the government in order to implement national policies regarding
these matters, intended to promote good psychosomatic qualities in the Greek population.

3. In cooperation with the state and other social organisations, to promote public education to avert possible degenerating factors, if and when developed; to advance the harmonious growth of the Greek population within the economic and social potentialities of the country and, finally, to improve the living standards of the Greek family in general.35

The aims of the HES also echoed Leonard Darwin’s suggestions for a successful eugenics society already set out in 1921: “the main aim of eugenical societies should be [...] to formulate a sound eugenic policy based on existing genetic knowledge, and then to promote the translation of every advance in eugenic theory into general practice”.36 In order to achieve its targets, the HES would use every means possible, including meetings and conferences, publications, radio broadcasts and educational films.

Articles 2-5 referred to membership. Members were divided into: honorary (επίτιμα), regular (τακτικά) and corresponding (αντεπιστέλλοντα).

35 The aim for public education on eugenics was firstly set out by Sir Francis Galton, thus it was incorporated in every eugenics society’s plans. The importance of public education was also evident in the first name of the British Eugenics Society, which was “The Eugenics Education Society”. See Francis Galton, Essays in Eugenics (London: The Eugenics Education Society, 1909), pp. 38-40; Nicholas Wright Gillham, A Life of Sir Francis Galton. From African Exploration to the Birth of Eugenics (Oxford: Oxford University Press, 2001); see also Marius Turda, “The First Debates on Eugenics in Hungary, 1910-1918” in Marius Turda and Paul J. Weindling (eds.), Blood and Homeland. Eugenics and Racial Nationalism in Central and Southeast Europe 1900-1940, p. 202; For a comparison of the aims of the Hungarian Eugenics Society with those of the British and German Eugenics Societies, see Marius Turda, Eugenics and Nation in Early 20th Century Hungary (Basingstoke: Palgrave Macmillan, 2014); for the aims of the French Eugenics Society see William H. Schneider, Quality and Quantity. The Quest for Biological Regeneration in Twentieth-Century France (Cambridge: Cambridge University Press, 1990).

Honorary members were people who would significantly contribute to the dissemination of eugenics or aid the work of the HES. They would have the same rights as the regulars, but without the right of voting. They had to be voted in by at least ten regular members. Regular members had to be voted in by at least two members; accept that statute; and pay their subscription. Corresponding members were individuals who lived outside Athens and were voted in by two regular members. If they ever moved to the capital they received the same rights as the regular members.

Article 6 referred to the General Assembly of the HES, which would be responsible for every aspect of the HES’s work. The members would be informed about the General Assembly by written invitation or by a publication in a daily newspaper in Athens at least eight days in advance. During each meeting the voting would be open. It was obligatory that the General Assembly would be arranged every January to discuss financial and other reports about the activities of the HES.

Articles 7-11 referred to administration. Apart from the president, who represented the HES on every occasion, there was an Executive Board, which consisted of the vice-president, the secretary, the treasurer and seven members. Moreover, the specific duties of the president, the secretary and the treasurer were defined in Articles 8-10.

Article 12 referred to revenues. These were: subscriptions and dues of the regular members, as well as their exceptional dues, donations, savings from publications of the HES and any other income.

Article 13 referred to general terms, such as that the statutes were passed by the founding committee of the HES. Every aspect that was not
included in the statute would be undertaken by the General Assembly. The closing of the HES would occur only if a ¾ majority of its members decided it and its belongings would be transferred to the Academy of Athens.

The final article, Article 14, declared that this statute was approved by the General Assembly on 16 July 1953.

The text of the statutes covered every important aspect regarding the activity and functions of the HES and was deposited in the Court of First Instance by the HES’ lawyer, Nikolaos Stampolitis. In light of the solemnity of the statutes, it was obvious that the HES was a union of eminent scientists, sharing the desire to improve the quality and quantity of the Greek people. They did not want to act independently, but in accordance with the Greek legal framework and with the state’s approval.

On 11 December 1953, a common letter was sent to the members of the HES, signed by both Mantellos and Kanavarioti. It provided information regarding the prospective activities of the HES and the preparation of its next steps. According to the contents of that letter, the HES had already managed to form a plan of action, contact similar societies abroad “as it was obliged to do” 37 and deposit the statute in the Court of First Instance for approval. The letter was accompanied by a list of subjects that the HES would focus on, which were agreed by the temporary Executive Board during several meetings. The members were asked to examine the list and propose their possible contribution in relation to any of them, no later than the end of the year. In this way, the Executive Board would be able to make a schedule of conferences and meetings in the following year.

37 Louros Archive, Mantellos to members of the HES, 11 December 1953 [in Greek].
The enclosed list with subjects of research areas were the following:

1. Genetics-eugenics: heredity, hereditary diseases, intelligence tests, premarital certificate
2. Environmental influence: climate, historical facts
3. Population problem: population’s movement tendencies, future predictions, labour force, unemployment, internal population movement
4. Hereditary and financial factors: production, the Greek standard of living (nutrition, residence, education, entertainment, intellectual production etc.)
5. General observations: education, food production, living cost, intellectual creativity
6. The outcomes were destined to the Government, the press and propaganda.

In addition, a General Assembly was to be held the following year in order to examine the response to these subjects and elect a tactical Executive Board. Judging from this letter, the HES did not take any serious actions before its official approval on 19 April 1954. According to the invitation sent on 6 March 1954, the General Assembly meeting held on 22 March 1954. They announced its temporary Executive Board and the regular committee. During the General Assembly, Konstantinos Saroglou delivered a speech about the aims of eugenics and the plans of the HES. The invitation to the meeting of the General Assembly was accompanied by a list of subjects for discussion:

38 Louros Archive, Invitation for the General Assembly, 6 March 1954 [in Greek].
1. what is eugenics?
2. heredity- general terms and important aspects
3. methods of measuring intellectual and psychological traits
4. heredity of intellectual and psychological traits
5. innate causative factors of the deviation from normal, defective, abnormal formation
6. the influence of post-natal factors in the physical, intellectual and psychological development
7. the role of the family and the result of its deprivation
8. the research of eugenics from the statistical point of view
9. foreign legislation and viewpoints about preventive eugenics
10. the Greek legislation about issues associated with eugenics
11. fertility and mortality of the Greek people during the last century
12. quantity and quality of the Greek people during the last century
13. nutrition; the average income per capita
14. foreign studies for proper nutrition
15. population policies

Another invitation dated 31 June 1954 suggests that the General Assembly did not elect the president, vice president, secretary and treasurer of the Executive Board on 22 March. 39 This was the purpose of a new assembly, which was organised on 6 August 1954. The invitation was signed by Mantellos and Kanavarioti. The HES’ leading body was the General Assembly; major decisions about the function and activity of the HES were

39 Louros Archive, Invitation for the meeting of the Executive Board, 31 July 1954 [in Greek].
taken only by the General Assembly. The Executive Board, on the other hand, was the directorial body of the HES; it consisted of the president, the vice-president, the general secretary, the treasurer and seven members.

The first Executive Board (1954-1957) included eminent academics such as its President Nikolaos Louros, Professor of Obstetrics-Gynaecology; Vice-President Georgios Pantazis, Professor of Zoology; Treasurer Spyros Doxiadis, Professor of Paediatrics, Konstantinos Katsaras, a psychiatrist; Konstantinos Konstantinidis, Professor of Psychiatry and Neurology; Athanasios Mantellos, a physician and former President of the Athens Medical Association; Panayiotis Panayiotou, Professor of Obstetrics-Gynaecology; Konstantinos Saroglou, Medical Director of the PIKPA; Georgios Fylaktopoulos, Professor at Athens College; Konstantinos Choremis, Professor of Paediatrics, with Maro Kanavarioti acting as secretary. All of them played a crucial role in the dissemination of eugenics in post-war Greece, when eugenics was no longer attached to physical anthropology, but to other disciplines, such as gynaecology and paediatrics.

The Executive Board directed the activities of HES on all levels; namely the organisation of the meetings, the sending of invitations, the contact with domestic and foreign organisations and institutions and many more duties. The Executive Board prepared the topics of discussion to put forward to the General Assembly, including the annual budget. The composition of the Executive Board changed every two to three years; however only some of the members were replaced, not its entire membership.

By the time of the election of the first Executive Board, a new “era” began in the history of the HES, primarily due to the prestigious figure of
Louros and Kanavarioti’s impressive work. As far as other meetings are concerned, there is only indirect information taken either by letters and notes of the participants or from the official statutes. By 1955 there had been two crucial changes; firstly Louros succeeded Mantellos as President; and secondly the house of the HES was transferred to Alexandra Maternity Hospital. In fact the HES was then totally disassociated from the AMA. Mantellos was President of both the AMA and the HES until 1954, when he was appointed General Director of the Ministry of Social Care and abandoned both posts. However he remained a member of the Executive Board of the HES.

The statutes were officially approved by the Greek state on 19 April 1954, but the new eugenics society was only announced to the general public in the beginning of 1955, when a letter was sent to the popular daily newspaper *Ta Nea* to announce its founding. The announcement read as follows:

**Foundation of the Hellenic Eugenics Society**

We announce the foundation of Hellenic Eugenics Society housed in Athens under the presidency of Professor at the University of Athens N. Louros. The Executive Board consists S. Doxiadis, Lecturer at the University, K. Katsaras, physician-neurologist, K. Konstantinidis, Professor at the University, A. Mantellos, General Director of the Ministry of Social Care, P. Panayiotou and G. Pantazis, both Professors at the University, G. Fylaktopoulos, Professor at Athens College, K. Choremis,
Professor at the University and Mrs. M. Kanavarioti, Secretary of the Society.\textsuperscript{40}

The notice was signed by Nikolaos Louros, the new president, and Kanavarioti, the secretary. Kanavarioti remained in this post until 1959, when Marios Raphael succeeded her.

Another publication in the daily press was an announcement signed by the lawyer representing the HES, Nikolaos Stampolitis, in the newspaper \textit{Apogeymatini} in March 1955. The announcement read as follow:

The First Court of Instance of Athens, by its decision No. 14367, approved the foundation of the union under the title Hellenic Eugenics Society, housed in Athens, having as purpose the research of issues of eugenics in Greece on the basis of hereditary factors, aiming at the governmental formulation of national policies for the sustenance and development of the psychosomatic characteristics of the Greek people and the cooperation with the state and social organisations for the enlightenment of the public regarding the aversion of degenerative factors.\textsuperscript{41}

While the first meetings, which aimed at the foundation of a eugenics society in Greece, took place in the beginning of 1953, its official

\textsuperscript{40} Louros Archive, Hellenic Eugenics Society to newspaper \textit{Ta Nea}, 25 January 1955 [in Greek].
\textsuperscript{41} Nikolaos Stampolitis, “Union recognition: Hellenic Eugenics Society”, \textit{Apogeymatini} (1 March 1955), p. 4 [in Greek].
establishment came a year later. In April 1954 its statutes were approved by the Greek state and then it became more active. However, the pivotal point was the elections of the Executive Board in August 1954, when a new period followed, under the leadership of Louros, which will be examined next.
Chapter 3

The Establishment of the Hellenic Eugenics Society and its Activities in Greece

Louros' Public Lecture: “Eugenics: An Appeal.”

By 1954 the HES was receiving more acknowledgement from its international contacts than from its own public in Greece. However, this was soon to change. Some of the crucial events which took place during 1954 were as follows: in April the group’s statutes were officially approved, in May-June Kanavarioti visited Britain, in August Louros was elected President of the HES, and the World Conference on Population took place in Rome in September. Additionally, the Alexandra Maternity Hospital was fully established in Athens in December. In coming years the Greek eugenics movement and family planning campaign would be associated with that institution. The IPPF’s experts visited the Alexandra Maternity Hospital and praised its innovative work and modern infrastructure. During the same period, Louros was simultaneously an active obstetrician and gynaecologist, Professor of Obstetrics and Gynaecology at the Medical School at the University of Athens, Scientific Director of Alexandra Maternity Hospital and President of the HES. He thus had all the available means to disseminate eugenics in theory and practice. Furthermore, by the


end of 1954 the network including the HES, the IPPF and the British Eugenics Society was well-established. There were many meetings and interactions among people belonging to these institutions. International relationships also helped the HES to expand its work locally, too.

A critical moment was Louros’ first public lecture on eugenics in front of a Greek audience, which inaugurated the HES’s public activities in the country. The content of the lecture was based on Vera Houghton’s recommendations, such as the works of C. P. Blacker; Paul Bloomfield and Cedric Carter. The available information on eugenics was adapted to the Greek social, political and medical model. Louros began the lecture by giving a definition of eugenics to the allegedly ignorant audience. He said thus:

Eugenics (ευγονική) is the science which deals with the matter of “good birth” (ευγονία); i.e. with the factors that improve the qualities of a race and the factors that develop these qualities to the highest level.

He attributed the above definition to Galton, of course, whom he characterised as “knowledgeable of Greece” (ελληνομαθής). He argued that eugenic practices in Ancient Greece revealed that the human need for racial

---

3 Louros Archive, Houghton to Kanavarioti, 11 October 1954.
5 Paul Bloomfield, “The Eugenics of the Utopians” (paper read to the Eugenics Society in September 1948).
7 Louros, “Eugenics. An Appeal”, p. 289; see also the section “Greek terminology” in the introduction of this thesis.
improvement was not an innovative theory of the twentieth century. On the contrary, the self-preservation instinct dictated that humans pursue a better life. The choice of spouse itself stems from the human inclination to improve, because people seek the most suitable “partner in reproduction”. What Louros was willing to say was that subconsciously people choose a partner not solely based on sentiment, but also because of his/her potential of becoming a good mother or father, both genetically and intellectually. Louros interpreted this attitude as a manifestation of eugenics which was intrinsic to human nature. The combination of hereditary predisposition, which is the genotype, and the result of the environmental influence on the genotype, which is the phenotype, was essential to eugenics. Eugenics could be achieved either by finding the optimal combination of these two parameters or by eliminating the harmful genotype. Louros explained that human should opt for the proper choice of spouses in conjunction with the amelioration of living conditions to achieve eugenics. Louros did not adopt a genetically deterministic approach, but acknowledged the environmental influence as equal factor to achieving the goal of eugenics. This view was shared by eugenicists at the time, as was mirrored in the HES conferences. Medical professionals, biologists, sociologists and economists discussed the multifactorial nature of human evolution. Living conditions, natural environment, social norms and education were some of the factors which influenced humans and affected their development, intelligence and behaviour.

However, eugenics was not an easy task to accomplish because

---

8 See chapters 6 and 7.
many obstacles could render this process impossible. The greater part of the lecture was devoted to the restraining factors of eugenics application. These were categorised as moral, medical, administrative, socio-economic and political obstacles. Moral issues included inappropriate marriages, given that few people were suitable for marriage and reproduction. Louros acknowledged a gradual “phenotypic decadence” in the society of his time by a wide moral degeneration caused by alcoholism, prostitution, drug addiction, lack of respect and criminality which shook the foundations of society and democracy.

Medical problems were equally important and very difficult to deal with. The core problem was the difficulty with categorising people based on their suitability for reproduction due to each individual’s unique combination of traits. Therefore, any recommendation for “suitability for procreation” was neither achievable nor effective. Furthermore, there were as many scientific difficulties for birth control and the limitation of large families as there were for the diagnosis and cure of sterility. The medical resources were relatively poor at that time and people were reluctant to trust them. Louros agreed with Soranus of Ephesus’9 proverb that: “Non conception is preferable to abortion”.10 However, he argued that “non conception” should not be understood as forced sterilisation. He was extremely critical of both forced sterilisation and abortion.

In the medical context, Louros regarded preventive medicine as absolutely necessary for every citizen. He believed that the profit from the limitation of diseases would outweigh the additional investment in the

---

9 Greek physician, ca. 98-138 AD.
10 In Greek: “Το μη συλλάβειν πολύ μάλλον συμφέρει τον φθείρειν”.

95
Louros also argued that one of the most important socio-economic problems was the disequilibrium between the small and wealthy families, in contrast to the large and poor ones. Although wealthy children were not necessarily more competent, they had the available means to become so. However, he argued that often the leaders of their society came from poor backgrounds. In this context, Malthus’ population theory was mentioned and supported by Louros, insofar as to social protection from the negative consequences of overpopulation. The issue of Greek demography could not be overridden by Louros. According to the biostatistician Valaoras, the death rate had fallen in Greece after the Second World War, resulting in an augmentation of the population. Louros briefly claimed that if the Greek population continued to increase, the Greek economy would be unable to sustain it. At the same time, however, birth control was forbidden in Greece by religious and political bodies.

Despite these obstacles, Louros urged the immediate need for eugenic policies. This lecture gave him the opportunity to present his eugenic viewpoint and to try to convince the audience that eugenics was essential for Greek society. Some possible ways to overcome the difficulties of the application of eugenic policies were the study of heredity, the implementation of methods for mental and psychological calculation of the prospective parents, the study of deviation from normality, the study of the environmental influence, biostatistics, geo-physics, financial eugenic views, and evaluation of the demographic problem. The crucial issue was the influence of the genotype. According to Louros the optimal solution was
preventing parents with defective genes from reproduction. In addition, the improvement of nutrition, housing and education would improve the phenotype, the manifestation of the genotype. Last but not least, the family planning techniques should be implemented in order to avoid large families and overpopulation.

In conclusion, Louros admitted that every social change could only be realised by political initiatives. The newly-founded Hellenic Eugenics Society would undertake the responsibility for informing and educating the political leaders about the science of eugenics. Louros called the audience to help the HES’ efforts by participating in its struggle for eugenics research, education and ultimately, human survival.

People from the IPPF showed particular interest in the success of this lecture, after Kanavarioti’s report on 14 March 1955. Among the first who responded was Rotha Peers:

I was thrilled to hear from Mrs. Houghton what a successful meeting you held in Greece. I think it is absolutely marvellous that you should have had as large an audience as 800 at this first meeting, and hope that from this you will have aroused interest and enthusiasm for the work.\footnote{11}

Houghton mostly praised Kanavarioti’s work on preparing Louros’ lecture:

\footnote{11} Louros Archive, Peers to Kanavarioti, 24 March 1955.
You must be feeling greatly encouraged by the way things are going—and it is all due to you. Without your inspiration and persistence it would still have been only a thought in people’s mind.\(^\text{12}\)

Louros’ successful lecture became a subject of discussion for many people belonging to the circles of the IPPF. Apart from Houghton and Peers, Clarence J. Gamble commented on it too. Houghton urged Kanavarioti to inform Dorothy Brush, the editor of the journal *Around the World News on Population and Birth Control*, of the success of Louros’ lecture: “I hope you wrote and told Dorothy of these exciting developments, because they are just the sort of things she wants for her international bulletin”.\(^\text{13}\) Indeed, Brush included a section for Greece in the journal as follows:

The Hellenic Eugenics Society, located in Athens, recently made its first appearance in public with three important lectures. This contribution with the pioneer organisation met with an unexpectedly wide response: every seat was filled in Parnassus Hall, the largest auditorium in Athens. The Press wrote articles about each lecture.

The President, Dr. Louros, spoke on “Eugenics, An Appeal” and emphasised the need for family planning. An exhibition of the film “Human reproduction” followed. The next two lectures

\(^{12}\) Louros Archive, Houghton to Kanavarioti, 23 April 1955.

\(^{13}\) Ibid.
were given by Dr. Pantazis who is Vice-President of the society and by Dr. Doxiadis.

We congratulate Mrs. Maro Kanavarioti and her associates who have worked patiently and persistently to bring the knowledge and recognition of planned parenthood to Greece.14

In Greece, Georgios Adamopoulos, an Astronomer and Director of the Astronomical Institute of Athens sent a congratulatory letter to Louros right after the lecture. He began with the complimentary comment that “It was about time that an expert discussed in Greece the imminent danger of human exhaustion, as unity and as species, caused by the uncontrolled population increase”.15

Adamopoulos continued with a brief analysis of the population problem and Malthus’ theory. He considered the eugenic view of the creation of genetically perfect man as completely utopian; simultaneously suggesting the constraint of uncontrollable population growth as the only solution. Finally, he asked Louros to include him in the HES as a regular member. Louros positively responded three days later.16

In addition, Michael Goutos, Vice President of the Greek Social Insurance Institution (IKA), was delighted by Louros’ lecture and suggested the publication of the text in the, then new, journal of the IKA. It was also intended that the lecture would be translated in English by the Department of Foreign Publishing at Yale University and distributed in the USA too.

15 Louros Archive, Adamopoulos to Louros, 16 March 1955 [in Greek].
16 Louros Archive, Louros to Adamopoulos, 19 March 1955 [in Greek].
Goutos also suggested the inclusion of the HES, represented by Maro Kanavarioti, in a newly-formed Union for the Study of Social Protection Issues (Σωματείο Μελέτης των Θεμάτων Κοινωνικής Προστασίας).\textsuperscript{17} Moreover, he asked Louros’ permission to publish his paper given in the Obstetrics and Gynaecology Conference in Geneva in July 1954. In response, Louros agreed to the publication of his papers and Kanavarioti’s participation in the Union for the Study of Social Protection Issues.\textsuperscript{18}

After the success of the lecture, Louros opened up the HES to others who were not physicians, inviting important people outside the medical field to join the HES as a way to popularise its work. Among them were: S. Kalliafas, working at the Laboratory of Experimental Pedagogy;\textsuperscript{19} I. Karmiris, Royal representative at the Holy Synod of the Greek Orthodox Church;\textsuperscript{20} and Panos Anagnostopoulos, Professor of Horticulture at the Higher School of Agriculture.\textsuperscript{21}

The Relationship of the HES with Other Greek Institutions

The HES gradually developed connections with institutions, organisations, unions and associations to promote the dissemination of eugenics in Greece. Indeed, the HES shared members and ideals with similar Greek associations. Many members of the HES held important political, social and professional posts that made those connections much easier to be accomplished.

\textsuperscript{17} Louros Archive, Goutos to Louros (personal letter), n. d., [in Greek].
\textsuperscript{18} Louros Archive, Louros to Goutos, 13 May 1955 [in Greek].
\textsuperscript{19} Louros Archive, Kalliafas to Louros, 10 July 1955 [in Greek].
\textsuperscript{20} Louros Archive, Karmiris to Louros, 4 August 1955 [in Greek].
\textsuperscript{21} Louros Archive, Anagnostopoulos to Louros, 4 August 1955 [in Greek].
Here are some examples.

1. The Patriotic Institution of Social Welfare and Awareness (PIKPA) (Πατριωτικό Ίδρυμα Κοινωνικής Πρόνοιας και Αντιλήψεως, ΠΙΚΠΑ)

The PIKPA was one of the leading institutions in Greece that played an important role in the protection of mothers and children. Initially, it was privately funded and its services were provided by volunteers for free. They performed a large number of medical examinations and vaccinations on Greek children. During the last period of the Liberal government (1928-1932) the Greek state began to contribute funding to its activities. The PIKPA had branches in many different regions, both in urban and rural Greece.

Konstantinos Saroglou, the Medical Director of the PIKPA and confidant of Lina Tsaldaris was one of the very active, founding members of the HES and the National Union for Sanitary Education. In particular he was a member of the Executive Board of the HES from 1954 to 1967.\(^{22}\) The HES admired the work of the PIKPA and cooperated with it. Saroglou, of course, was the link between the two.

Lina Tsaldaris, President of the PIKPA, participated in the first meeting of the HES at the AMA but did not attend the following meetings because of her large workload, particularly during the period when she was Minister of Social Care, from 29 February 1956 until 5 March 1958. However, Tsaldaris was on the list of the IPPF Honorary Associates,

representing Greece together with Louros. Tsaldaris was a politically and socially influential person, with great experience in matters of maternal and infant care. She became the first female minister in the Greek Parliament. She participated in numerous conferences, both in Greece and abroad, regarding the protection of women and children; later she became a member of the Greek Delegation to the UN and officer liaison with UNICEF for Greece. By the 1960s PIKPA was a well-organised and functioning institution under the leadership of Tsaldaris. The PIKPA was the instrument through which she organised her social work. In one of her letters to the UN she described the PIKPA as “the only official body for infantile and maternal protection in Greece”\(^\text{23}\) and summarised its activities in two categories:

1. Assistance and protection for the family by:
   1.1. Children camps
   1.2. Centres for milk distribution for preschool children and pregnant women
   1.3. Distribution of baby linen, clothes and shoes
   1.4. Material aid in case of emergency
   1.5. Family investments
   1.6. Adoptions, sponsorships

2. Medical prevention and services for maternal and child hygiene by:
   2.1. Prenatal consultation
   2.2. Consultation for proper nutrition

2.3. Children’s camps

2.4. Hygienic centres, dispensaries, polyclinics, mobile dental clinics for children

2.5. Holiday destinations

2.6. Preventoria, sanatoriums, rehabilitation centres for disabled children

2.7. Training of qualified personnel

Tsaldaris assured the UN that the PIKPA was a respectful organisation which needed more buildings to host its services and renovation of some buildings destroyed by the wars and the German occupation. Indeed, the PIKPA was a unique institution for child and maternal protection and care. Apart from Tsaldaris who headed the institution and disseminated its activities both abroad and locally, most of the people who worked there were both volunteers and high-qualified, such as Dr. Tsakos and Mrs. Thalia Voyla.

2. The National Union of Sanitary Education NUSE (Εθνικός Σύνδεσμος Υγιεινολογικής Διαπαιδαγώγησης, ΕΣΥΔ)

The NUSE was the representative of the Union Internationale d’Education Sanitaire, a non-governmental organisation founded in France in 1951.24

The NUSE was founded in 1954.25 Georgios Pangalos, Professor of Hygiene and President of the NUSE, sent a personal letter to Lina Tsaldaris informing her of the approval that the NUSE gained from the Court of First Instance and the text of its statutes. 26 The main purpose of the letter was to ask her about any suggestions for possible, prospective members for the NUSE. He specified that it was not necessary for them to be physicians. Pangalos also mentioned that the announcement of the foundation of the NUSE was included in the Bulletin de Liaison et d’Information27 published by the Union Internationale pour l’Éducation Sanitaire de la Population, whose Greek representative then became the NUSE. While the HES was primarily associated with the USA and the UK, the NUSE was connected with a French, and later international, institution.

Statutes

The text of the statutes included the following articles which defined the aims and composition of the NUSE:28

Article 1: The base of the NUSE was located at the School of Hygiene, located in 196, Alexandra Avenue, Athens.

Article 2: Aims

---

25 National Union of Hygienic Education, 58 Lectures on Hygiene (Athens: Yiotis, 1960). This booklet was part of the series: “For You and Your child” (Για σας και το παιδί σας) published by the industry of child nutrition “Yotis” (Γιώτης) which is still the greatest industry of its kind in Greece.

26 Lina Tsaldaris Archive, 7/4/3/1, Pangalos to Tsaldaris, 1954 [in Greek]; the Statutes of the NUSE were approved by the approval n. 11814/1954 call of the Court of First Instance of Athens.


28 Lina Tsaldaris Archive, 7/4/2/2: The Statutes of the National Union of Sanitary Education [in Greek].
1. The public dissemination of hygienic knowledge and preventive medicine in cooperation with public services and private organisations.

2. The coordination of every private undertaking toward this target.

3. Making the NUSE equivalent to other countries’ representatives of the Union Internationale d’ Education Sanitaire.

Article 3: The NUSE does not belong to any of the public services but includes members who work in the public sector, members who work in the private sector and individuals who are interested in its aims.

Article 4: On 4 March and 19 April 1954 these statutes were signed by the founding members. Articles 5-14 included issues of management and the synthesis of the Executive Board. The statutes were officially deposited in the Court of First Instance on 5 June 1954.

Membership

The list of the founding members was the following:

- G. Pangalos, Professor at the School of Hygiene
- L. Tsaldaris, President of the PIKPA
- N. Michailidis, Professor emeritus at the University of Athens
- K. Moutoussis, Professor at the University of Athens
- Tr. Triantafyllou, General Manager at the Ministry of Social Welfare
- Gr. Livadas, Professor at the School of Hygiene
- Chr. Floras, Professor at the School of Hygiene
- Gr. Chatzivasiliou, Professor at the University of Thessaloniki
• Al. Clonizakis, Director of Studies at the Military Medical School (Στρατιωτική Ιατρική Σχολή)
• K. Charitakis, Professor at the University of Thessaloniki
• N. Louros, Professor of Obstetrics and Gynaecology at the University of Athens
• K. Choremis, Professor of Paediatrics at the University of Athens
• P. Fotinos, Professor at the University of Athens
• G. Krimpas, President of the Pan-Hellenic Medical Association (Πανελλήνιος Ιατρικός Σύλλογος)
• Ar. Floros, President of the Athens Medical Association (Ιατρικός Σύλλογος Αθηνών)
• Per. Kalogirou, Professor at the University of Athens
• A. Papadakis, Director of the School of Hygiene
• Th. Katsakos, Director of the Attica Sanitary Centre (Υγειονομικό Κέντρο Αττικής)
• N. Konstantoulis, President of the Union of the Greek Hygienologists (Σύλλογος Ελλήνων Υγιεινολόγων)
• P. Velissarios, Director of the Technical Services at the Ministry of Social Welfare
• E. Patrinelli, Chief Nurse at the “Evangelismos” hospital, Athens
• E. Petralia, President of the Union of Qualified Registered Nurses (Σύλλογος Διπλωματούχων Αδελφών Νοσοκόμων)
• O. Mantellou, President of the Union of Qualified Visiting Nurses (Σύλλογος Διπλωματούχων Επισκεπτριών Νοσοκόμων)
• Ev. Apostolaki, Director of the School for Visiting Nurses (Σχολή Επισκεπτριών Νοσοκόμων)
• Ch. Vogiatzaki, Departmental Director of the Marika Iliadi Maternity Hospital
• A. Voyoni, Departmental Director of the Alexandra Maternity Hospital
• M. Eleftheriou, Director of the School of Nurses of the National Red Cross (Σχολή Νοσοκόμων του Ελληνικού Ερυθρού Σταυρού)
• Z. Ioannidou, Departmental Director at the Hellenic Pasteur Institute (Ελληνικό Ινστιτούτο Παστέρ)
• M. Goutos, President of the Board of Directors of the Children’s Hospital, Athens
• P. Kapalas, Director of the Educational Service of the Ministry of Welfare (Υπηρεσία Διαφωτίσεως του Υπουργείου Κοινωνικής Πρόνοιας)
• N. Kiparissopoulos, Director of the Sanitary Centre of Piraeus (Υγειονομικό Κέντρο Πειραιώς)
• N. Kontovrakis, Lawyer
• V. Malamos, Professor at the School of Medicine, University of Athens
In 1952, the innovative service of the Ministry of Social Welfare for public education in matters of hygiene and preventive medicine, which was discussed in the previous chapter, gave physicians and healthcare professionals the opportunity to develop activities under the auspices of the Ministry. The initiative of the Ministry provided the potential groups and unions of physicians with the advantage of working in collaboration with a service of the state. Eminent physicians of the time chose to take advantage of the law and disseminate their ideas about social welfare, social hygiene, preventive medicine and eugenics. In just a few years a network of academics and health professionals who aimed at the amelioration of Greek society was created with the support of the state. It was in this context that both the NUSE and HES were established in the early 1950s. Both lists of members included not only eminent physicians and medical academics, but also people who worked at public institutions such as the PIKPA, the School of Hygiene, the university hospitals, Alexandra Maternity Hospital and Marika Iliadi Maternity Hospital, various Schools of Nurses, and the departments of the Ministry of Social Welfare. Notably, the director of the newly-founded Education Service of the Ministry of Social Welfare, Kapalas, was also founding member of the NUSE.
The list of the founding members reveals important information about the relationship between the NUSE and the HES, but also about the overall situation in Greece regarding hygiene and eugenics. First of all, the NUSE was established in approximately the same time as the HES. Secondly, ten out of thirty-five founding members were also members of the HES. Remarkably, leading members of the HES, such as Louros, Moutoussis, Choremis, Papadakis and Goutos, participated in both institutions. Most importantly, both institutions aimed at the public dissemination of issues of hygiene, preventive medicine and well-being. The connection between the two institutions culminated in the organisation of joint public discussions from 1955 to 1956.

Furthermore, the membership in the NUSE of ten women should not be overlooked, all of them holding leading positions, with Tsaldaris having the uppermost at the directorship of the PIKPA. Both the NUSE and the HES had female members and often invited female scholars to participate in their meetings. Added to this, the HES was represented abroad by Maro Kanavarioti for many years. Medical circles, albeit male-dominant, included many women. These women, not only were not underestimated by their colleagues, but were recognised as valuable contributors to the progress of medicine in Greece. Furthermore, Louros always mentioned the importance of the female nurses in gynaecologist’s work and their unique ability to reach female patients.

29 These were: Lina Tsaldaris; Konstantinos Moutoussis, Konstantinos Charitakis, Nikolaos Louros, Konstantinos Choremis, Georgios Krimpas, Antonios Papadakis, Michael Goutos, Vasilios Malamos and Gerasimos Alivizatos.
Propaganda

As was mentioned in the NUSE’s publications, its purpose was the “public propaganda of crucial elements of hygiene and preventive medicine”. In this context, they persuaded the National Radio Institution (Εθνικό Ίδρυμα Ραδιοφωνίας) to record more than fifty short lectures on various issues of hygiene. In a period when television was essentially non-existent in Greece, the majority of the public were radio-listeners and broadcasting was the most popular medium of information. Indeed, these lectures were very informative and simple, in order to be understood by every listener. Among the speakers were members of the HES, such as Georgios Pournaropoulos and Theodoros Zavitsanos, who talked about school hygiene and accidents respectively.

However, most of the lectures were delivered by the NUSE’s president, Georgios Pangalos. He paid particular attention to the prevention of diseases, such as tuberculosis, and did not hesitate to say that the transmission of diseases not only was a moral sin, but also a crime. He called patients “useless and dangerous individuals, who were at the same time a financial burden to society”.\footnote{National Union of Hygienic Education, 58 Lectures on Hygiene, pp. 10-11.} He also claimed that those who suffered from diabetes should avoid procreation.

His most radical views on eugenics were revealed in his last recorded speech, under the title “Heredity”, which was eventually not approved by the National Radio Institution, and therefore, never broadcasted on air but was published. First of all, Pangalos considered the introduction
of premarital health certificate to be useless, because most of the people
were not scrupulous enough to decide not to procreate should their partner
be unable to have healthy children. In this context, he attacked mothers with
tuberculosis and alcoholic fathers, whose attitude was equated with
infanticide. Moreover, he referred to the science of eugenics, which was the
most appropriate way to study how to avoid defective descendants. Pangalos
argued that people should be educated by eugenic studies, because public
health could only be protected by proper education. Moreover, Pangalos was
in favour of the compulsory sterilisation of criminals, drug addicts, perverts,
epileptics and psychopaths. He supported state intervention in the
sterilisation of these people using painless medical procedures without
considering legal implications. According to Pangalos, individual freedom
should be sacrificed for the sake of society.

Pangalos strongly supported extreme eugenic measures, contrary
to most members of the HES, who were against forced sterilisation.
However, there were a series of lectures, organised by both the NUSE and
the HES, which took place at the premises of the Christian Youth Union
(Χριστιανική Ένωση Νέων-ΧΕΝ) in Athens.
The original invitations to those lectures were:

- “Protection of Motherhood”, delivered by Nikolaos Louros (18
  November 1955)
- “Heredity and Eugenics of Psychological Illnesses”, delivered by
  Konstantinos Konstantinidis (16 December 1955)
- “Practical Application of Heredity”, delivered by Panayiotis
  Panayiotou (27 January 1956)
• “The Psychological Needs of Newborns”, delivered by Spyros Doxiadis (24 February 1956)
• “Eugenics in Flora”, delivered by Dimitrios Panos (30 March 1956)
• “General Principles of Eugenics”, delivered by Konstantinos Saroglou (20 April 1956)\(^\text{32}\)

By the time UNESCO organised a conference on Dissemination of Science convened in Madrid, 19-22 October 1955, Georgios Pantazis, a Greek professor of Biology at the University of Athens and Vice-President of the HES, represented Greece. There, he referred to the HES’ role in the popularisation of science in the country. Among his recommendations for ways of disseminating science, such as broadcasting, newspapers and periodicals, he wrote: “Certain specialist [private] societies, such as the Society for Health Education and the Eugenics Society, organise lectures of a more technical character for the general public”.\(^\text{33}\) There, Pantazis clearly meant the NUSE and the HES. Although there is no evidence for the continuation of the collaboration between the NUSE and the HES, in the following years, the HES continued to organise conferences and symposia annually until the 1980s.

3. The HES and Greek politics

The HES managed to be linked with politics on many occasions and in different ways. The meaning of the phrase “relation with politics” is defined

\(^{32}\) Louros Archive, file: “Invitations” [in Greek].
as any linkage with the government in power, the Royal Family of Greece and state authorities in general.

From the very beginning of its foundation, the HES aimed at cooperation with the state. This was justified by the reference to the relationship with the state among the aims in the official statute of the HES. The ultimate target of the HES’s activities was to transform its studies and outcomes to legislation. As was referred during meetings and conferences, the work of the HES was geared, on the one hand, towards the dissemination of eugenics to the public, and on the other hand, to the lobbying of each government to implement eugenic policies. As Valaoras underlined in the first meeting, governmental action for the elevation of health level and motherhood protection were inadequate because government officials were unaware of eugenics. Thus, the purpose of the HES was to inform the state about eugenics. Hence, there were members of the HES, who were ministers or secretaries in the Ministry of Health and/or Education or they were familiar with members of the government or the Royal Family.

First of all, Athanasios Mantellos, who was the first president of the HES, became General Director at the Ministry of Social Care. Here, it has to be repeated that the Ministry of Health changed to a variety of names, such as Ministry of Social Care; Health; Health and Hygiene; Hygiene, Social Care and Perception; State Hygiene and Perception, remaining the same service throughout, however.

Nikolaos Louros was one of the most politically involved presidents, even if he declared himself as “politically neutral”. In fact, his friendship
with politicians and the Royal Family is attributed to his father. Louros’ father, Konstantinos Louros, was a prominent gynaecologist and the gynaecologist of the Royal Family; therefore his son had connections with them from an early age. In his autobiographical book Yesterday, Louros referred to the summers he spent in Tatoi, the Royal residence as well as his familial excursions in Kifisia, a suburb of Athens, where most of the politicians and scholars lived. Louros’ father was also deputy of the People’s Party under Panayis Tsaldaris. Moreover, he was Secretary at the Ministry of Health during the short period of a month from 10 October 1935 until 30 November 1935. Following his father’s steps Louros became a respected obstetrician and gynaecologist and succeeded him in the service to the Royal Family.

In 1939, Nikolaos Louros and Kurt Warnerkros assisted the birth of the future Queen Sophia of Spain and in 1940 the birth of her brother, future King Konstantinos of Greece, receiving medals from the Royal Family on both occasions. In turn, a representative of the Royal family, such as Prince Peter and Prince Michael, often attended conferences of the HES during Louros’ presidency. Regarding governmental positions, Louros participated on two very important state committees during the Government of National Unity (1974) under Prime Minister Konstantinos Karamanlis. There was a Committee for Education, where Achilleas Gerokostopoulos was the president and Louros was one of the six members. Furthermore, there was the Committee for Matters of Social Insurance, where Louros was the

---

President.\textsuperscript{35} At that time he had already published his work on the sanitarian organisation of the country.\textsuperscript{36} Moreover, Louros became Minister of Education for a short period between July and November 1974 and a member of the National Hygiene Council.

Gerasimos Alivizatos, a member of the HES, held the post of Secretary in the Ministry of Health from 5 August 1936 until 12 December 1938. Moreover, Lina Tsaldaris was Minister of Social Care during the period from 29 February 1956 to 5 March 1958.

During the government of Konstantinos Karamanlis, Spyros Doxiadis, one of the founding members of the HES and its president in 1973, was involved in politics twice. In the first instance, he became Minister of Social Services for only two months (October-November 1974). A few years later he became Minister of Health (November 1977-October 1981). Given that the Ministry of Health took several names during twentieth century, but remaining the same service, Doxiadis was Minister of Health for the longest time period, in total 48 months and 5 days.\textsuperscript{37}

Apostolos Doxiadis, father of Spyros Doxiadis, a eugenicist and himself also Minister of Health from 17 September 1922 until 12 March 1924 and Secretary at the same Ministry from 25 August 1928 until 7 June 1929. Generally, the Doxiadis family was renowned in Greece due to the professional success of its members such as the aforementioned and the internationally famous architect and urban planner Konstantinos Doxiadis.

\textsuperscript{35} Louros, \textit{Yesterday}, p. 304.
\textsuperscript{36} Nikolaos Louros, \textit{The Health System of the Country: A Plan} (Athens: K. Papadogiannis, 1945) [in Greek].
\textsuperscript{37} Theodoros Dardavesis, “The Historical Course of the Ministry of Health in Greece (1833-1981)”, p. 58.

Another member, Evangelos Papanoutsos, a theologian and pedagogue, was appointed General Director in the Ministry of Education from 1944 to 1946. Later, in 1950, he became General Secretary in the same Ministry and he also held the same position in 1963-1964.

The official political posts held by members of the HES and most notably by its presidents are only examples of their wider involvement in the politics of the country. Furthermore, politicians participated in the conferences organised by the HES by delivering papers or as members of the audience. Due to the fact that the majority of the members were scholars, academics and renowned physicians, their contact with the socio-political elite of the country was guaranteed.

A Short Period of Decline

The minutes of the gathering of the Executive Board in January 1958 revealed the uneasy situation of the HES during the period 1957-1958. First of all Louros announced Kanavarioti’s succession by Marios Raphael. This marked a transitional period, when the Executive Board had to be re-organised after its first synthesis during the period 1954-1957. Kanavarioti was the key person during the first three years of the HES, but she resigned and left for the USA, probably due to familial reasons. Louros took over

---

38 Benaki Museum, Konstantinos A. Doxiadis Archive, documents ref. codes 7579, 7578, 7577, 7576, 7575, 7574, 7573, 7570, 17184; See details on his work in Constantinos Doxiadis; [www.doxiadis.org accessed 12 September 2011].

39 Louros Archive, Minutes of the Executive Board’s meeting, Alexandra Maternity Hospital, Athens 23 January 1958 [in Greek].
handling both domestic and international affairs. He expressed to the rest of the members his disappointment about the small progress the HES had made during 1957 and the indifference of members in dealing with eugenics. At this point, it was as if he was alone in the effort to disseminate eugenics, but soon things changed for the better with the organisation of successful conferences the following years.

At the time, Louros expressed his cautiousness about the future of the HES, while Konstantinidis, Saroglou, Goutos, Adamopoulos and Fylaktopoulos shared the view that the issue of the dissemination of eugenics was delicate and often met with disapproval. Therefore it was not a coincidence that many of the members were unresponsive towards the HES’ activities. However, they unanimously decided that they would continue their work as other similar societies had already done. In order to alter the difficult situation, they resolved to meet more often; to increase funding; and to attract audiences by inviting Joseph van Vleck, who was a member of the Governing Body of the IPPF\(^{40}\) to give a lecture in Athens.

In his effort to raise awareness on eugenics, Louros announced his idea of forming a Working Committee, a sub-group to deal with public engagement and contact with lay people and institutions. The new committee’s responsibility was to maximize the impact of the HES to the wider public. They had to report their plans and progress to the Executive Board and request approval for further actions. The first members of this committee were the physicians Dionysios Kaskarelis, Olga Chrysostomidou,

Dimitrios Papaloukas, and the sociologists Artemis Emmanouel and Marios Raphael.

During the first meeting of the Working Committee in 1958, the members decided to work upon specific issues of eugenics, which allegedly appealed to the general public. Their ideas included:

- Given that agreement with the government was mandatory, they planned to urge the government to adopt a precise and long-term population policy, fitting the social, religious and economic situation in Greece. The HES would then act according to this official population policy, avoiding a deviation from the government’s position.

- The biological improvement of the new generation was an imperative for the members of the HES. The Working Committee endorsed (negative) eugenic policies such as the avoidance of procreation in cases of disease or special conditions under which procreation would be harmful both for the parents and the child.

- Public education was one of the main targets of the HES. The new committee would undertake the education of different social strata in urban centres and in the countryside directly at schools and workplaces.

- HES’s propaganda would be divided into three separate categories, each reaching a different target group. The incorporation of eugenics to the health professionals’ education was the cornerstone. Public discussions and conferences came next on the list and finally the use

---

41 Louros Archive, First meeting of the Working Committee of the HES, Alexandra Maternity Hospital, Athens 8 January 1958 [in Greek].
of mass media, such as radio, newspapers, leaflets, films etc. to reach even the least educated people.

The above mentioned ideas were in fact a reiteration of the classic eugenic arguments, and similar to the aims stated in the statutes of the HES.

The second meeting of the Working Committee was held on 29 January 1958 and included the idea of co-operating with scientific societies, such as the Medical Society (Ιατρική Εταιρεία), the Obstetrics and Gynaecology Society (Εταιρεία Μαιευτικής και Γυναικολογίας), and the Paediatric Society (Παιδιατρική Εταιρεία), and aiming to give lectures on eugenics during these societies’ gatherings. The Working Committee made a list of possible lecturers for the academic audience; the most suitable for the purpose were the gynaecologists and paediatricians of the HES, namely Panayiotou, Triantafyllopoulos, Antonopoulos, Danopoulos, Doxiadis, Konstantinidis, Moutousis, Saroglou, Travlos, Vlissidis, Malamos, Katiforis and Kaskarelis.

The most difficult task, however, was organising the lectures intended for a non-academic audience. Suitable places for this purpose were schools, workplaces, factories, municipality buildings and regional health/wellbeing institutions. Marios Raphael undertook the responsibility to contact these facilities and arrange the lectures. Possible subjects of discussion were:

a. The anatomy and physiology of the reproductive system

b. Premarital hygiene of men and women

c. The prerequisites for allowing or prohibiting marriage

---

42 Louros Archive, Second meeting of the Working Committee of the HES, Alexandra Hospital, Athens, 29 January 1958 [in Greek].
d. The special conditions under which procreation is not allowed

e. The hygiene of pregnancy

f. The hygiene of newborns and children

Within a week the Working Committee met to discuss its progress on 5 February 1958. The central person of the third meeting was Dionysios Kaskarelis. He informed the rest that Louros agreed to include subjects of eugenics in his academic lectures at the Medical School of the University of Athens. Moreover, he was going to contact associations similar to the HES and it was his idea to put short, recorded propaganda messages in waiting rooms of health institutes. The members of the Working Committee unanimously decided that two subjects would be more fruitful to non-academic audiences: a). the meaning of “good quality” in procreation; which would include aspects of anatomy, physiology, good and bad conditions for procreation and hygiene of pregnancy; and b). paediatrics; mostly resembling puériculture.

The fourth and last meeting of the Working Committee during 1958 was held in exactly the same spirit as the previous one. Raphael reported that he contacted the community centre “The House of Friendship” (Εστία Φιλίας) and agreed with its director, Mr. Poggis, to organise an open lecture for their audience, consisted of parents and young people. In addition, Raphael arranged lectures at the biggest textile factory in Greece, the Piraiki-Patraiki factory. Poggis made some substantial suggestions to Raphael regarding the best possible ways to disseminate eugenics. He

---

43 Louros Archive, Third Meeting of the Working Committee of the HES, Alexandra Hospital, Athens 5 February 1958 [in Greek].
44 Louros Archive, Fourth Meeting of the Working Committee of the HES, Alexandra Hospital, Athens 12 February 1958 [in Greek].
insisted in distributing eugenics leaflets to labour groups, teachers’ journals, military magazines, and writing to the provincial press. Another suggestion was to contact the Archbishop Ieronymos Kotsonis, the leader of the Christian brotherhood Life (Ζωή), because this organisation distributed leaflets of various subjects to approximately 500,000 Greek families. Moreover, Poggis disagreed with the talks in the provinces because he claimed that the subjects of eugenics were too complex for villagers.45

Those of the members of the Working Committee who were health professionals were asked to draw a list of the central eugenics arguments in everyday language in order to write a leaflet to be distributed to workers. They also underlined the necessity of creating educational material for healthcare workers, midwives and doctors to be included in their educational programs in universities and nurse schools.

The Working Committee drew a plan for the year 1958 and another one for 1959. The former included valuable information about the relationship between van Vleck and the Greek eugenicists. Van Vleck promised to initially finance the HES with 150 dollars and later to increase his funding up to the 49 per cent of its total budget.46 Obviously, van Vleck encouraged the HES both morally and financially.

The most important task of the committee was to contact state authorities in order to define a specific population policy in the light of the financial, social and military situation in Greece. A specific state policy would result in a common code of practice restraining any independent

---

45 Louros Archive, Note on the Meeting between Raphael and Poggis, 5 February 1958 [in Greek].
46 Louros Archive, Annual Plan (1958) [in Greek].
activity. As a second priority, the Working Committee suggested two possible measures aiming at “the biological improvement of the Greek race”. These were: a). the improvement of the procreation conditions and b). the avoidance of procreation in cases where diseases or negative conditions threatened the health of the parents and their descendants.

It is remarkable that their primary goal was to organise three or four lectures about the overpopulation problem by inviting experts of the field. They also planned to integrate these lectures into the context of the UN seminar on population to be held in Athens in September 1958.

The specialisation of health professionals in eugenics was also an issue that was repeated in every schedule, but also more lectures at workplaces and youth centres were included in their plans. What is more, they urged the necessity of propaganda material, such as leaflets and recorded lectures, in plain language, to be distributed during the conferences and lectures of the HES, at the PIKPA and Paediatric Institutions. The Working Committee claimed that these measures would be fruitful but sporadic and that it was imperative to use the mass media on a regular basis. Such a task could be co-organised with the Education Service of the Ministry of Social Care. In addition, the idea of distributing a newsletter among the members of the HES was put forward in this plan of action to be realised in February 1959. Thus, the future plans of the HES were summarised in the following: the organisation of a conference on overpopulation; the effort to attract more members; the multiplication of the

---

publications in the press including the public talks; and the publication of a leaflet on eugenics prepared by Doctors Papaloukas and Karanastasis.

The assembly of the Executive Board accepted the plans of the Working Committee with some alterations, such as to add non-academic lectures on heredity and the organisation of talks in rural areas.\(^{48}\) Regarding the academic lectures, Louros suggested collaboration with other societies, such as the Biological Society, where Pantazis was President. The Executive Board also decided instead of organising sparse scientific lectures, to try to incorporate them into academic schedules as educational courses on eugenics.

HES’s Newsletter (Δελτίον της Ελληνικής Ευγονικής Εταιρείας)

The purpose of the newsletter was to revive the interest of the members of the HES and to attract new members. The newsletter was scheduled to include information about the activities of the HES, similar associations abroad and international news in the field of eugenics. Unfortunately only three issues of the newsletter have been preserved: February 1959, October 1959 and June 1962.

The earliest extant newsletter included a report on the lectures of the past year, which were:\(^{49}\)

1. V. Triantafyllopoulos, “The Pre-directed Heredity”, Parnassus Hall, January 1958

\(^{48}\) Louros Archive, Minutes of the Executive Board’s meeting, Alexandra Hospital, Athens, 25 June 1958 [in Greek].

\(^{49}\) Louros Archive, Newsletter of the Hellenic Eugenics Society (February 1959) [in Greek].


Regarding the publications in Greek journals and newspapers, it was stated in the newsletter that the efforts of the members of the HES to popularise eugenics and birth control was very effective and a growing interest of the public in these issues was observed. For example the journal Images (Εικόνες) of 18 August 1958, featured research on eugenics and birth control and an interview with Louros.50

As for the international relationships of the HES, the visits of foreign experts and the donations by van Vleck and Dorothy Brush were highlighted as they were substantial contributions to the work of the HES. The fact that Van Vleck congratulated the HES on its activities and the idea of the newsletter and his promise to refer to the HES at the IPPF’s Conference in Bombay in 1959 were also included in the newsletter. The section of the international news of the newsletter included: a table showing population movement in France; the falling birth rate in Japan and family planning advice in public hospitals in New York, India and Egypt. There was also a report on the seminar on population, organised by the United Nations

50 Anon., “A Pill against Malthus’ Prophecy”, Ikones, 147 (18-24 August 1958), pp. 30-33 [in Greek]. The content of this article will be discussed in Chapter 6.
Bureau of Social Affairs and Technical Assistance Administration in co-operation with the Government of Greece, held in September 1958 in Athens. The president of the conference was the Greek professor Gerasimos Alivizatos. Vasilios Valaoras, a former member of the HES, represented the UN.

The second newsletter included information concerning the public lectures of the HES, as follows:

1. In February 1959, Louros talked about problems of alcoholism under the aegis of the Hellenic Society of Anti-Alcoholism, at Parnassus Hall.

2. In March 1959, Mrs. Olga Chysostomidou talked about problems of infancy at the House of Friendship (Εστία Φιλίας), where the audience showed particular interest in family planning issues.

3. In May 1959, Pantazis, Vice-President of the HES, was invited by the Italian government to give a series of talks at Italian universities about “Overpopulation as a Biological Problem”.

4. In August 1959, Louros spoke in Helsinki, Finland, about “Overpopulation and Birth Control” where he highlighted the need for “an international birth control, but not only regional, which would unavoidably lead to the suicide of the white race”.

The fact that the HES regained its popularity in the 1960s is obvious from its newsletter of June 1962, which included a report on the General

---


Assembly and three successful round table public discussions. The annual General Assembly of the HES was held at Alexandra Maternity Hospital on 21 February 1962. Louros presented the work of the HES during 1961, particularly mentioning the success of the conference on Euthanasia. The eminent presenters were I. Theodorakopoulos, K. Bonis, Th. Papakonstantinou, E. Papanoutsos, A. Tsirintanis, N. Louros, M. Raphael and Sp. Doxiadis.

Given that success the HES organised two conferences about the health and physical education of the Greek children the same year. The venue of the conferences was changed from the Parnassus Hall to the more spacious Kentrikon theatre. It is remarkable that both conferences were attended by Princes Peter and Michael. The subject, “The Health State of the Greek Children” (Η Υγεία του Ελληνόπαιδος) was discussed by V. Valaoras, Th. Garofalidis, E. Mavroulidis, K. Saroglou, I. Chrysikos, K. Choremis and N. Louros on 5 March 1962. The second discussion followed two weeks later, on 19 March, with the subject: “The Physical Education of the Greek Children” (Η Σωματική Αγωγή του Ελληνόπαιδος). This was discussed by G. Alexatos, Th. Garofalidis, N. Louros, A. Mantellos, N. Baltatzis-Mavrokordatos, K. Palaiologos, P. Simitsek, N. Tsampoulas, and V. Tsafos.

In this context, the minutes of the General Assembly included extracts from newspapers that hosted articles on the HES’ conferences. The journalist from Kathimerini (Καθημερινή) newspaper wrote:

---

53 Louros Archive, Newsletter of the Hellenic Eugenics Society (June 1962) [in Greek].
In a public discussion, at the presence of the Crown Prince, having the subject “The Physical Education of the Greek Children”, the fact that the physical education in high schools is poor and the 20 per cent of the Greek children do not know how to swim was exposed. We would be very happy if indeed the remaining 80 per cent knew how to swim. We fear that the percentage is much lower. However, swimming is a personal choice, whereas the physical education and exercise is a matter of the state. The Ministry of Education should ask for the minutes of this conference in order to ameliorate the situation in schools.55

The journalist of To Vima (To Βήμα) newspaper focused on the positive aspects of the situation in Greece by writing: “Our race became more robust and beautiful in the latest years. Infant mortality rates decreased and average life expectancy rates increased. Tuberculosis and malaria are extinct”.56 The newspaper Mesimvrini (Μεσημβρινή) wrote the following: “During the public discussion was mentioned that 1. The physical education of the Greek children is non-existent and that 2. Only 20 per cent of the Greek population knows swimming while the 45 per cent of it lives near the sea”.57 The journal Images (Εικόνες) hosted an extended commentary on the public discussion:

In the presence of the Crown Prince, at Kentrikon theatre, seven eminent scholars discussed the physical education of the Greek children, a crucial matter for the future and the progress of our race. This was the second discussion in a row, directed by the president of the Hellenic Eugenics Society, Nikolaos Louros. The participants were V. Valaoras, Biostatistician; Th. Garofalidis, E. Mavroulidis, General Director at the Ministry of Social Welfare; K. Saroglou, General Director of the PIKPA, I. Chrysikos, K. Choremis and N. Louros. A big audience attended the discussion for one and half hours. It was concluded rather optimistically that the Greek population had greatly improved in health, robustness and mental development during the last two decades.\[58\]

The conferences of the HES received acceptance and appreciation both from experts and the general public. Apart from the popularity of its members and guests, the success of the HES’ activities was highly attributed to external support. In the following chapter, the contact with foreign individuals and institutions is illustrated by the analysis of their correspondence and publications. The HES was not at all restricted to its national borders; on the contrary, its president and members enjoyed international recognition and support.

\[58\] Louros Archive, Newsletter of the Hellenic Eugenics Society (June 1962) [in Greek].
Chapter 4

The Hellenic Eugenics Society on the International Scene

While the Hellenic Eugenics Society’s public engagement in Greece was rather slow, foreign contacts were actively developed from as early as 1953. The HES was established much later than its equivalents elsewhere in Western Europe and the USA. However, most of its members, and in particular its president, Nikolaos Louros, lived and studied abroad for many years. Valaoras, for instance, lived in the USA, while Spyros Doxiadis practiced medicine in Britain from 1945 until 1952. Furthermore, between 1952 and 1953, three different articles on English medical practice were published in the *Bulletin of the Athens Medical Association*. These were Konstantinos Gardikas’ overview of medical education in England;¹ Spyros Doxiadis’ discussion of the effects of British nationalised medicine on doctors and patients;² and Nikolaos Rasidakis’ examination of the English psychiatric system.³ Connections with England and the USA were closer than with other Western countries and they are fully documented by the frequent correspondence between the HES and institutions like the IPPF and the British Eugenics Society (hereafter BES).

A regular correspondence with foreign eugenicists was maintained mostly between 1953 and 1955, whereas interaction with people and institutions in Greece was more frequent after 1955. In both cases, it was Maro Kanavarioti who, as General Secretary of the HES, developed

---

¹ Gardikas, “Medical Education in England”.
² Doxiadis, “The Impact of British Nationalised Medicine on the Physician and the Patient”.
relationships not only through correspondence but also through her personal visits to Britain and further afield. As has already been mentioned, the official approval of the statutes of the HES in April 1954 can be described as a pivotal moment in the history of eugenics in Greece. Before that, Kanavarioti and other Greek eugenicists were more interested in receiving guidance from foreign institutions. As her letter to Whelpton reveals, Kanavarioti had established contacts with eugenicists and demographers overseas by 1952.4 Tellingly, in the mid- and late 1950s, Kanavarioti, Vasilios Valaoras5 and George Adamopoulos6 also became fellows of the British Eugenics Society. The establishment of a eugenics society in Greece was, therefore, inextricably linked with the relationships that had already been developed with eugenicists in Britain and elsewhere. Kanavarioti and the HES were also in close contact with Margaret Sanger’s Research Bureau and the IPPF—another branch of Sanger’s activities in family planning. The HES’s correspondents included key persons of these organisations, such as Pascal K. Whelpton, Clarence J. Gamble, Abraham Stone, William Vogt, Joseph Van Vleck, Dorothy Brush and Vera Houghton. These foreign organisations wanted to include Greece among their partner countries. Since there was no official association dealing with eugenics and birth control

4 Louros Archive, Kanavarioti to Whelpton, 22 May 1953; see Chapter 2.
5 Valaoras was listed as:
Valaoras, Prof. Dr. Vasilios G. MD, DPH Athens, Greece
Eugenics Society Fellow 1959, 1977
Personal: Diploma in Public Health; Prof. Emeritus 1977
6 Adamopoulos was listed as:
Dr G. Adamopoulos, Athens, Greece
Eugenics Society Member 1957, 1961
before the creation of the HES, its creation became an opportunity to expand these foreign organisations’ activities in this country as well. As a result, Kanavarioti became member of the Governing Body of the IPPF in 1954, and the HES was made the representative of the IPPF in Greece.

The IPPF was founded in the context of the Family Planning Association’s (FPA) Third International Conference on Planned Parenthood, convened in Bombay in 1952. The FPA, formerly the National Birth Control Association, was an alliance of many groups that were interested in birth control and attached to the Walworth Centre, which in turn was founded in London by the Malthusian League. Preceding the IPPF, the International Committee on Planned Parenthood (ICPP) was a committee with two representatives from Britain, two from the Netherlands, two from Sweden and three from the USA. The ICPP was primarily funded by the Brush Foundation for Race Betterment. The BES provided the IPPF with free accommodation for its activities at its premises at 69 Eccleston Square, London. Although its funding came from an American institution, it was Sanger’s decision to headquarter the organisation in London. The official foundation of such an international organisation as the IPPF was the result of the neo-Malthusian movement, empowered by the efforts of Margaret Sanger and Marie Stopes to globally disseminate birth control practices. Instead of “neo-Malthusianism” and “birth control”, the terms “family

---

“planning” and “planned parenthood” were adopted;\(^{11}\) this eugenic language was well-chosen and seemed ethically more neutral.

The birth control movement greatly benefited from the Brush Foundation. Dorothy Brush’s father-in-law, after his son’s death, established the Brush Foundation aiming at funding research on birth control. In 1952, the Brush Foundation undertook the publication of the journal *Around the World News on Population and Birth Control* (later *International Planned Parenthood News*).\(^{12}\) Dorothy Brush was its editor and the advisory council included Margaret Sanger, William Vogt and Abraham Stone;\(^ {13}\) all actively engaged with the IPPF and Margaret Sanger Research Bureau.

**Honorary Associates**

In 1954 Margaret Sanger was still President of the IPPF; Shrimati Dhanvanthi Rama Rau from India its Chairman; and Carlos P. Blacker was Vice-President whilst simultaneously carrying out his duties as Secretary of the BES.\(^ {14}\) The IPPF’s regional department concerned with the Europe, the Near East and Africa was established in 1952. Nancy Raphael was the Regional Honorary Secretary. On 18 February 1954 Raphael contacted Kanavarioti to ask for a list of names of eminent Greeks who sympathised

---


\(^{13}\) Louros Archive, Brush to Kanavarioti, 9 May 1955.

\(^{14}\) Blacker, “The International Planned Parenthood Federation: Aspects of its History”.
with the work of the IPPF in order to include them in its list of Honorary Associates. Raphael explained that:

I know you [Kanavarioti] will appreciate how important it is at this early stage of our development to enlist as Honorary Associates persons whose reputation and achievements will augment the prestige of the Federation. There is no question of asking such people to do more than allow us to make use of their names.\(^\text{15}\)

The enlisting of Honorary Associates was a method by which the IPPF attempted to appear more credible and acceptable. Those listed had no duties; they only put their names to the list, provided that they embraced the IPPF’s ethos. The Greek names listed were those of Nikolaos Louros and Lina Tsaldaris.

A few years later, in September 1955, a letter addressed to the HES was sent by the IPPF in London having the same purpose. Although not signed,\(^\text{16}\) the sender was allegedly Vera Houghton, who undertook the preparation of the Tokyo conference to be held in October 1955. The main purpose of the letter was to appeal for sponsorship for the Tokyo conference. As revealed by its content, the above mentioned Louros and Tsaldaris had given their names since the Bombay conference in 1952:

\(^{15}\) Louros Archive, Raphael to Kanavarioti, 18 February 1954.
\(^{16}\) Louros Archive, IPPF to Hellenic Eugenics Society, 1 September 1955.
You may remember that you were kind enough to allow us to use your name in support of the Third International Conference on Planned Parenthood which was successfully held at Bombay in November, 1952. In 1953, a smaller but in its way equally successful Conference was held at Stockholm. The fifth of the present series of conferences is to be held at Tokyo from October 24th to October 29th this year. You are doubtless aware of the seriousness of Japan’s population problem. The decision to hold the conference in so far away a place was carefully taken in the light of these grave problems. In the last two years over a million abortions a year has been officially performed in Japan. There is a widespread desire, unofficially and semi-officially expressed, to change the practice of abortion to that of conception control. The object of this letter is to ask you if you would again be kind enough to allow us to use your name as a sponsor of the Fifth International Conference at Tokyo. I may add that a list of sponsors is being prepared by all the principal participating countries. The Americans have already produced a long and impressive list. I attach hereto a list of those who, like yourself, were kind enough to lend their names to the Bombay Conference and to whom I am again writing. I shall myself be present at the conference. Your support would be much appreciated.17

17 Louros Archive, IPPF to Hellenic Eugenics Society, 1 September 1955.
Obviously the same letter was distributed to anyone who put their name to the list of sponsors of the IPPF’s conferences. It was a typical procedure. The issue of sponsorship was brought up again by Houghton in two letters, one dated 9 September 1955, and another one on 12 July 1956, when she prepared the report of the Tokyo conference. It is not known why Kanavarioti did not respond to the first letter, and it is unknown whether she responded to the second, as she had normally done in the past.

**IPPF’s representation in Greece**

Even though Kanavarioti was not officially a member of the council of the IPPF before September 1954, nor was the HES their formal representative in Greece, they were treated as such. In July 1954, Houghton sent to Kanavarioti copies of two letters regarding two Greek gynaecologists, Dr. George P. Andritsakis and Dr. Angeliki Tsacona, who were interested in family planning:

> You will remember that I mentioned to you the name of Dr. Andritsakis and gave you his address. He has since written to me after his return to Greece and I enclose a copy of his letter. You will see what he says about his interview with Professor Louros. I can understand, however, that Professor Louros may not wish to commit himself too definitely to family planning. I have not yet replied to Dr. Andritsakis but if you like to get in

---

18 Louros Archive, Houghton to Kanavarioti, 9 September 1955.
19 Louros Archive, Houghton to Kanavarioti, 12 July 1956.
touch with him in the meantime, will you please tell him that I will write soon? I am also enclosing some particulars about a Dr. Tsacona who has been in the United States, and which Dr. Clarence Gamble sent me. Perhaps you could meet her and discuss “ways and means”.

Houghton preferred to give the available information directly to Kanavarioti and let her handle the situation. Andritsakis visited Houghton in Britain in April 1954; a little earlier than Kanavarioti, who visited her in May 1954. Houghton suggested contacting Louros, thinking of him as the Greek expert in family planning. However, Andritsakis received a negative response from Louros:

So I [Andritsakis] met few days ago Prof. Louros and I explained to him all about F.P.A. I found him fully aware, but I am sorry to be obliged to inform you that he did not show any real interest. He finds the idea promising but inapplicable for Greece. By the way, my opinion is quite the contrary, but that doesn’t help.

For Andritsakis, but not so much for Louros at this point, Greece needed family planning. He asked, therefore, the name and address of Kanavarioti and, if any, the details of the companies that sold contraceptives in Greece. As mentioned, however, Houghton forwarded his letter to Kanavarioti. It is

---

21 Ibid.
not possible to deduce the reason why Louros disappointed Andritsakis but accepted Gamble’s offer for contraceptives less than a year later, in February 1955. A possible suggestion would be that Louros was not officially the President of the HES before August 1954, so he had not organised its activities in Greece by July 1954, when Andritsakis contacted him.

Tsacona’s case is particularly interesting. She was a gynaecologist who had spent some time in the USA taking a special course in Gynaecology at the Free Hospital for Women, in Brookline, Massachusetts. The fact that she studied in the USA during the 1950s suggests that she came from a wealthy family. She planned to return to Thessaloniki in June 1954. Tsacona was Gamble’s contact and according to him:

 She [Tsacona] feels that birth control is very much needed for many large Greek families, and that the country is overcrowded. She says there has been some dissatisfaction with attempts at birth control in Saloniki because jelly has not been available and the diaphragms without jelly have not proved successful. When I suggested that I might furnish diaphragms and jelly for poor families after she returned home, she accepted gladly, saying they would be much needed. She did not suggest that birth control was illegal in Greece.²²

---

²² Louros Archive, Houghton to Kanavarioti, 27 July 1954; the note was also copied to Margaret Sanger, Planned Parenthood Federation of America (PPFA) and Joseph Van Vleck.
Tsacona was another example of a Greek physician who studied abroad, adopted new ideas regarding birth control and had the desire to spread this knowledge and practice in Greece. Moreover, Tsacona was one of the first and most popular female gynaecologists in Thessaloniki. Her alleged certainty, however, that the country was overpopulated was not entirely accurate. She probably had in mind the city centres of Athens and Thessaloniki, which were indeed overcrowded, but mostly by lone economic migrants from the villages, whereas during the 1950s most large Greek families continued to inhabit the countryside.

Gamble sent her a letter in January 1955 to confirm that she needed diaphragms and jelly showing his willingness to supply her with contraceptive materials. Their correspondence continued for a couple of months resulting in Tsacona’s acceptance of his offer for spermicide jellies and diaphragms. Gamble immediately arranged the shipment but also prompted her to send him feedback of her experience with her patients. He added: “I hope you will find them useful for the poor people in Salonica,” which suggests that the contraceptives were primarily destined for the low social class, in order to impede the creation of poor, large families. However, their deal initially fell through due to strict customs and formalities. In May 1955, Tsacona explained to Gamble that there were two obstacles to getting the boxes with the contraceptives, kept by the customs authorities. Firstly, the tax was substantial; and secondly, she had to acquire a special permission from the Hygiene Department in Thessaloniki. Tsacona claimed that she could not overcome these difficulties and she would send

---

23 Clarence Gamble Papers, HMSc_23_77_1207, Gamble to Tsaona, 14 January 1955.
24 Clarence Gamble Papers, HMSc_23_77_1207, Gamble to Tsaona, 23 February 1955.
the supplies back with regret. Ten days after her letter, Gamble responded by proposing the alternative of the “sponge and salt method”. He would mark the boxes with the rubber as “free gift”, to facilitate the import from the customs. Gamble did not give up, and as will be examined in the next chapter, he invented ways and means to send contraceptives to Greece, despite the strict customs regulations. Tsacona finally received the rubbers along with instructions on how to cut them in pieces for individual use, how to prepare the salt solution and some cards to record each patient’s reaction and results. Gamble’s ultimate aim was to gather information from all the countries he supplied with contraceptives both for his own research and international distribution.

Both Andritsakis and Tsacona were obstetrician-gynaecologists who were interested in family planning but did not belong to the HES. This did not seem to be a problem for Gamble, yet he developed closer relationships with the members of the HES. Also, from the IPPF’s point of view, the members of the HES—Kanavarioti in particular—were the first to be contacted in Greece for family planning matters. For instance, on 2 November 1954 Houghton informed Kanavarioti about someone who was travelling from Britain to Greece, to whom she had suggested contacting Kanavarioti and Andritsakis, assuming that Louros was not willing to get involved with contraceptives at that point.

One of the clinic patients in this country is coming to Greece and has offered to give help with any family planning work. I

---

25 Clarence Gamble Papers, HMSc_23_77_1207, Tsacona to Gamble, 10 May 1955.
26 Clarence Gamble Papers, HMSc_23_77_1207, Gamble to Tsacona, 11 October 1955.
have not seen her as she attended the clinic in North Staffordshire through which the information came. We have written to her giving your name and address and also that of Dr. Andritsakis as she may need to consult him medically [...] I thought it might be useful for you to meet her and see what she is like and if she has had any training which would enable her to help with some of the secretarial work.27

In September 1954 Kanavarioti became a member of the Governing Body of the IPPF, and therefore it was reasonable for Houghton to get in touch with her concerning the visitor from Britain. Seemingly, the HES at this time had been the official contact of the IPPF in Greece; thus for every person seeking information for family planning in Greece, the IPPF suggested the HES. Rotha Peers, for instance, also introduced people to Kanavarioti: “I was most interested to hear of the developments from your last letter to Mrs. Houghton and have asked a friend of mine, a Mrs. Winter, who has a house near Athens to try and see you while she is over. She is very interested in this work and I thought she might know one or two people who would be helpful to you.”28 The remarkable ability of the IPPF to work worldwide cannot be divorced from the commitment of its members to their common cause.

Kanavarioti, on another occasion, responded to Tom O. Griessener from the IPPF office in New York about a request for contraceptives. The implied story was that two Greek people contacted Griessener asking about...

27 Louros Archive, Houghton to Kanavarioti, 2 November 1954.
28 Louros Archive, Peers to Kanavarioti, 23 February 1955.
the availability of contraceptives in Greece, so he forwarded their letters to the HES. Obviously, the HES had already been actively preoccupied with birth control. At least that is deduced by Kanavarioti’s response: “We read the two Greek letters enclosed therein which ask for contraceptives and we are pleased to inform you that our Society [HES] will come in contact with the writers and supply them with the articles required.”

Judging from the short and confident answer, the distribution of contraceptives was common practice. The most significant detail is that Kanavarioti did not commit those people to Alexandra Maternity Hospital or any other clinic, but she assured him that the HES would contact the enquirers directly. This probably meant that the HES mediated between people seeking contraceptives and the clinic which distributed them. Otherwise the gynaecologists and members of the HES supplied contraceptives to their patients from their private practice.

Visits Abroad

The fact that Kanavarioti played an important role in the creation of the HES is beyond dispute. Unsurprisingly, she represented the HES abroad too. Her most significant visits were to Stockholm, London and Rome. As will be shown these visits strengthened the relationship of Greek eugenicists with international institutions.

28 Louros Archive, Kanavarioti to Griessener, 31 January 1956.
29 Ibid.
30 Ibid.
Elise Ottensen-Jensen, one of the strongest supporters of the birth control movement and Sanger’s successor in the presidency of the IPPF, was Swedish. Given that after the Second World War Sweden was one of the strongest states in Europe, Ottensen-Jensen organised a series of meetings in Stockholm, beginning with one held in 1946. Kanavarioti visited Stockholm in 1953. The personal hand-written letter to William Vogt is of utmost importance for the history of the HES because in it Kanavarioti referred to this meeting in Stockholm. There she had the chance to meet Vogt, Sanger, Ferguson and Rama Rau. It seems that this was the first time that she met these people. Kanavarioti was jubilant, as expressed in her letter to Vogt.

The IPPF held its annual conference in Stockholm in August of 1953, but the meeting to which Kanavarioti referred took place much earlier, because the letter to Vogt was sent on 10 March 1953. Supposedly a preliminary meeting took place prior to the official gathering. However, in a letter sent by Houghton on 27 April 1954, it was implied that Kanavarioti attended the official Stockholm conference. It was then that Houghton introduced Dr. Pyke to Kanavarioti. Unfortunately, the existing documents do not provide further information, so it remains unclear whether Kanavarioti attended both meetings in Stockholm in 1953. Notwithstanding this, it was important that she had the chance to meet these established

---

32 Louros Archive, Kanavarioti to Vogt, 10 March 1953.
33 Louros Archive, Houghton to Kanavarioti, 27 April 1954.
population experts. The letter to Vogt also included the following information: “Me and (Jiji Raue)\textsuperscript{34} just left for Egypt-and she had very interesting talks with Dr. Mantellos, President of the temporary Board of the Hellenic Eugenics Ass., Mr. Phylaktopoulos, Mr. Makris, Labour leader and many others”\textsuperscript{35}

As has been noted, Mantellos was the first president of the HES and President of the Athens Medical Association, and Phylaktopoulos was a psychologist, professor at Athens College and one of the leading members of the HES. Fotis Makris, on the other hand, was a very active Labour politician in Greece and one of the most important trade union leaders.\textsuperscript{36}

Considering this, it is unusual that he did not participate in the future activities of the HES. He was, however, noted by Kanavarioti, perhaps because of his popularity.

b. London-Oxford

A significant step towards the development of the HES’s international relationships was Kanavarioti’s trip in Britain in May-June 1954. Houghton, as the Executive Secretary of the IPPF’s office in London, corresponded with Kanavarioti to make all the necessary arrangements. In April 1954\textsuperscript{37} Houghton sent a letter outlining the details of the trip. Interestingly, the

\textsuperscript{34} Kanavarioti’s letter was handwritten; therefore some words are not clearly readable. The name here seems to be “Jiji Raue”, but for reasons of uncertainty is put in parenthesis.

\textsuperscript{35} Louros Archive, Kanavarioti to Vogt, 10 March 1953.


\textsuperscript{37} Louros Archive, Houghton to Kanavarioti, 27 April 1954.
letter was posted to an address in Oxford, which meant that Kanavarioti was already there. She returned to Greece on 15 June 1954.

She thus had ample time to visit experts and institutions including the North Kensington Marriage Welfare Centre, the Family Planning Association and the Islington Family Planning Clinic. Meetings with individuals included Mrs. Hobson from the Oxford Family Welfare Association; Mrs. Irene Heaton from Oxford Marriage Guidance Council; Dr. David Pyke of the Radcliffe Infirmary in Oxford, who she had already met in Stockholm in 1953; and Mrs. van Oss, who was Joint Treasurer of the Family Planning Association and associated with the Slough & District Married Women’s Advisory Clinic. Furthermore, Kanavarioti had a meeting with Dr. Wheatherall, who was the Education Secretary of the British Social Biology Council. Houghton had previously sent her a copy of Wheatherall’s paper on sex education in England which was presented at the Bombay Conference. Kanavarioti was interested in learning about sex education in schools and Dr Wheatherall was a specialist in this field. Not surprisingly, then, the HES would deal with this issue in a future conference. Most importantly, Kanavarioti met up with Carlos P. Blacker, the vice-president of the IPPF and secretary of the BES. The meeting was arranged for 12 May 1954 on Blacker’s invitation.

Moreover Kanavarioti met and Mrs. Cecily Mure, who was connected with the Walworth Women’s Welfare Centre which was in turn

---

38 Louros Archive, Heaton to Kanavarioti, n. d.
39 Louros Archive, Houghton to Kanavarioti, 27 April 1954.
40 The Family Planning Association (FPA) organised the Third International Conference on Planned Parenthood in Bombay, India, in November 1952.
41 See chapter 7.
42 Louros Archive, Houghton to Kanavarioti, 27 April 1954.
43 Louros Archive, Houghton to Kanavarioti, 4 May 1954.
affiliated with the Family Planning Association. Before their meeting, in December 1953, Houghton wrote to Kanavarioti on behalf of Mure regarding the latter’s visit to Greece. The delegation of the IPPF’s representatives intended to raise interest in family planning in Greece, a topic that also featured highly on the HES’s agenda. Houghton wrote:

This is to introduce Mrs. Cecily Mure who has for many years been actively connected with the Walworth Women’s Welfare Centre which is affiliated to the Family Planning Association (Great Britain). Walworth was the first Women’s Welfare Centre in Britain to give birth control advice-in 1921. The organisation and lay-out of the Walworth Centre quickly became a model for other clinics, of which there are now nearly 150 in Britain. The methods of contraception taught by the doctors at Walworth have become standard practice throughout the country, and have been studied by doctors and other visitors from overseas.44

As the contact person between Kanavarioti and Mure, Houghton asked the former to assist the latter in her field work in Greece and to facilitate meeting with Greek doctors and others who are interested in this field of work.45

Yet Mure and Kanavarioti did not meet this time. In her letter to Kanavarioti, dated 14 February 1954, Mure explained that it would be difficult to arrange a meeting, because she would stay only for a couple of

44 Louros Archive, Houghton to Kanavarioti, December 1953.
45 Ibid.
days. Nevertheless, Mure suggested a phone conversation on 18 February.\footnote{Louros Archive, hand-written note by Mure, 14 February 1954.} Although it is not known whether this phone conversation took place, as mentioned before, Mure and Kanavarioti eventually met in Britain in May 1954.

During Kanavarioti’s trip in Britain, Houghton additionally suggested attending the Family Planning Association (FPA)’s Conference of Branches and its annual meeting. Houghton motivated Kanavarioti to involve herself with family planning in general and associate with certain institutions in particular. Houghton admitted that:

I have probably suggested many more appointments than you will wish to keep, but they would give you an opportunity of meeting a number of people in this country who work in the family planning and marriage guidance movement. I suggest you accept those invitations which you can most conveniently manage. There is certainly no need for you to feel under any obligation to accept all of them.\footnote{Louros Archive, Houghton to Kanavarioti, 27 April 1954.}

In addition to the trip arrangements, two booklets regarding the work of family planning clinics in Britain, the Clinic Handbook and the Family Planning: the Past and the Future, were included in the letter. As Houghton explained “The booklets […] will give you a small idea of what to expect to see at the clinics and of the history of the family planning movement in this
In her response, Kanavarioti happily agreed to participate in the activities that Houghton had proposed. Kanavarioti’s interest in learning about family planning and keeping in close contact with these people was keen. The trip to Britain was an opportunity to associate with the IPPF’s experts and visit family planning clinics.

At a more personal level, Houghton invited Kanavarioti to stay at her flat in London for some days during her absence; reflecting on the development of a close friendship and trust between Kanavarioti and Houghton. Although the content of this letter was informal, it had a letterhead with the IPPF’s logo. Houghton also included a cutting from the *Manchester Guardian* newspaper, referring to a book which was recommended by a Professor Macintosh at the FPA conference, probably the one held in Bombay in 1952.

Judging from the content of the letters before and after the trip, Kanavarioti was warmly welcomed, and the trip proved very successful and fruitful. Houghton’s role was decisive for this positive outcome. Kanavarioti in return hosted Houghton at her house in Athens shortly after the end of the conference and meetings in Rome.

A personal relationship also developed with Dorothy Brush, to whom Kanavarioti mentioned Houghton’s visit in Athens. Dorothy Brush’s daughter, Silvia, was married to a Greek man, so she regularly visited

48 Louros Archive, Houghton to Kanavarioti, 27 April 1954.
49 Louros Archive, Kanavarioti to Houghton, 29 April 1954.
50 Louros Archive, Houghton to Kanavarioti, 1 June 1954.
51 Ibid.
52 Louros Archive, Houghton to Kanavarioti, 13 August 1954; 11 October 1954; 19 October 1954.
53 Dorothy Hamilton Brush Papers, Kanavarioti to Brush, 10 October 1954.
Greece. In addition, Kanavarioti’s daughter, Leelia, lived in the USA\textsuperscript{54} and was a friend of Brush’s daughter and her husband.\textsuperscript{55} Kanavarioti was invited to attend their wedding in Greece as well. Just one day before Kanavarioti’s return to Greece (14 June 1954) Brush sent her a letter arranging to meet with her and some members of the HES. However, the meeting could not take place, because Kanavarioti was still in London. When they corresponded at the beginning of July 1954, Brush highlighted the fact that she did not try to meet anyone else from the HES without Kanavarioti’s presence. She explained: “I did not try to get in touch with anyone else on our list for Greece; we all think of you as the leader”.\textsuperscript{56}

Moreover, she commented that there was no obvious activity being carried out by the rest of the group. Indeed, the HES was then undergoing the first stage of its development, so Brush asked whether there were people, not necessarily members of the HES, interested in family planning to whom the journal *Around the World News on Population and Birth Control* could be sent.\textsuperscript{57}

Interestingly enough, Brush asked Kanavarioti a personal favour regarding her daughter’s use of contraception. Considering Kanavarioti as the most suitable person to mediate for a doctor, Brush asked her to recommend a gynaecologist who was familiar with contraceptive techniques. Her daughter’s personal doctor in the USA was Abraham Stone; however, she needed also to know a gynaecologist she could contact while staying in Greece. She put it very nicely when she wrote: “Thank you for

\textsuperscript{54} Louros Archive, Houghton to Kanavarioti, 23 April 1955.
\textsuperscript{55} Louros Archive, Brush to Kanavarioti, 9 May 1955.
\textsuperscript{56} Louros Archive, Brush to Kanavarioti, 4 July 1954.
\textsuperscript{57} Ibid.
any trouble this puts you to but I am sure as a mother yourself of a daughter in a foreign country you will know how I feel”. 58

c. World Population Conference, Rome

The culmination of the HES’s effort to cultivate international relationships was Kanavarioti’s attendance of the Second World Population Conference in Rome from 31 August to 10 September 1954. The Economic and Social Council of the United Nations and the International Union for the Scientific Study of Population organised the Second World Population Conference in Rome in 1954. The IPPF was represented by Elise Ottesen-Jensen and Dorothy Brush.

A month before the World Population Conference in Rome, on 6 August 1954, the HES elected its new president and Executive Board. Louros succeeded Mantellos and became President, G. Pantazis, a Professor of Biology, became Vice-President, Kanavarioti remained Secretary, and S. Doxiadis became Treasurer. The remaining members of the board were: physicians K. Konstantinidis, A. Mantellos and K. Saroglou; psychologists K. Katsaras and G. Phylaktopoulos; gynaecologist P. Panagiotou; and Professor of Paediatrics, K. Choremis. Kanavarioti communicated the results of the elections to the IPPF. Houghton was delighted by the new composition of the board and supported Louros’ election. 59 Along with her congratulations, Houghton sent Kanavarioti a formal invitation to attend the meetings of the Governing Body and Executive Committee of the IPPF.

58 Louros Archive, Brush to Kanavarioti, 4 July 1954.
59 Louros Archive, Houghton to Kanavarioti, 13 August 1954.
Concurrently Kanavarioti received a letter from Vasilios Valaoras on 18 August. Apart from pioneering the study of biostatistics in Greece, Valaoras had made a career for himself in the UN. He was appointed a member of the Population Division of the UN and moved to New York in 1954. Before his departure to the USA, he had participated in the preliminary meetings of the HES and signed its statutes. As a member of the Population Division of the UN, he was going to attend the World Population Conference in Rome. As is indicated by Valaoras’ letter, Kanavarioti had already informed him about the results of the election on 6 August 1954. Valaoras expressed his pleasure at the composition of the new Executive Board and its president, but most of all exalted Kanavarioti’s work: “One day our country will be grateful of the movement you started and the mastery of your work for this excellent beginning”.

Valaoras also referred to his friend, van Vleck, and their discussions about Kanavarioti and the HES. Valaoras claimed that van Vleck’s interest in the progress of the HES was equal to his own. He thus promised to persuade him to encourage the work of the HES. Both would be in Rome for the World Population Conference. Valaoras also referred to Houghton, showing that he was in contact with the IPPF: “I will try to meet Mrs. Vera Houghton in Rome. Maybe you will come there as well? Interesting matters regarding your society will be discussed there.” He concluded the letter with warm regards: “Please write to me from time to time regarding the

---

60 Louros Archive, Valaoras to Kanavarioti, 18 August 1954 [in Greek]; this letter was translated from Greek by the author.
61 Louros Archive, Valaoras to Kanavarioti, 18 August 1954.
62 Ibid.
news of the society [HES] and convey my congratulations and my wishes to the newly elected Board and my greetings”.

Valaoras was very supportive of the HES. On this occasion, he expressed his admiration for the HES’s new Executive Board and his appreciation of its activities. Moreover, the fact that he asked Kanavarioti to attend the World Population Conference for the benefit of the work of the HES indicates his support of the eugenics movement in Greece, despite living in New York. Finally, it turned out that van Vleck was successful in convincing Kanavarioti to go to Rome.

The IPPF planned a series of business meetings after the end of the conference, where Kanavarioti was invited to attend as well. Houghton informed Kanavarioti that the meetings were aimed at selecting new members; discussing policies and arranging the Fifth International Conference, which was to be held in Tokyo in 1955. In this context, Houghton asked Kanavarioti to become a member of the IPPF’s council, the Governing Body. She explained that the IPPF preferred Kanavarioti to other members of the HES, because they needed “a “working” member, not a figurehead like Louros”. She pointed out, however, that they needed Louros to accept an Honorary Associate membership in order to use his name to give prestige to their international organisation. Houghton enclosed a copy of the IPPF’s first Annual Report and the Constitution and Rules of

63 Louros Archive, Valaoras to Kanavarioti, 18 August 1954.
64 Louros Archive, Houghton to Kanavarioti, 13 August 1954.
65 Louros Archive, Houghton to Kanavarioti, 27 July 1954; After Kanavarioti’s trip in Britain, Houghton addressed Kanavarioti with her first name, “My dear Maro”, showing friendliness.
66 Ibid.
67 Ibid.
the IPPF to ease Kanavarioti’s decision about becoming a member of the Governing Body. Houghton added:

If you feel it is more important for the Hellenic Eugenics Society that we should co-opt Dr. Doxiadis, we will of course give consideration to that, but our first preference would be for you as you are the really active person in Greece and I think it will help you in your work locally to become a member of our Council. We would hope of course that you would be able to attend our meetings, and if you could come to Rome in September we should of course be delighted, but I realise that may not be possible.68

Houghton and the rest of the IPPF members regarded Kanavarioti as the most active person in Greece, which was at the time true. Moreover, Kanavarioti was the most familiar, because she had already travelled to Sweden and Britain, where she met many of the IPPF’s experts. Therefore, it was hardly surprising that she was the most successful candidate for that post. Although Houghton proposed an alternative candidate, Dr. Doxiadis, she made clear that their first preference was Kanavarioti. Trying to convince her, Houghton claimed that becoming a member of the IPPF’s Council would help her local work. Furthermore, Houghton mentioned that van Vleck would also be in Rome and maybe in Greece afterwards.

Dr. Abraham Stone also verified Kanavarioti’s presence in Rome in his letter, on 18 October 1954. As can be deduced from the correspondence, Dr. Stone’s visit and lecture in Athens was discussed during the meetings of the IPPF in Rome in September 1954. As Kanavarioti remarked in her letter to Stone:

It was a great pleasure to meet you and other members of the IPPF in Rome and I was most grateful for the opportunity to attend the meetings as it gave me much encouragement to continue the work here. I hope it will not be long before you will visit Greece. I think you would like it here, and we should like to have you.

Stone was the director of the Margaret Sanger Research Bureau, deeply involved in family planning. Recently, Alison Bashford characterised him as the “New York’s contraceptive expert”. He was supposed to give a lecture on family planning at the Medical School of the University of Athens in January 1955. Obviously the IPPF was interested enlisting such a renowned expert as Abraham Stone to spread the word for family planning. However, Kanavarioti was obliged to cancel Stone’s visit due to the examination period at the university:

---

69 Louros Archive, Stone to Kanavarioti, 18 October 1954.
70 Louros Archive, Kanavarioti to Stone, n. d.
72 Louros Archive, Kanavarioti to Stone, n. d.; judging from the rest of the correspondence this letter was probably dated in January 1955
I am very sorry that we were not able to invite you to come to Greece as we had hoped. When I spoke to Dr. Pantazis, our Vice-President, I found that the University examinations being held at this time would make impossible the arrangement of a lecture at the University to physicians at such short notice. I would not like to have asked you to come unless we could be sure of a good audience, and that did not seem possible.\textsuperscript{73}

And further:

I hope, however, that we shall be able to arrange it the next time you are in Europe when the Society here will be better established and when there will be more time to make the necessary arrangements. We should have about six weeks’ notice to do this.\textsuperscript{74}

The fear of a small audience resulting from the university examination period was one reason for the cancellation of Stone’s lecture in Athens; the wait for a better moment “when the Society [HES] here will be better established” was another. In the responding letter, Stone expressed his willingness to visit Greece at another time and meet the members of the HES. He agreed, however, that the time was too short to prepare the lecture:

I can well understand that the time was too short to arrange for a special lecture. I do hope that an opportunity will arise again for me to visit Greece, when I shall have the privilege of meeting

\textsuperscript{73} Louros Archive, Kanavarioti to Stone, n. d.
\textsuperscript{74} Ibid.
with you and members of the profession who might be interested in Planned Parenthood. Perhaps it could be considered in connection with the next International Conference in Tokyo. I could probably come to Greece either on my way to Tokyo or else on my return trip.75

Stone’s persistent desire to visit Greece illustrates the IPPF’s eagerness in conjunction with the Margaret Sanger’s Research Bureau to include this country among their partners and to expand their international activities. As a result, Stone did not actually cancel the lecture, but merely postponed it. He ended his letter with the wish: “May you be successful in establishing the association in Greece and in disseminating information about the Planned Parenthood program” 76

HES’s Presence in the Foreign Press

The most important step towards international recognition was the publication of the HES’s establishment in the *Eugenics Review* in January 1955.77 Houghton explained to Kanavarioti that it was Blacker who wanted to include an announcement about the HES in the journal.78 The establishment of the HES was noted in the *Eugenics Review* as follows:

---

75 Louros Archive, Stone to Kanavarioti, 18 October 1954.
76 Ibid.
77 Louros Archive, Houghton to Kanavarioti, 19 October 1954.
78 Ibid.
Hellenic Eugenics Society

EUGENICISTS in this country will be interested to hear that a eugenics society was founded in Greece in 1953. This is the Hellenic Eugenics Society, whose Secretary, Mrs. Maro Kanavarioti, was recently elected a Fellow of our Society.

The newly-appointed Board, under the presidency of Dr. Louros, Professor of Obstetrics and Gynecology at the University of Athens, held its first meeting on November 15th when it was decided to start activities in three main directions. These will include lectures to the general public, the first being given by Dr. Louros; the formation of a special committee to undertake the enlightenment of the Greek people through the medium of radio, publications, films, etc.; and a symposium of scientists to discuss current problems and carry out research.

The society’s Vice-President is Dr. G. Pantazis, Professor of Zoology in the University of Athens, and its address is: Hellenic Eugenics Society, State and University Maternity Hospital “Alexandra”, Laodikias Street, Athens.

We feel sure that our readers will join with us in wishing every success to the new society.79

The above publication represented the appreciation on behalf of the BES to its Greek equivalent. The HES had arrived at a point where Blacker could demand its recognition in the *Eugenics Review*.

---

Dorothy Brush, on the other hand, apart from the reference to the HES’s successful lectures, was eager to publish the Greek attitude to birth control, abortion and sterilisation. She had already included some religious views in the *Around the World News on Population and Birth Control*, therefore she asked Kanavarioti to help her with the Christian Orthodox aspect:

If you could possibly persuade the gentleman who is the head of the Theological Department at the University of Athens to write the Greek attitude toward birth control, abortion and sterilisation it would be wonderful. I have been trying for a long time to get a statement. As you know we have published the Islam, Hindu, Jewish and Buddhist attitudes. I talked to a New York priest who said there was no rule so far as he knew and it was left to the individual priest to interpret but I would like to get an authoritative statement and factual if there is anything in the textual rights on the subject.

Moreover, Brush asked Kanavarioti’s help to find the relevant Greek laws on similar issues in order to gather the legal texts of each country. Brush also thanked Kanavarioti for several new addresses that she provided her with, probably prospective receivers of the bulletin. Brush promised to find some educational films: “I will see what I can do about getting you films.

---

81 Louros Archive, Brush to Kanavarioti, 9 May 1955.
82 Ibid.
The two famous ones are: “Biology of conception” and “Techniques of Contraception” and designed chiefly for medical people. We never yet have had a satisfactory one for lay people”. 83

We can assume that Kanavarioti was able to provide Brush with information about the Greek laws on reproduction issues; however, it was less probable that she was able to inform her about the Orthodox Church’s laws on family planning. There was no official canon law regarding family planning. On reproductive issues, the Church was predominantly concerned with the matter of abortion, which was equated with homicide. 84 Kanavarioti’s response is not available though.

Interest in publishing something on the work of the HES was expressed by the American Eugenics Society (hereafter AES) too. Given that the British and American eugenics societies were directly related, the fact that the AES contacted the HES was not surprising. Frederick Henry Osborn (1903-1980) was one of the founding members of the AES in 1926 and the Secretary of the Galton Society in 1931. By 1946, Osborn was President of the AES and radically transformed it into a more “scientific” society and associated it with the population studies and birth control movement, which he strongly supported. 85 The prevalent view was that Osborn’s papers “chart the shift in the American eugenics movement to a more “scientific” footing and into closer communion with population studies, and at the same time, they illuminate the link between population

---

83 Louros Archive, Brush to Kanavarioti, 9 May 1955.
84 Nicholas Chatzinikolaou, Free from Genome. Orthodox Bioethical Approaches (Athens: Stamoulis, 2002) [in Greek]; Georgios Mantzarides, Christian Ethics (Thessaloniki: Pourmaras, 2009) [in Greek]; Miltiadis Vantsos, Ethical Consideration of Abortion (Thessaloniki: K. Sfakianakis, 2009) [in Greek].
science and foreign and public policy in the post-war United States”.\textsuperscript{86} With John D. Rockefeller, Osborn was a co-founder of the Population Council in 1952.\textsuperscript{87}

Osborn was made aware of the HES by Whelpton, and wrote favourably about it to Kanavarioti on 2 March 1954.\textsuperscript{88} The purpose of the letter was to establish contact between the American and Hellenic eugenics societies and to introduce the journal \textit{Eugenics Quarterly}, edited by the AES, to the Greeks. He admitted that the AES was at the time becoming more active and expanding its work.\textsuperscript{89} Having in mind that Kanavarioti was Secretary of the HES, Osborn asked the editor of the \textit{Eugenics Quarterly}, Mrs. Helen Hammons, to send to Kanavarioti a copy of the new journal to distribute it among Greek eugenicists. He also suggested including any forthcoming contribution from the HES in the journal.\textsuperscript{90} It is remarkable that Osborn expressed his interest in the HES; although the ideological connection was obvious, the fact that Whelpton linked the two societies, even though he had visited Greece nearly two years earlier (December 1952), was very important.

\textsuperscript{86} American Eugenics Society Records, American Philosophical Society [http://amphilsoc.org/mole/view?docId=ead/Mss.575.06.Am3-ead.xml accessed 16 July 2014].\textsuperscript{87} American Eugenics Society Records, American Philosophical Society [http://amphilsoc.org/mole/view?docId=ead/Mss.575.06.Am3-ead.xml accessed 16 July 2014].\textsuperscript{88} Louros Archive, Osborn to Kanavarioti, 2 March 1954.\textsuperscript{89} Ibid.\textsuperscript{90} Ibid: on the bottom of the page of the letter was written: “The program of the Society calls for continuing research and educational activity directed toward increasing the proportion of children born with better than average potential or intelligence and character and toward diminishing the burden of hereditary disabilities”.

159
Fifth International Conference of Planned Parenthood

In October 1955 the Fifth International Conference of Planned Parenthood took place in Tokyo. Houghton, who was preoccupied with its preparations, sent an informal invitation to Kanavarioti before the official invitations had been prepared.91

Houghton’s comments are revealing of the financial difficulties facing this particular conference, which was going to take place in a region far removed from Europe and the USA:

Our American friends are trying to raise money to send delegates to Tokyo, especially from other Asian countries, but the appeals drive is not going too well at the moment. I think the feeling of uncertainty in America as to what is going to happen in that area is an influencing factor. Unfortunately, there will not be any funds for delegates from the region for Europe, Near East and Africa other than those which we can raise ourselves. We estimate it will cost at least £500 per delegate from this region. The Eugenics Society has given £250 towards Dr. Blacker’s fare; Mrs. Ottensen-Jensen’s organisation will pay for her, and Mrs. Scott of the South African National Council for Maternal and Family Welfare will pay for herself. I am trying to get some money from the European office in Paris of the Rockefeller Foundation to enable Dr. Parkes of the Medical Research

91 Louros Archive, Houghton to Kanavarioti, 23 April 1955.
Council to go from Britain. He is in charge of research on contraception but it is all kept very hush-hush at the moment so it will be a good thing if we can get him to make a statement at Tokyo. There may be one other doctor from Britain, Dr. Margaret Jackson, who is willing to pay for herself.  

In just one paragraph Houghton refers to the connections between the IPPF, the BES, the Rockefeller Foundation and the Medical Research Council in Britain. The most well known collaboration was that between the Rockefeller Foundation and the Medical Research Council which had began in 1923.  

In this context, it was equally remarkable that she shared this information with Kanavarioti.

Regarding Greece, Houghton acknowledged the difficulty of raising so much money for the conference and wrote: “I wish there was a possibility of the Hellenic Eugenics Society sending a delegate, but who could pay all that money? If you have any ideas, let me know”. However, she proposed that a delegate could stop off in Greece, an idea which was also expressed by Abraham Stone and Clarence Gamble. In her own words:

I think it is probable that one or two people could be persuaded to stop off in Greece either on the outward or homeward journey—that would be either the middle of October or the middle of November. Is there anyone you would particularly

---

92 Louros Archive, Houghton to Kanavarioti, 23 April 1955.
93 See Mazumdar, Eugenics, Human Genetics and Human Failings. The Eugenics Society, its Sources and its Critics in Britain, p. 169.
94 Louros Archive, Houghton to Kanavarioti, 23 April 1955.
like to invite, or do you still feel that it is better to work from within rather than have someone from outside giving publicity to family planning.\textsuperscript{95}

As one of IPPF’s leading figures, Houghton knew Margaret Sanger personally and told Kanavarioti that she was going to meet her in the USA.\textsuperscript{96} Houghton probably followed her plan and made the trip, because their correspondence was interrupted for some months.

Rotha Peers, on the other hand, was about to prepare two reports for the European delegation to present to the conference in Tokyo. Regarding Greece, she had already prepared a short text on Louros’ lecture “Eugenics: An Appeal”. Therefore, she asked Kanavarioti’s opinion on the following text:

On 12\textsuperscript{th} March 1955 Dr. Louros President of the Eugenics Society of Greece gave a lecture in the Parnassus Hall Athens on “Eugenics an Appeal.” to an audience of over 800 people. This was followed by projection of the film “Human Reproduction”. This lecture, the first of a series, has aroused great interest amongst Doctors, Teachers and Scientists in Greece on the subject of eugenics and planned parenthood.\textsuperscript{97}

\textsuperscript{95} Louros Archive, Houghton to Kanavarioti, 23 April 1955. 
\textsuperscript{96} Ibid.
\textsuperscript{97} Louros Archive, Peers to Kanavarioti, 10 August 1955.
Her desire to include this information about Greece revealed her enthusiasm for the lecture. This was a point where the two major events of 1955, Louros’ lecture and the Tokyo conference, intersected. The success of the HES would be shared at an international level in Tokyo’s conference.

The second report addressed issues of financial support in fields such as training, organisation, the foundation of clinics, and propaganda. More precisely, Peers had to make a report of how the money of the IPPF could be better distributed across the European countries. In order to do so she demanded information and ideas about possible contributions. She suggested the following ideas:

1. Training. Aid for training both medical and lay personnel by a.) sending experienced workers to each country and b.) sending workers from each country to train with other established national organisations.

2. Organisation. Experienced help with the formation of a voluntary association and the setting up for clinics.


4. Propaganda. Money for production and distribution of propaganda leaflets, etc.

Furthermore, Peers suggested that an appeal for financial aid would be made by the IPPF to trusts and foundations, and if any help was given it would be to support a specific project for one or two years, rather than a grant over a
longer period.\textsuperscript{98} Apparently, the HES was included in their plans for future financial aid.

Undisputedly, the HES was internationally recognised in family planning circles. There was developed a mutual intercourse about the dissemination of birth control movement, primarily at the theoretical level. The contribution of Clarence Gamble added the practical dimension in this network. The next chapter discusses Gamble’s involvement in the Greek eugenics and birth control movement, both by propaganda and contraceptive supplies.

\textsuperscript{98} Louros Archive Peers to Kanavarioti, 10 August 1955.
Clarence J. Gamble’s Contribution to Family Planning in Greece

Clarence J. Gamble was an American physician and a millionaire, heir to the famous soap company Procter & Gamble. He was interested in the problem of overpopulation and considered birth control the only way to tackle it. His determination in conjunction with his wealth permitted him to travel the world and contribute towards the establishment of birth control clinics. Gamble also founded the New York Committee on Maternal Health and the Pathfinder Fund, which covered the cost of function of the birth control clinics and the salaries of his representatives.

At the beginning of the 1950s, Gamble became interested in Greece. He was aware of the absence of a birth control clinic in Athens and insisted on offering assistance. Gamble and field workers associated with him, such as Edith Gates and Sarah Lewis, visited Greece many times, in particular during the 1950s and the 1960s. The purpose of their visits was to record and evaluate the situation regarding family planning in order to supply propaganda material and contraceptives. Their final goal was to establish a family planning programme in Athens that would include public education for “baby-spacing” and the use of contraceptives. After every visit, a report was completed to be distributed among the members of the IPPF and Gamble’s associations. There are seven reports dealing with Greece, from 1955 to 1961; four from Edith Gates, two from Gamble and one from Sarah Lewis. At the same time, and until 1964, Gates, Gamble and Lewis were in correspondence with members of the HES as well as with individuals
associated with health institutions and gynaecologists in private practice in Athens. In the following years, Gamble supported family planning in Greece with the shipment of contraceptives and birth control information material.

The earliest of Gamble’s letters to Kanavarioti is dated 23 December 1953.¹ It seems that they had already discussed the possibility to meet in Athens and Gamble informed Kanavarioti of the inconvenience of stopping in Greece on the way to India. However, he did not cancel the visit, only postponed it: “[...] unfortunately we won’t have time to stop in Athens as we had hoped. We will have to postpone that visit to some future time”.² In her response, Kanavarioti expressed her disappointment for the postponing of the visit, but she also hoped for another one in the future.³

The letter also sheds light on the relationship between Joseph van Vleck and the Greek eugenicists: “It was good to hear from Mr. van Vleck that you are keeping the organisation [the HES] active, and that progress is being made”.⁴ Van Vleck’s name appears in many letters; for example, when in 1960, Gamble referred to van Vleck’s visit in Greece,⁵ in relation to family planning; also in Valaoras’ letter to Kanavarioti.⁶ Van Vleck often visited Greece to give lectures and financially supported the HES, too.

More importantly, perhaps, the letter to Kanavarioti included Gamble’s generous offer to financially support the popularisation of the HES: “If a small amount of funds can help the Eugenics Society be more

¹ Louros Archive, Gamble to Kanavarioti, 23 December 1953.
² Ibid.
³ Louros Archive, Kanavarioti to Gamble, 16 January 1954.
⁴ Louros Archive, Gamble to Kanavarioti, 23 December 1953.
⁵ Clarence Gamble Papers, HMSc_23_77_1211, Gamble to Lewis, 21 October 1960.
⁶ Louros Archive, Valaoras to Kanavarioti, 18 August 1954 [in Greek].
active, I hope you will let us know”, Gamble wrote. And further, “It may be that printing of circulars or other material, or the mailing of notices or invitations will be required, which would not be possible without some contribution. If so, please write us”.7

Kanavarioti responded few weeks later saying that she distributed one of Gamble’s articles in Greek doctors in Athens.8 This was probably Gamble’s most recent article: “Human Sterilisation and Public Understanding” published in The Eugenics Review in October 1953.9 The main argument in it was the possibility of influencing the government by public education. Gamble used facts and figures provided by the Human Betterment Leagues’ activities across the USA to show that their campaign for sterilisation resulted in the sensitisation of the state officials and the passing of relevant laws. He justified his assumption that proper education (in fact manipulation) could lead to the acceptance of eugenics policies, such as sterilisation. While he did not specify it, he did discuss voluntary sterilisation. In general, Gamble was a keen supporter of propaganda and public education; this is the reason why he wanted to help the HES with information materials and was so eager to send the journal, Around the World News on Population and Birth Control, to as many readers as possible.

The HES, however, decided to refuse Gamble’s financial aid this time. The reason was the fact that the HES was not well-established and was not prepared to accept this type of funding yet:

7 Louros Archive, Gamble to Kanavarioti, 23 December 1953.
8 Louros Archive, Kanavarioti to Gamble, 16 January 1954.
I [Kanavarioti] thank you very much for your very kind offer to send our society a contribution for its initial expenses. Although we need funds, I feel that we are not yet quite ready to accept them as we would first like to have something more substantial to show to our donors. This feeling of mine is shared by the other members of the council to whom I mentioned your most generous offer.\textsuperscript{10}

The HES was also aware that before more formal relations were established with foreign organisations it needed official approval from the state. According to Kanavarioti:

We hope that in about three months time we shall have presented our projects to the general public, and I am sure that a small contribution from you would not only help to finance our activities until we become better known here, but it would at the same time give us a great moral encouragement to know that we have friends across the Ocean who share our ideas and ambitions.\textsuperscript{11}

The need for external support was illustrated by the use of the phrase “moral encouragement”. The members of the HES were aware of their risky and novel task to familiarise Greek society with eugenics and family planning.

\textsuperscript{10}Louros Archive, Kanavarioti to Gamble, 16 January 1954; the letter was communicated to van Vleck.
\textsuperscript{11}Ibid.
Without support from abroad, it would be very difficult for the HES to grow and carry out its proposed activities. Not surprisingly, then, prior to April 1954, there was little public activity and publicity around the HES. It only properly began at the beginning of 1955.

Import and Distribution of Contraceptives

Edith Gates visited Athens for the first time between 3 and 5 January 1955. Her first report discussed the illegal sale of contraceptives in Greece, a matter which was the subject of many discussions among foreign organisations, such as the IPPF and Gamble’s associations, and among some Greek gynaecologists who were interested in providing contraceptives to their patients.

Dimitrios Poumpouras, obstetrician-gynaecologist and General Secretary of the Athens Society of Obstetrics, commented at the HES’ meeting on 16 July 1953 on the difficulty and illegality of popularising contraceptives. Given that in Greece production or import of contraceptive devices or pharmaceutical preparation of contraceptives was illegal, any public education aiming at the diminishing of births or prevention of fertility would oppose the Greek law.

The most relevant legal document about contraceptives was Article 305 of the Greek Penal Code, introduced on 1 January 1951 regarding the

---

12 Clarence Gamble Papers, HMSc_23_77_1208, Report to the National Committee on Maternal Health of Edith Gates, Field Representative, Summary of Athens, (3-5 January, 1955); Copies of Gates’ report were sent to the IPPF London, Sanger, Brush, Roots, Dick, van Vleck and Vogt.

“Advertisement of the means for the artificial termination of pregnancy.” It declared that: anyone who publicly, with pamphlets, images or representations declared or advertised drugs or other subjects or ways by which he/she could provoke artificial termination of pregnancy or someone who offered his or someone else’s services for that purpose would be punished with imprisonment for up to two years. However, it was not illegal to inform or educate about the interruption of pregnancy performed in public hospitals, if the information came from 1.) a licensed physician, 2.) a legal merchant of means for the artificial termination of pregnancy; or 3.) a relevant publication such as a special medical or pharmaceutical journal. Article 305 did not explicitly prohibit the advertisement and trade of contraceptives, but methods and medication inducing abortion. Furthermore, this only referred to female, not male, contraception. This was probably the reason why Gates mentioned in her first report that: “It is still absolutely illegal to do, be or give out contraceptives-the law still exists, though men may buy things at any news stand. It is not yet time to send supplies, but mailing the News [Around the World News of Population and Birth Control] will be timely”. According to Gates, a more specific law prohibiting contraception was put forward by the National Hygiene Council (Ανώτατο Υγειονομικό Συμβούλιο) in 1957. Louros, who was a member of the council, and other gynaecologists, were therefore, reluctant to promote the use of

14 Greek Penal Code, article 305 (1951).
15 Ibid.
17 Clarence Gamble Papers, HMSc_23_77_1215, Gates to McEvoy, 21 April 1962.
contraceptives in public. As was shown in Tsacopa’s case, it was also difficult to pass them through the Greek customs and to distribute them. While the relevant legal text was not specific about the kind of contraceptives or their use, the majority of Greek gynaecologists were very cautious when dealing with the matter.

The HES was the recipient of the first shipment of contraceptives in Greece, as revealed by Louros’ letter to Gamble from February 1955. Louros wanted to distribute the supplies at Alexandra Maternity Hospital, as he had hoped to start a campaign for family planning. To this effect, he wrote to Gamble about a discussion he had with Gates about “the possibility of promoting the idea of Family Planning in Greece and possibly in the out-patient Department of the [Alexandra] Maternity”. The acceptance of Gamble’s offer was an important moment for the history of family planning in Greece. Until then, there was no active family planning programme or clinic devoted to it. Allegedly, the reason why Louros was in favour of family planning was primarily due to the fact that he was always against abortion. Furthermore, there was another reason relating to the issue of overpopulation in Greece. However, during the following years, Louros changed his attitude many times. Sometimes he was willing to distribute contraceptives to his patients; whereas in other instances, he showed no interest in family planning.

Betty U. Kibbee was one of Gamble’s assistants who tried to find a solution to the illegal sale of contraceptives in Greece by contacting Mr. A. McIver, who was then a representative of the UN and High Commissioner  

---

18 See Chapter 4.  
19 Louros Archive, Louros to Gamble, 13 February 1955.  
20 Ibid.
for Refugees in Greece. Kibbee knew that McIver was transferred in Athens and tried to take advantage of his post in order to facilitate the importing of contraceptives. Therefore she asked him if he could receive and distribute them in the country. In effect, Kibbee hoped that custom regulations “would not apply to you in your position with the United Nations”.

Notwithstanding legal obstacles, Gamble and his associates provided Greek gynaecologists and other health professionals with contraceptives by shipping them as “medical supplies” or “samples for vaginal use”. At that time the most popular female contraceptives were the sponge rubber, the diaphragm with spermicidal jelly and foam tablets. While Gamble tried to send more diaphragms than foam tablets to the Greek gynaecologists, it turned out that the latter was preferable both by doctors and female users.

When Gamble finally visited Greece in February 1956, he met Louros, Panayiotou and Kanavarioti. He filled a report with regard to the situation about family planning in Greece. At the outset, Gamble’s report referred to Louros and the difficulties he experienced in receiving supplies: “he had received the diaphragms and jelly which I sent him months ago and

---

21 Clarence Gamble Papers, HMSc_23_77_1209, Kibbee to McIver, January 9 1956.
22 Ibid.
had gotten them through customs after much difficulty and delay”. 24

Gamble proposed the supply of foam tablets which were not marked as contraceptives, and could, therefore, be easily imported. Renaming contraceptives “medical supplies” or “patent medicine” was the optimal way to avoid strict customs control. Soon it became the standard practice for the foreign suppliers of contraceptives to do this.

Following Gamble’s instruction, in March 1956 Kibee sent Louros three boxes each containing six diaphragms under the label “patent medicine”. 25 About a month later, on 16 April 1956, Gamble also informed Louros that he had sent a large amount of the contraceptive jelly “Metakol”. Although he feared problems with customs, he wrote Louros that an additional supply was ready to be sent. He would wait, however, until Louros was able to get them through customs without difficulty. 26

In thanking Gamble for the supplies, 18 diaphragms and 200 copies of Dickinson’s book, 27 which he received safely. Louros also mentioned that he tried, in vain, to convince the state officials to allow the free import of contraceptives. However, he was optimistic and he hoped “in the end to be successful.” 28

Meanwhile, the camouflaging of contraceptives as medicinal drugs continued. In a letter to Louros in 1957, Gamble talked about foam tablets,

---

24 Clarence Gamble Papers, HMSc_23_77_1209, C.J. Gamble, Summary of Greece, 1 March 1956.
26 Clarence Gamble Papers, Gamble to Louros, 16 April 1956.
27 Robert Latou Dickinson, Techniques of Contraception Control (Baltimore: Williams & Wikins, 1950). This book was funded by Gamble and the Planned Parenthood Federation of America.
28 Clarence Gamble Papers, HMSc_23_77_1209, Louros to Gamble, 24 April 1956.
called “Santronex”, which could be sent from England. Again, they would not have been labelled as contraceptives, but as pharmaceuticals against vaginal germs. A few days later, Gamble confirmed to Louros that the Rendell Company, located in England, could ship foam tablets to Louros. Trying to encourage him to accept it, Gamble wrote that foam tablets were very effective in India and Pakistan, where he had the chance to test them.

Kanavarioti was the person Gamble considered to be the most energetic in the HES. In a separate letter, he expressed his gratitude for her help while he was in Athens. Kanavarioti shared with Gamble her viewpoint that “the public opinion regarding contraception is improving with reasonable speed.” However, Gamble’s plans to distribute foam tablets in the Greek villages seemed to be far-reaching. Gamble believed that “they [the doctors] probably wanted to restrict their present prescription to pathological cases”. According to Louros “the time has not yet come to say that contraceptive work is being done in Greece”. He explained to Gamble that the problem was political. Greek politicians believed that “nothing should be done to discourage the multiplication of the nation because of “the great number of Slavs at our back”. Although Louros believed that the Greeks would be happier if they were half the number, most Greek politicians prohibited any means of birth limitation. Officially, the founding of a birth control clinic was only legally permitted in Greece in

---

29 Clarence Gamble Papers, HMSc_23_77_1210, Gamble to Louros, 18 July 1957.
30 Clarence Gamble Papers, Gamble to Louros, 23 July 1957.
31 Clarence Gamble Papers, HMSc_23_77_1209, Gamble to Kanavarioti, 14 March 1956.
33 Ibid.
34 Ibid.
35 Ibid.
1980, almost thirty years after Louros’ first attempts to familiarise Greek women with female contraceptives.

**Edith Gates’s First Meeting with the HES**

Prior to Gamble’s personal visit in Greece, Edith Gates visited the country twice to assess the family planning situation. As already mentioned, Gates was one of Gamble’s close associates, whom he financed to travel the world and popularise birth control. She had a particular interest in the Near East. There, she observed each country’s activities for family planning in order to promote the establishment of birth control clinics and disseminate family planning techniques. In a letter to Kanavarioti on 20 December 1954, Gamble announced Gates’ visit in Athens.\(^{36}\) Gates was already familiar with Greece, because she had worked there with the National Young Women’s Christian Association. Gamble took the opportunity to repeat his offer for providing existing clinics with contraceptives, or to establish a new birth control clinic. “Has the time yet come,” he pondered, “when it is possible to open a birth control clinic for the poor people of Athens? If this isn't yet possible, are there one or more hospital clinics which can give this service, if we provide them with the needed supplies?”\(^{37}\)

On the same day, 20 December 1954, Houghton also contacted Kanavarioti to describe Gamble’s activity, supposedly in preparation of Gates’ visit in Athens. Houghton pointed out that Gamble was not a member of the Governing Body of the IPPF, but acted independently. She

\(^{36}\) Louros Archive, Gamble to Kanavarioti, 20 December 1954.

\(^{37}\) Ibid.
acknowledged his efforts internationally, mostly by visiting countries and funding activities related to family planning. However, his efforts were not always appreciated, according to Houghton, due to the “unfortunate way in which he goes about the work”.\textsuperscript{38} Obviously the IPPF did not always approve of Gamble’s work, a fact which Houghton attributed to his attitude. She explained: “He is an extremely wealthy man who is used to acting without consulting others, and that always makes for trouble in organisations”.\textsuperscript{39} Gamble did not follow the code of practice of the IPPF or any other organisation; instead he formed his own organisations based on his rules. Obviously, Houghton aimed at informing Kanavarioti about Gamble and his delegates’ behaviour before their visit to Athens.

Kanavarioti was the first person in Europe who met Gates. As she was in Greece, it was somehow geographically more convenient, because Gates often travelled to the Near East, which is closer to Athens than London. Houghton shared all the available information about Gates with Kanavarioti. Thus we know that Gates worked as field representative in the countries of the Near East, mostly Egypt and Turkey, disseminating ideas of birth control and founding family planning clinics funded by Gamble. Houghton wrote that “None of us in London have met her, but she appears to have excellent qualifications in the field of social work and long experience with the Young Women’s Christian Association. I should say her age would be in the mid-fifties”.\textsuperscript{40} She also made clear that Gates did not come “under the auspices of IPPF but under the New York Committee on

\textsuperscript{38} Louros Archive, Houghton to Kanavarioti, 20 December 1954.  
\textsuperscript{39} Ibid.  
\textsuperscript{40} Ibid.
Maternal Health with which Dr. Gamble is associated”.\textsuperscript{41} The emphasis put on the distinction between Gamble’s work and that of the IPPF was prevalent throughout that letter. However, Houghton contacted Gates and advised her to meet Kanavarioti before attempting any other connection in Greece:

I [Houghton] said, however, that if she [Gates] was going to Greece on a personal visit, I was sure you [Kanavarioti] would be very pleased to meet her. She has your name and address, and as I understand she has friends in Greece you may hear from her […] I have not given her the names of Dr. Louros and Dr. Pantazis as I am anxious that she should do nothing of which you would not approve. I have also made the position perfectly clear to Dr. Gamble and I think he has accepted it.\textsuperscript{42}

On one hand, Houghton tried to keep Kanavarioti “on the IPPF’s side” but on the other hand she supported Gate’s visit in Athens. Furthermore, Houghton made it clear to Gamble that Gates “should not come to Greece specially to propagate family planning without first consulting you [Kanavarioti] as I doubted whether you would want the publicity at this stage”.\textsuperscript{43} Houghton’s cautious words confirm that the time had not come for birth control propaganda in Greece by the time of Gates’ visit in January 1955.

\textsuperscript{41} Louros Archive, Houghton to Kanavarioti, 20 December 1954.
\textsuperscript{42} Ibid.
\textsuperscript{43} Ibid.
At the beginning of 1955, Rotha Peers replaced Nancy Raphael as Honorary Secretary of the IPPF for Near East, Africa and Europe. Consequently, she was interested in Gates’ visits to these regions. On 23 February 1955 she sent a letter to Kanavarioti asking about her impression of Gates. Interestingly enough, Peers assured Kanavarioti that “anything you say will be treated in the strictest confidence”.\textsuperscript{44} Until then no one else from the IPPF had met up with Gates and Kanavarioti’s opinion was considered to be the only source of information. In combination with Houghton’s view that Gamble was not acting under the rules of the IPPF, the organisation wanted to know as much as possible about Gates’ field work.

In April 1955 Houghton repeated her inquiries about Gates, who had visited Greece in January 1955 and had already planned another visit for June 1955. Houghton wrote the following:

I believe Miss Gates plans to return to Greece before she leaves the area. I was rather worried that her insistence on seeing certain people might have made matters difficult for you but it seems to have turned out all right, and now you are getting some help from Dr. Gamble with contraceptives for the Maternity Hospital. I’d like to know sometime what you thought about Miss Gates’ capabilities as Dr. Gamble is keen that she would work as a field representative for IPPF None of us has met her

\textsuperscript{44} Louros Archive, Peers to Kanavarioti, 23 February 1955.
yet. Would you consider her a suitable person to travel around
for the IPPF trying to arouse interest and get groups organised?\textsuperscript{45}

In asking Kanavarioti about Gates, Houghton showed trust and appreciation. Furthermore, Houghton was aware of Gamble’s offer for contraceptives to the Alexandra Maternity Hospital in Athens. Alas, we do not have Kanavarioti’s response to these letters. As a result her opinion of Gates is not known. However, one can assume that it was positive due to their excellent co-operation during Gates’ visits. In January 1955, Gamble sent a letter to Kanavarioti, expressing his gratitude for her help during Gates’ visit: “It is good to hear from Miss Gates of her visit with you, and especially so to learn that the statutes of the Eugenics Society have been fully approved and registered with the government. I am glad to hear, too, of the plan for three committees to arrange for lectures”.\textsuperscript{46}

The Alexandra Maternity Hospital and the HES

In her first report on Greece, Gates described the Alexandra Maternity Hospital in Athens with obvious enthusiasm: “Certain American funds have presented Greece with a perfect demonstration of the “last word” (sic) in modern equipment”.\textsuperscript{47} Alexandra Maternity Hospital was established in 1954 predominantly thanks to Louros. Among others, the hospital included a model School for Midwives and Nurses, the “Queen Frederica” (Σχολή

\begin{flushright}
\textsuperscript{45} Louros Archive, Houghton to Kanavarioti, 23 April 1955.
\textsuperscript{46} Louros Archive, Gamble to Kanavarioti, January 1955.
\textsuperscript{47} Clarence Gamble Papers, HMSc_23_77_1208, Report […] Edith Gates, (3-5 January 1955).
\end{flushright}
Maión «Βασίλισσα Φρειδερίκη»), where Louros taught. Furthermore, the first Centre for Prenatal Examination (Μονάδα Προγεννητικού Ελέγχου) in Greece was established there in June 1977. It was the first centre of its kind in Greece and the fifth worldwide. From its inception, Louros and members of the HES, such as Ioannis Danezis and Dionysios Kaskarelis, were directly involved in running this centre.48 One year later, in 1978, Louros aided the establishment of a Laboratory for Cell Genetics (Εργαστήριο Κυτταρογενετικής) for the diagnosis and prevention of congenital diseases and a Centre for Family Planning (Κέντρο Οικογενειακού Προγραμματισμού).49 It is, therefore, not a coincidence that many innovative methods and advances in gynaecology took place at the Alexandra Maternity Hospital. During Gates’ visit Louros also presented the Sterility Unit (Μονάδα Στειρότητας) which he described as “opposite to your birth control”,50 a description which caught Gates’ attention. Louros and Alexandra Maternity Hospital were described by Gates as follows:

[Louros is] the proud director of the most perfect maternity hospital, the realization of a dream on which he has worked 17 years (and his father before him) and which he realises now through U.S. money. The equipment is complete from laundries and air conditioning to laboratories, every type of operating facility, research sections, sterility study, etc. This is to be the

49 Triantafyllia Adamantidou and Kiriaki Vantzeli, “The History of the Alexandra Maternity Hospital”.
National Centre for all Child-Maternal Health work in Greece, connected with the smaller local centres, and the new experiment in Mobile Units starting in January, 1955 under UNICEF in Thessaly. He also teaches in University-doctors, midwives and training school for nurses in hospital.\textsuperscript{51}

In her first report on Greece, Gates described Louros as “the leading doctor in the field”,\textsuperscript{52} with a keen interest in family planning. This became evident in February 1956 when Louros asked for more contraceptives in a letter to Gamble, almost a year after his first acceptance of Gamble’s offer. Louros must have received the first shipment of contraceptive diaphragms by April or May 1955, but used them much later, probably by the end of the year or in the early months of 1956.\textsuperscript{53}

On the other hand, Louros made clear that the HES would focus more on education, rather than on running birth control clinics. He openly insisted on presenting their work after the official publication of the HES statutes in February 1955. Kanavarioti and Pantazis outlined to Gates the content of the HES statutes and their plans. At the time of Gates’ first visit to Greece, the HES counted 40 members. The programme of public lectures was divided into three categories, each corresponding to three different target groups: a.) the general public, b.) medical groups and c.) educational institutions (schools, universities etc.). Twelve to fifteen lectures per year were scheduled on such subjects as genetics and heredity, demography and

\textsuperscript{51} Clarence Gamble papers, HMSC\_23\_77\_1208, Report […] Edith Gates (3-5 January 1955).
\textsuperscript{52} Ibid.
\textsuperscript{53} Clarence Gamble papers, HMSC\_23\_77\_1209, Louros to Gamble, 3 February 1956.
the history of eugenics.\textsuperscript{54}

Gates particularly appreciated Pantazis’ work, because he was more practical than most members of the HES. Pantazis, who was Vice-President and the Chairman of the Educational Committee of the HES, claimed that education was the first step towards the implementation of a family planning service. Pantazis counted three major obstacles to overcome in Greece: a.) the ignorance of the public, b.) the Orthodox Church and c.) the “unpreparedness of doctors to help women, in fact their uncooperativeness, because they make money on abortions!”\textsuperscript{55} Abortion had been one of the major social-medical problems in Greece for half a century, contributing to the low birth rate and to deaths or injuries of women performing abortions in private practices. Therefore, Pantazis organised lectures for both lay and professional audiences to promote family planning. His plan included the establishment of a consultative Centre for Family Planning for the public and the introduction of sex education in schools. The latter was going to be carried out by doctors who could reliably give pre-marital advice to the youth. Furthermore, while Pantazis blamed the Orthodox Church for the difficulties of introducing family planning in Greece, Louros considered that the reasons were, in fact, political.

\textsuperscript{54} See also Chapter 3.
\textsuperscript{55} Clarence Gamble Papers, HMSc_23_77_1208, Report […] Edith Gates (20-29 June 1955).
Gates’ second visit to Greece in June 1955 lasted much longer and was more fruitful than the first one in January 1955. Again, her focus was on the activities of the HES, but she also approached people and organisations outside of it. She dealt mainly with women’s associations, on which she reported details about their administration and activity. Moreover, she expanded the list of people to whom the journal *Around the World News on Population and Birth Control* would be circulated.

Already familiar with the leading people of the HES, Gates accepted their invitation to present her field work in the Middle East during a meeting of the Executive Board of the HES. She reported that her presentation was well received. Louros, in turn, reported the successful organisation of two open lectures on eugenics. Regarding contraceptives, he hoped that these would soon be distributed in all the newly-started maternal health programmes. In fact, he admitted that nothing had been done yet; Gates’ comment: “This is in the future!” shows her dissatisfaction with the situation. Given that Gamble had sent the supplies about two months before this meeting, she would probably have expected a more active plan. Gates mentioned that apart from Kanavarioti and Louros; also Pantazis, Konstantinides, Doxiadis and Katsaras attended the meeting.

During her second visit, Gates met Panayiotis Panayiotou, Associate Professor of Obstetrics and Gynaecology at the University of Athens and

---

57 Ibid.
member of the Executive Board and Education Committee of the HES. Panayiotou was one of the gynaecologists who wanted to promote a simple form of contraceptives in order to be easier for doctors to apply and for individuals to accept. However, Gamble was not enthusiastic about his ideas, such as showing slides in cinemas or advertising on the public transport in Athens, and commented that “this was more on eugenics rather than contraceptive lines”. Although Gamble thought that Panayiotou was not keen on providing his patients with contraceptives, he arranged that diaphragms and jelly were sent to him in October 1955. In December 1955, Panayiotou reported to Kibbee the difficulties he had experienced with customs, and it was only in January 1956 that he informed her that he had received them.

Contacts Outside of the Hellenic Eugenics Society

Gates summarised the problems of marriage and family planning in Greece in her second report (June 1955). First of all, she reported that the marriage ages between the sexes in Greece were very different than in Western Europe. On one hand, men pursued their personal development and generally married between the age of 30 and 35. On the other hand, women either began their sexual life very early, which resulted in many babies, or they chose to study first and then started a family between the age of 23 and 25. Moreover, Gates mentioned the fact that priests got involved in the

---

58 Clarence Gamble Papers, HMSc_23_77_1209, C.J. Gamble, Summary of Greece, 1 March 1956.
59 Clarence Gamble Papers, HMSc_23_77_1209, Kibbee to McIver, January 9 1956.
personal lives of the people, thus prohibiting contraception. As already mentioned, Pantazis acknowledged the Church as an obstacle in the use of contraceptives, whereas Louros did not.

Additionally, Gates emphasised the academic nature of the HES writing that Louros was “still more concerned with the intellectual programs, not as aware of these down to earth problems of the poorer people”.  

According to Gates, the HES should have included more lay people in order to become more effective in tackling the everyday problems of marriage and procreation. She believed that the real family planning programme could be better applied in institutions such as the clinics of the PIKPA and “other centres reaching to the masses”.

1. **PIKPA (Patriotic Institution of Social Welfare and Awareness)**

Gates’ first report (3-5 January 1955) brought to light PIKPA’s importance in the birth control movement in Greece. Gates and others belonging to Gamble’s foundation were interested in getting involved with the PIKPA, due to its large social network and its close relationship with Greek mothers. It was assumed that family planning guidance and supply of contraceptives would be easier through an already established network. The influence on women was also valued. Gates pointed out, however, that “[…] this must be tactfully handled as I understand the women in Greece each have their feelings of possession of “their” society”. The report also described

---

61 Ibid.
Tsaldaris as “The leading woman of Greece, according to Kanavarioti, and interested in fp [family planning]”\(^{63}\)

During her second visit in June 1955 Gates hoped to meet Tsaldaris and learn more about the function of the PIKPA. Kanavarioti mediated between Gates and some important people who otherwise could not have been contacted such as Tsaldaris.\(^ {64}\) As Gates noted in her first report, PIKPA’s network of clinics was ideal for family planning counselling. Tsaldaris was interested and in favour of introducing family planning advice, but she entrusted Dr. Saroglou, the Medical Director of the PIKPA, with the decision.\(^ {65}\)

2. **The National Council of Greek Women (Εθνικό Συμβούλιο Ελληνίδων)**

Kanavarioti also suggested Gates visit the National Council of Greek Women (NCGW). Gates was so impressed with its activity that she completed a separate section for the NCGW, attached to the main report.\(^ {66}\) This was a union comprised of 90 women’s societies, from Athens, Piraeus and other areas of the country and abroad. It was founded in 1908. It was acknowledged as a philanthropic institution and was under the patronage of Queen Frederica. It was also a member of the International Federation of Women’s Clubs and in 1951 it organised the first international women’s gathering in Athens, the Assembly of the International Council of Women. It

---

\(^{63}\) Clarence Gamble Papers, HMSc_23_77_1208, Report […] Edith Gates (3-5 January 1955).

\(^{64}\) Clarence Gamble Papers, HMSc_23_77_1208, Report […] of Edith Gates (20-29 June 1955).

\(^{65}\) Ibid.

\(^{66}\) Ibid.
was there that Tsaldaris gave a speech with the title “The Child in Greece”,\textsuperscript{67} in which she portrayed the history of child protection from antiquity to the twentieth century.

The NCGW’s main activity was to help women overcome their problems, either personal or professional, and to defend their rights. Its fundamental principle was gender equality. There were fifteen different branches of action, one of which was concerned with health issues. Gates focussed on it as a way to promote a eugenic programme. She estimated that: “they could give strong support to this eugenics program which could be presented by a lecture at one of their large congresses”.\textsuperscript{68} The NCGW published the magazine \textit{Hellenia: The Voice of Greek Women}\textsuperscript{69} in English and a book series under the title \textit{How to Take Care of your Health}. Among numerous social causes, the NCGW also instituted a legal advice office, night schools, cinema shows for children, arts and crafts workshops and communal meals. Most importantly, it was very active in securing the repatriation of Greek children abducted by the Communists. For this purpose it addressed appeals and protests to the UN and other international organisations, to mothers all over the world and to leading personalities.\textsuperscript{70} In addition, the NCGW succeeded in securing the right to vote for Greek

\textsuperscript{67} Lina Tsaldari’s Archive, 2/3/41/1, Tsaldaris, “The Child in Greece”, paper presented at the International Council of Women Conference, Athens, 1 April 1951.

\textsuperscript{68} Clarence Gamble Papers, HMSc_23_77_1208, Report […] Edith Gates (20-29 June 1955).

\textsuperscript{69} \textit{Hellenia} was published by the National Council of Greek Women; the Lyceum Club of Greek Women; the Hellenic Association of University Women and the Hellenic Girls Guides Association. On the first page of every issue there was a paragraph explaining the reasoning behind the title of the journal: “Among the many names of Goddess Athena, “Hellenia” was the one by which she was known and revered by the inhabitants of Cyzicus in Asia Minor. Surrounded as they were by foreign peoples and influences, Hellenia symbolised, and kept alive in their hearts, the ideals and transitions of Hellenism”. Lina Tsaldari’s Archive, 48/2/23/2.

\textsuperscript{70} Gamble’s Archive, HMSc_23_77_1208, Report […] Edith Gates (20-29 June 1955).
women, in 1929 for municipal elections and in 1952 for parliamentary elections.

3. **The Intellectual Women’s Society-IWS (Σύνδεσμος Ελληνίδων Επιστημόνων)**

Pantazis arranged a meeting with Gates and Mrs. Katherine Papadopoulos, a member of the Executive Committee of the Intellectual Women’s Society, another popular women’s club in Athens. The IWS published the journal *Halkyonides* (Αλκυονίδες), in which Dr. Popi Spelioti-Bazena, a gynaecologist and President of the IWS, often discussed issues of eugenics, such as heredity, mortality, social instability, biological debilitation, hygiene and morbidity.\(^{71}\) The meeting with Papadopoulos was promising because she was interested in family planning and enthusiastic about organising public lectures on this subject. During the meeting Papadopoulos expressed the IWS’s views on eugenics, thus: 1. Eugenics was not only a science, but a social affair which concerns everyone, 2. the principal aim of eugenics was the transmission of healthy traits to descendants and securing them the appropriate rearing environment, 3. prospective parents should be healthy, 4. suitability of the premarital certificate, 5. sterilisation was necessary in some cases, 6. harmony between parents should be psychological, corporal and spiritual, 7. prospective parents should be in stable financial situation, 8. the duty of the state and the IWS should be to organise the scientific study

---

and the application of eugenic practices and to protect marriages from psychological and financial difficulties.

4. **Centre for Newborns “The Mother” (Μητέρα)**

Another institution reported by Gates was the Centre for Newborns “The Mother”, founded by Spyros Doxiadis and funded by Queen Frederica. It offered protection for unmarried mothers and orphans. While it was spacious, only a small percentage of the building was in use. It also hosted a School for Nurses, funded by the UN. It is suggested that its establishment resulted from the negative social perception and discrimination against unmarried mothers, who were helpless and marginalised in the 1950s. It was established in 1953, but became active in September 1955.\(^{72}\)

**Edith Gates’ Third Visit to Athens**

Prior to her third visit to Athens, Gates contacted Louros. His response was this time disheartening saying that he would be delighted to meet her again but he was very busy organising a conference. He added: “our improvement is unfortunately not very satisfactory,”\(^ {73}\) probably regarding the distribution of contraceptives. Paradoxically, when they met, Louros welcomed her warmly and was eager to report on developments in family planning in Greece. On one hand, the National Hygiene Council opposed any work in family planning, claiming that there was no need for it, not even for poorer

---


\(^{73}\) Clarence Gamble Papers, HMSc_23_77_1209, Louros to Gates, 23 May 1957.
mothers. On the other hand, Louros received permission to run his own family planning clinic together with the sterility clinic at Alexandra Maternity Hospital, but only there.\textsuperscript{74}

As far as the practicality of contraceptives is concerned, Louros reported to Gates that Greek women found the foam tablets easier than the diaphragms, which were most of the times unsuccessful. Louros expressed his desire to receive more foam tablets under the label “samples for vaginal use”, because the import of contraceptives was still illegal in Greece.\textsuperscript{75} Panayiotou shared Louros’ view on the difficult use of the diaphragms. He argued that thousands of abortions were performed every year in Greece and suggested that foam tablets could be a solution to this problem. He also made a negative remark about another contraceptive method, the sponge with salt, which women did not like or trust.

Sarah Lewis’ visit\textsuperscript{76}

After Gates’ return to Massachusetts, she became Director of the central offices of the Pathfinder Fund. Holding that position, she proposed a possible funding for the HES in a letter to Louros in October 1960. She also informed Louros and Panayiotou about Mrs. Sarah Lewis, one of her colleagues, who was going to visit Athens in 1961.\textsuperscript{77} By that time, Kanavarioti had retired and Marios Raphael became the new secretary of the

\textsuperscript{74}Clarence Gamble Papers, HMSc_23_77_1210, Edith Gates, Renewed Contacts in Greece, 17-20 June 1957.

\textsuperscript{75}Ibid.


\textsuperscript{77}Clarence Gamble Papers, HMSc_23_77_1211, Gates to Louros, 10 October 1960; Gates to Panayiotou, 10 October 1960.
HES. Moreover, Gates probably quit field work and chose to offer her knowledge and experience through her new post at the office. New delegates, such as Sarah Lewis, succeeded her.

Louros agreed to welcome Lewis but informed Gates that the HES was no longer interested in family planning. Instead, the HES now focused “on subjects of general interest.” Louros repeated his position when he met Lewis some months later.

Gamble was also aware of Lewis’ trip to Athens and sent her a letter describing the situation. He recommended Kanavarioti, but she had already left for the USA. Based on previous remarks of Greek gynaecologists, Gamble advised Lewis to offer the foam tablets “Santronex” produced by Rendell’s Company or the “Gynamin” produced by the Coates and Cooper Company. Somehow unexpectedly, he described Louros as “an older man and because of his position in the Medical School, a conservative”. This view was not shared by Gates, who described Louros as “a distinguished gynaecologist in the finest modern maternity hospital. He is most cordial and interested”. Relying on her personal experience, Gates also suggested that Lewis meet Pantazis, Panayiotou and women’s clubs such as the National Council of Greek Women, the Intellectual Women’s Society and the PIKPA.

Upon her arrival, Lewis contacted Louros, who “said at once that he was not much concerned with birth control”. There is a paradox in Louros’ thinking regarding birth control. As already mentioned, Louros was the first

---

78 Clarence Gamble Papers, HMSc_23_77_1211, Louros to Gates, 17 October 1960.
79 Clarence Gamble Papers, HMSc_23_77_1211, Gamble to Lewis, 21 October 1960.
80 Clarence Gamble Papers, HMSc_23_77_1211, Gates to Lewis, October 1960.
to introduce family planning in Greece in 1955, at his clinic at Alexandra Maternity Hospital. By 1960, however, he had changed his mind. Louros justified his imbalanced attitude to Lewis with a series of arguments, such as the decline of the birth rate in Greece and the absence of birth control in the neighbouring countries. Tellingly, in 1956, Louros had argued exactly the opposite, when he told Gamble that he did not agree with the Greek politicians who thought that the population should increase in order to secure the borders of the country.\(^{82}\) Furthermore, in 1957 he asked for more contraceptives and propaganda material to be sent to Greece. In addition, in his 1960 article “Fertility, Sterility and Overpopulation”, Louros endorsed neo-Malthusianism and raised the danger of overpopulation.\(^{83}\) He also recognised birth control as one of the most effective solutions to the problem of overpopulation. At the same time, however, he questioned some contraceptive techniques: “Another factor to be considered is the question whether or not extended voluntary contraceptive methods may produce an involuntary sterility”.\(^{84}\) Louros’ argument was justified by his own observation of vaginal irritation after the use of foam tablets. Added to this, he argued that: “It would be a grave national error for any nation to control its population while its neighbour’s growth was not also limited”.\(^{85}\) In 1961, obviously because of the low birth rate, Louros claimed that: “Greece could not be expected to use birth control when a vast frontier had to be guarded against so many adjoining countries, when those countries were not

---

\(^{82}\) Clarence Gamble Papers, HMSc_23_77_1209, C.J. Gamble, Summary of Greece, 1 March 1956.
\(^{84}\) Ibid.
\(^{85}\) Ibid.
practicing birth control. The whole question hinges on the neighbours”.\textsuperscript{86} In almost all neighbouring countries, particularly Turkey and Egypt, the population was on the increase, a fact which caused insecurity in Greece. When Louros met Gamble a few months later, in April 1961, he voiced a moderate view: “Greece could be better off with half as many inhabitants, but she would not be safe”.\textsuperscript{87}

In 1962, Louros contacted the then General Secretary of the Eugenics Society in Britain, successor of Blacker, G.C.L. Bertram. Among other things, Bertram sent him a reprint of his article “What are people for?”\textsuperscript{88} Louros’ response was positive. He particularly “appreciated” Bertram’s “urge […] for an international effort under the United Nations to produce a world development organisation so as to try to face the overpopulation explosion”.\textsuperscript{89} In the aforementioned text Bertram extolled contraception and world-wide population control. In his own words: “Contraception is a vehicle for freedom and responsibility in the Western world. It is a blessing so far spread to only a small fraction of the world’s population”\textsuperscript{90} and “population limitation must indeed be brought about on the widest scale”.\textsuperscript{91}

Apparently, Louros may have supported birth control to tackle the world’s overpopulation problem, but he thought it inapplicable to Greece,

\textsuperscript{87} Clarence Gamble Papers, HMSc_23_77_1214, Gamble’s Report on Athens, Greece, 19-25 April 1961.
\textsuperscript{89} “Hellenic Eugenics Society: Louros to Bertram”, 19 June 1962 in [\url{http://wellcomelibrary.org/player/b16238096} accessed 12 December 2014]
\textsuperscript{90} Bertram, “What are people for?” p. 378.
\textsuperscript{91} Ibid.
because it was not an overpopulated country. The law prohibiting the
distribution of contraceptives played an important role in his change of
heart, because he tried many times to influence the National Hygiene
Council and the Ministry of Health to change it, but unsuccessfully.
However, he stated in his article (1960) that:

[…] medicine can occasionally advise, but definitely cannot
carry out a deliberate policy, especially where such a policy
would have international repercussions. On the other hand, it is
medicine’s moral duty to work to improve the treatment of the
individual sterile couple, although the problems and dangers of
world overpopulation must be recognised and given immediate
and serious study.  

In addition, the HES’s newsletter, published in 1962, presented the view of
the US Ministry of Foreign Affairs (announcement no. 827) about
population issues, represented by Mr. William Nanley. Nanley, as Louros
explained, mentioned that it did not matter whether the population of India
is 500 or 800 million, but whether these people could be properly nurtured,
dressed and accommodated. What was necessary was to develop our
knowledge about population issues by advancing scientific, technological,
social, political and economic research. The US offered its expertise on
population issues to other governments if requested. Moreover, Nanley
mentioned that, even if it sounded unreal to Americans, birth control was

not a central matter of discussion in many countries of the world. Given that Louros was responsible for the editing and distribution of this newsletter, it seems that he agreed with that opinion.

Two years later, in 1964 Sergios I. Mantalenakis, a gynaecologist and one of Louros’ students, sent to him a letter to report his impressions from a conference about intra-uterine contraceptive devices (IUD) held in New York. Louros’ response disappointed Mantalenakis because he admitted that: “The issue [of IUD] can only be in theory for us, because the use of contraceptives has been rejected by the National Hygiene Council long ago. This is because our [Greek] population declines and we do not have any interest in diminishing it unless an international decision is made”. Louros further added “I have in mind the damage stemming from Gafenberg’s contraceptive device, which is condemned by all gynaecologists and I am, therefore, very cautious about contraceptives”. Louros’ letter confirms that by 1964 he had finally abandoned the promotion and use of contraceptives in Greece. He was, however, open to an internationally organised family planning movement. The biopolitical overtones experienced in Greece and the uncontrollable world population growth troubled Louros for decades; oscillating between one side and the other. Predominantly, Louros supported family planning, but he ended up conforming to the legal concept of encouraging births nonetheless. As Marius Turda has suggested, “eugenicists—like other professionals—were frequently enveloped by their social and political existence, and often

adhered to dominant social and political practices”; Louros aptly falls within this description.96

During Lewis’ visit therefore Louros limited the discussion to other medical issues apart from family planning, such as the drop in infant mortality rates and the raising of life expectancy rate. In addition, he highlighted the fact that there were too many doctors and not enough teachers, resulting in poor education levels in Greece. Moreover, Louros explained to Lewis that the HES was part of the Greek social welfare apparatus, therefore, when trained doctors from the HES contacted people at workplaces and offered medical advice; they showed anti-cancer films and organised public discussions. He also informed Lewis that contraception remained illegal except in cases where there was medical contraindication. When Lewis told him that she was more interested in maternal health of poor women, not birth control on a national basis, Louros happily put her in contact with the then President of the PIKPA, Mrs. Thalia Voyla.97 In a way, Louros transferred the debate about family planning from the HES to PIKPA.

Lewis took advantage of this connection and visited the PIKPA premises and discussed family planning issues with many people there. As a general impression, Lewis realised that apart from condoms, the majority of the Greek women were not aware of the other types of contraception. As a result, propaganda and education of midwives, social workers and teachers was deemed necessary. At the same time the problem of numerous abortions persisted during the 1960s and Lewis wondered: “how do we break the

96 Turda, Modernism and Eugenics, p. 119.
abortion racket among the hundreds of doctors who practice it?"98

Lewis was impressed by the PIKPA and its work. According to Voyla, the PIKPA received 6 to 10 babies from Alexandra Maternity Hospital per week for adoption, but whenever was possible they persuaded mothers to keep their babies. Voyla showed Lewis around the kindergarten, took her to the children’s rehabilitation centre in the Voula neighbourhood and to the “Elliniko” children’s home where she met Mrs. Mary Miller and Nitsa Th. Kalliga.

Dr. Tsakos was the administrator at another PIKPA’s branch, in Penteli a suburb of Athens. He had studied hospital administration in the USA; consequently Lewis believed that his foreign training would help. Tsakos was interested in family planning and asked for information materials and to receive the journal *Around the World News on Population and Birth Control*. Although optimistic, Lewis was cautious about how influential UNICEF and the WHO were with the PIKPA. She believed that these international organisations could discourage Tsakos from promoting family planning techniques in his institution.

Lewis also visited the Aghia Sophia Children’s Hospital, where she met Mrs. Stella Megalou, Matron of the Nursing Service, who was in favour of family planning. Also present at the meeting was Mrs. Helen Stratigaki, Director of Education for nurses, who only knew of diaphragms, not the foam tablets or the sponges. Lewis wrote in her report that in a future visit Mrs. Sotiropoulou, Director of the Queen Frederica School of Nurses (hosted in Alexandra Maternity Hospital), should also be contacted.

---

Following Lewis’ report on Greece and her personal meetings, Gates took the chance to approach more people and associations in Greece by mail. As in the past, she showed great interest in the PIKPA and sent a letter and relevant literature to Dr. Tsakos. She wrote:

Having studied in the United States you will know that this idea of planning ones family for better health and family life, as well as for giving the children their best advantage in education and care is just taken for granted by the majority of the population. As everywhere we are always trying to bring the idea to the poorer, less educated who do not understand and realise the importance of such a health program.\footnote{Clarence Gamble Papers, HMSc\_23\_77\_1212, Gates to Tsakos, 9 April 1961.} Gates tried to convince him that the PIKPA with so many branches all over Greece could become the most strategic association to promote family planning as part of their regular “pre-natal and post-natal care, an integral part of the total Mother and Child Health program, as our American Public Health Association has recently so definitely recommended”.\footnote{Ibid.} In conclusion, Gates expressed the Pathfinder Fund’s interest in helping PIKPA in every possible way, but mostly regarding the supplies of contraceptives.

In a separate letter, having the same purpose as that for Tsakos, Gates approached Miss Elizabeth Papoutsidaki also working at the PIKPA’s branch in Penteli and who also had lived in the USA.\footnote{Clarence Gamble Papers, HMSc\_23\_77\_1212, Gates to Papoutsidaki, 26 April 1961.} Gates sent her...
information on family planning and a few copies of Dickinson’s book. In addition, she sent some leaflets under the title “Two Simple Methods”. Supposedly, the title referred to the foam tablets and the sponges that were easier to use than the diaphragms and simultaneously very effective. Gates informed her that the Pathfinder Fund was willing to send some samples of those simple methods to the PIKPA.

Mrs. Helen Stratigaki, working at the Aghia Sophia Children’s Hospital in Athens, received a letter and leaflets for family planning from Gates.\textsuperscript{102} The content of the letter was essentially the same as the one to Tsakos and Papoutsidaki. Gates recommended “baby-spacing” and family planning programs to alert the poorer, uneducated mothers who visit those centres. As implied in the letter, Stratigaki had asked Lewis to send samples of foam tablets, therefore, Gates sent her “Santronex” foam tablets, produced by the Rendell’s Company labelled as “Vaginal Hygiene” and marked as “Medical Samples for trial”.

It seems that Gates tried to create a network in Greece, where the PIKPA, the Aghia Sophia Children’s Hospital and the Queen Frederica School of Midwives would be joined under the leadership of Panayiotou. She suggested, therefore, contacting each other and uniting to promote this “important health program to your mothers”.\textsuperscript{103} Gates relied on Panayiotou because he was the only one who really embraced family planning in Greece and could take action towards the distribution and use of contraceptives. Panayiotou was one of the few Greek gynaecologists who wanted to eliminate illegal abortions, but admitted that “you cannot stop the

\textsuperscript{102} Clarence Gamble Papers, HMSc_23_77_1212, Gates to Stratigaki, 26 April 1961.
\textsuperscript{103} Ibid.
abortionists”, which indeed depicted the Greek reality. Lewis mentioned in her report that Greece at that time had 4,000 illegitimate babies a year. In agreement with Louros, Panayiotou did not blame the Orthodox Church for the absence of contraception and differentiated it from the Catholic Church, who was strictly against the use of contraceptive methods. He asked for foam tablets labelled “Free samples for trial”. Apart from Panayiotou, Pantazis at Marika Iliadi Maternity Hospital received “Santronex” foam tablets labelled as “Physicians Samples”.

Gates sent Panayiotou a letter in which she referred to the people whom Lewis met and Gates corresponded with afterwards. Their target was to establish contacts with institutions where women most often visited to receive pre-natal or post-natal advice. Therefore, Gates wrote: “Maybe if the women took some positive action, the advice to mothers could be quietly integrated into the regular post-natal word”. Meanwhile, she admitted that she had lost her faith in the work of the HES: “I begin to think the Eugenics Society isn’t going to do anything, really, in family planning, is it?” Bearing in mind the discussion between Louros and Lewis, Gates was easily convinced that the HES was not going to continue the dissemination of birth control techniques. Instead, Gates turned her interest to institutions such as the PIKPA. However, she maintained contact with members of the HES, whom she trusted, such as Panayiotou, Pantazis and later Danezis.

---

105 Clarence Gamble Papers, HMSc_23_77_1212, Gates to Panayiotou, 26 April 1961.
106 Ibid.
107 Ibid.
The Commercialisation of Contraceptives

From mid-1961 to 1962, Gates corresponded with a Greek import-export company, Chr. Nicolakis Company, based in Athens. The first contact was made with the owner of the company who was acquainted with Helen Stratigaki, working at the Aghia Sophia Children’s Hospital in Athens. Nicolakis expressed his desire to establish a professional connection with Gates in order to import contraceptives and introduce this “important health service to Greek women”. Gates only responded several months later, in November 1961, by sending two consecutive letters. She provided him with the relevant information regarding the manufacturing of foam tablets, in case he wanted to produce rather than import them. She informed the Rendell’s Company about Nicolakis intention to start a business distributing contraceptives in Greece. Moreover, Gates referred to a Greek woman who probably had governmental connections and would facilitate the import of foam tablets. Her name or profession were, however, not mentioned.

Meanwhile, Nicolakis had sent his request to the Rendells’ Company and also tried to reach an American company to provide him with the spermicidal cream-gel called “Immolin”. Nicolakis wanted Gates’ opinion about his new connections and about the product “Immolin”. On Gamble’s advice, Gates informed him that both gels and foam tablets were effective, but the foam tablets were cheaper. She was enthusiastic about Nicolakis’ interest in contraceptives. Nicolakis responded with a thank-you

---

110 Clarence Gamble Papers, HMSc_23_77_1212, Nicolakis to Gates, 30 December 1961.
letter on 3 February 1962,\textsuperscript{112} but after that the correspondence between them faltered.

**Gamble’s Second Visit to Greece**

Gamble visited again Greece from 19 to 25 April 1961 to participate in a conference organised by the Queen Frederica School of Midwives in Alexandra Maternity Hospital. In his presentation, Gamble discussed the problem of large families, and provided information about simple contraceptive methods such as the foam rubber and the sponge. Following this visit, Gates sent relevant contraceptive supplies to the School of Midwives, again labelled “for vaginal hygiene”.\textsuperscript{113} Gamble described the use of the tablets to Mrs. Sotiropoulou and offered some, but she did not want to accept them before getting permission from Louros.

While in Athens, Gamble also met Panayiotou who repeated his request for foam tablets. Panayiotou informed Gamble that he contacted the Greek Medical Association in order to change the law forbidding the importation and distribution of contraceptives and was optimistic. Panayiotou also tried to use the sponge and salt method, but his patients did not accept it and consequently rejected it.

Finally, Gamble met Louros and discussed family planning in Greece with him. Louros argued that the time was not appropriate for a change to the prohibitive law yet, and reiterated his position against sterilisation. Louros admitted that he tried to get along with the government

\textsuperscript{112} Clarence Gamble Papers, HMSc_23_77_1212, Nicolakis to Gates, 3 February 1962.

\textsuperscript{113} Clarence Gamble Papers, HMSc_23_77_1212, Gates to Sotiropoulou, 22 June 1961.
and, therefore, used contraception only in few, extreme cases.  

McEvoy’s Prospective Visit

In a letter from Gates  and another from Gamble we learn about Mrs. James McEvoy’s visit to Greece in the summer of 1962. In providing McEvoy with background information, Gates referred to the HES as “a very cautious association which has only taken the eugenics approach and has been so fearful of the law of the land and the Church that they have not been willing to organise any family planning clinic—or even to use the term “family planning”. Furthermore, she claimed that only Panayiotou, who was a leading gynaecologist and truly interested in the problem, actively supported family planning in Greece. He was keen on simple contraceptives which were more readily accepted by women. Gates also mentioned Kanavarioti, who although she had resigned three years ago remained the most active figure in the promotion of family planning and eugenics in Greece. Gates believed that: “she [Kanavarioti] would be an interesting person to meet and I feel sure it is a loss to the society [i.e. the HES] that she is no longer active.” Gamble repeated Gates’ position on the situation in Greece, but also provided McEvoy with the information that Joseph van

116 Ibid.
117 Ibid.
118 Ibid.
Vleck was in Athens to discuss birth control and proposed a meeting between the two.¹¹⁹

In the following years, the contact between Greek eugenicists and Gamble and his delegates faded. Not even Panayiotou was in contact with Gates or Gamble for some time. Gates sent him a letter in January 1963¹²⁰ and then another in 1964,¹²¹ probably without receiving any answer. Initially, Gates sent him a copy of the *Family Planning News* and a new pamphlet under the title: *Family Planning: A Challenge to Health Workers in Every Nation* in order to distribute it to social workers, nurses, midwives etc. This was written in everyday language to be easier for more people to understand. The Pathfinder Fund was willing to send as many pamphlets as he wanted free of charge, but, as it seems by her next letter, Panayiotou did not respond. In the second letter Gates informed Panayiotou about her meeting with Dr. Danezis at the IPPF conference in London. She also referred to the previous letter and demanded an answer about the distribution of the pamphlets and the situation regarding family planning. In addition she informed him about a new intrauterine contraceptive method that Gamble also endorsed. He wanted to send samples to gynaecologists for trials in order to gather their reports and records.

During the same period, in September 1964, Gates contacted Ioannis Danezis following their meeting in London.¹²² She complimented him on his work in educating doctors on family planning and the use of contraceptives. She asked if the Greek doctors had started to counsel parents

---

¹¹⁹ Clarence Gamble Papers, HMSc_23_77_1215, Gates to McEvoy, 21 April 1962.
¹²⁰ Clarence Gamble Papers, HMSc_23_77_1215, Gates to Panayiotou, 17 January 1963.
¹²¹ Clarence Gamble Papers, HMSc_23_77_1215, Gates to Panayiotou, 3 September 1964.
¹²² Clarence Gamble Papers, HMSc_23_77_1215, Gates to Danezis, 3 September 1964.
about spacing their babies, something that Danezis already had been doing. Gates sent him copies of the above named pamphlet *Family Planning: A Challenge to Health Workers in Every Nation* and the book *The Complete Book of Birth Control* and some samples of the new intrauterine contraceptive method. Moreover, Gates referred to Danezis’ willingness to publish a leaflet for family planning in Greek and adapted to Greek customs. On behalf of the Pathfinder Fund, she assured him that “We would be glad to make a financial contribution for this purpose”.123 Danezis was the treasurer of the HES from 1965 to 1967 and in 1974 was its president. He published regularly about family planning and his latest articles came out as recently as 2002.124

**Propaganda**

As mentioned before, Gamble paid particular attention to propaganda, public education and the transmission of contraceptive methods to physicians. He and his delegates in Greece disseminated family planning by personal meetings and lectures; by distributing the journal *Around the World News on Population and Birth Control* and by providing the gynaecologists with the then popular book: *Techniques of Contraception Control*, by R. L. Dickinson.125 Pamphlets such as *Family Planning: A challenge to Health Workers in Every Nation* were also distributed.

In her first report, Gates proposed the mailing of the *Around the

---

123 Clarence Gamble Papers, HMSe_23_77_1215, Gates to Danezis, 3 September 1964.
World News on Population and Birth Control to a list of people that she and Kanavarioti put together. Kanavarioti was characterised by Gates as “still the lay leader, with a real sense of possession of “her” organisation;”126 and so she trusted her opinion. In every report there was a section with a list of “important contacts”. In her second report Gates also included names of individuals who needed contraceptives, not only the journal. Birth control education escalated to birth control application, as was Gamble’s main purpose. In a letter to Kanavarioti, Gamble estimated that they could send the journal to a hundred people in Greece, if Kanavarioti provided them with more names and addresses of people.127 Gamble took the opportunity to request a list of people whom he wanted to receive the journal in his letter to Kanavarioti in January 1955.128

Kanavarioti, in turn, sent him a list marking with an asterisk the members of the Board of the HES, as follows:

Dr. Doxiadis S., paediatrician
Dr. Constantinidis C., Professor at the University of Athens
Dr. Louros N., Director of the Maternity Hospital “Alexandra”
Dr. Mantellos A. General Director of the Ministry of Welfare
Dr. Panayiotou P., gynaecologist
Dr. Saroglou C., paediatrician and Medical Director of the PIKPA
Mr. Phylaktopoulos G, Professor at Athens College
Dr. Pantazis G, Professor at the University of Athens

Other names included important scholars, such as George Alivizatos,

127 Clarence Gamble Papers, HMSc_23_77_1209, Gamble to Kanavarioti, 14 March 1956.
128 Louros Archive, Gamble to Kanavarioti, January 1955.
Konstantinos Moutousis and Konstantinos Charitakis, all professors at the Medical School of Athens and supporters of eugenics; and Theodoros Vlissidis, Dean of the University of Athens. On 21 April 1955, Gamble informed Kanavarioti that he sent propaganda material and supplies according to her list.\textsuperscript{129} Later, Lewis filled another list of names whom to send the journal or samples of contraceptives or information materials. This time the enlisted people included either American or British nationals who lived in Greece; and some individuals working in women’s and children’s institutions.

Gamble’s report in 1956 contained an overview of the work carried out by the HES, regarding public education. He mentioned that the open lectures continued and attendance was satisfactory. At the time when Louros was supportive of birth control, he suggested a more energetic plan which consisted of the publication of books and posters on eugenics in order to educate the patients of the Alexandra Maternity Hospital. He mentioned that the Alexandra Maternity Hospital coped with ten thousand cases per year, to which he had direct access to provide with family planning guidance. Gamble thought that the suggested budget of 6,000 dollars for publications was very ambitious for a first attempt,\textsuperscript{130} but he agreed to send 200 copies of Dickinson’s book on contraception to be studied by doctors and students of medicine. Simultaneously, Dr George Adamopoulos requested the same book\textsuperscript{131} which was distributed with the Around the World News on Population and Birth Control in November 1955. Finally, Louros indeed

\textsuperscript{129} Louros Archive, Gamble to Kanavarioti, 21 April 1955.
\textsuperscript{130} Clarence Gamble Papers, HMSC\_23\_77\_1209, C.J. Gamble, Summary of Greece, 1 March 1956.
\textsuperscript{131} Clarence Gamble Papers, HMSC\_23\_77\_1209, Adamopoulos to Gamble, 8 February 1956.
received 200 copies of the book in 1956, in order to distribute it to students at the Medical School and gynaecologists at the Alexandra Maternity Hospital. Panayiotou on the other hand expressed his desire to translate Dr. Dickinson’s *Techniques of Contraception Control* into Greek.

Gamble and the Greek eugenicists favoured propaganda. During the 1950s and 1960s, the *Around the World News on Population and Birth Control* and Dickinson’s book played also an important role in disseminating information about birth control, alongside the conferences and the open lectures regarding family planning and eugenics. Contraception and family planning was widely discussed in meetings and conferences regarding population problems, either international or domestic. In what follows, the central arguments in favour or against family planning will be discussed in the context of the HES’s conferences.
Chapter 6

Population problems and demography

In a recent work entitled Elements of Demography (Στοιχεία Δημογραφίας) it was argued that the systematical observation of the Greek population’s natural movement started in 1924 with the application of Law 2430/1920, which founded the General Statistical Service of Greece (Γενική Στατιστική Υπηρεσία της Ελλάδος).¹ The Statistical Service introduced a new method for the registration of newborns. Each individual card included the name, date and place of birth and other details of every newborn. From 1928, they also gathered information from every other civil service that registered newborns.

Few years after the proper establishment of the Statistical Service, Emmanuel Lampadarios and Vasilios Valaoras wrote an article on Greek population² as a response to the work of Dr. G. Banu L’ Hygiène de la Race.³ Banu included the Greek population in the group of “stable or ageing” populations, but Lampadarios and Valaoras claimed that he had no accurate indications to defend his argument. Indeed, until the outbreak of the Second World War, Greece did not experience demographic decline, with the exception of periods of war. Moreover, the addition of approximately 1.5 million refugees from Asia Minor to the mainland Greek

¹ Byron Kotzamanis and Eleftheria Androulaki, Elements of Demography (Volos: University of Thessaly, 2009) [in Greek].
population justified the increase of the total population. Lampadarios and Valaoras claimed that the Greek population was progressive until 1936 because the available means of research and measurement indicated an increase on birthrates and a decrease on mortality rates, particularly those of infant mortality. As a result, Banu’s argument was unsupported by accurate data. However, they admitted that only after the 1930s the Statistical Service produced and published accurate results.⁴

Unfortunately, the Second World War and the German occupation were inhibiting factors for the further development of the Statistical Service. There were internal and external relocations, which disorganised the administration. Until 1950, there were considerable efforts at the reorganisation of statistical services, although they were not successful. It was only in 1956, that the “National Statistics Service of Greece” (Εθνική Στατιστική Υπηρεσία της Ελλάδος, ΕΣΥΕ) replaced the first Statistics Service.

The most important Greek demographer, Vasilios Valaoras, whose work was both extensive and remarkable,⁵ already in the introduction of his work, *Elements of Biometry and Statistics* (1943),⁶ defined and described statistics and biometry and their relations with eugenics. He established a connection between biostatistics and public hygiene by claiming that biostatistics was the only means of “counting” the results of public hygiene policies.⁷

---

⁷ Ibid., p. 13.
Valaoras referenced Francis Galton’s work on the research of genealogy. He claimed that Galton successfully applied statistics to research on heredity and praised his book _Natural Inheritance_. In this book Galton introduced, for the first time, methods of measuring the similarity among relatives in terms of “bodily and spiritual dimensions” and personal habits. Furthermore, Valaoras expressed his agreement with Karl Pearson that Galton transformed the problems of evolution into problems of biometry. One of his beliefs was that there was no social equality, because lower classes and poor people were more exposed to diseases and death than the rich.

As was discussed in previous chapters, Valaoras was also a member of the HES which dealt with population problems and demography. The importance of these subjects was highlighted mainly at three conferences: in 1959 “The Problem of Overpopulation” (Το Πρόβλημα του Υπερπληθυσμού), in 1974 “The Problems of the Elderly” (Προβλήματα μεγάλων ηλικιών) and in 1975 “The Reproduction Problems of the Greek Population” (Προβλήματα Αναπαραγωγής του Ελληνικού Πληθυσμού), but also on other occasions, such as in the conference held in 1971 “Environment and Survival” (Περιβάλλον και Επιβίωση). They discussed many aspects of demography; particularly the constant problems of sub—

---

8 Francis Galton, _Natural Inheritance_ (London: Macmillan, 1889).
and over—population, infant mortality, urbanisation, differential fertility, low birth-rates and the role of the state in these concerns. However, much earlier than these meetings, Louros addressed the problem of overpopulation and the need for family planning in his lecture “Eugenics: an Appeal” in 1955.

1. Contraception and Overpopulation

In 1958, a few years before the official announcement of the marketing of “the pill”, the Greek magazine Images (Εικόνες) hosted a four-page article on it titled: “A Pill against Malthus’ Prophecy”\(^{14}\) with the interesting subtitle: “Did science discover the best way for birth control?” The journalist portrayed the problem of overpopulation and presented the opinions of the Archbishop of Athens, Theokletos, and Professor of Obstetrics and Gynaecology Nikolaos Louros. It can be said that this article depicted the predisposition of the religious and academic-scientific points of view in Greece at the time. The Church was not very much involved with population problems, while the academic community seemed more concerned. Interesting articles in the daily press appeared at the same time, such as the translation in Greek of an interview of Bernard Russell about overpopulation.\(^{15}\)

Archbishop Theokletos needed no more than a few sentences to express the Orthodox Church’s view on overpopulation. He claimed that the population growth did not pose any danger. He actually referred to a verse

\(^{14}\) Anon., “A Pill against Malthus’ Prophecy”, pp. 30-33.

\(^{15}\) Gerald MacKnight, “The Great Problem of Overpopulation: an Interview with Bernard Russell”, Kathimerini (3 September 1958), p. 5 [translated in Greek].
from the Bible about Divine Providence (Mt. 6: 22-33) saying that God could take care of every living being on Earth. As a result, theologically speaking, overpopulation was not a problem.

Louros on the other hand did not share the Archbishop’s opinion. He insisted on the view that the Greeks should deal with two, seemingly contradictory, population problems; the (poor) large families and sterility. According to him, both problems could be sufficiently tackled with the study and application of a family planning strategy adapted to the best interests of the Greek race. He condemned strict birth control measures, but approved of regulation of births following the precise meaning of “family planning”.

In addition, Louros claimed that unless the state takes some serious measures regarding the problem of overpopulation then academic discussions for population problems are pointless. He specifically recommended the parameters that the state should consider: the financial state of the citizen, the problem of housing and nutrition, the level of health and disease, subsidies, pensions, inadequate education, marriage and miscegenation, and finally the pension age of workers. The essential point, however, was the prerequisite that this political movement against overpopulation should be implemented via the prism of eugenics, and not the prism of partisan interests; the purpose was to improve the qualifications of the Greek race to the utmost limit, not to pursue political esteem.

Louros discussed the general observation that rich people procreate less than the poor ones. While he referred to the relevant studies of Apostolos Doxiadis and Thrasyvoulos Vlisides about the disproportionate
birth rates between high and low social classes; Louros openly questioned the absolute efficiency of rich children.

On the financial level, Louros argued that the Greek economy, although improved after the wars, could not absorb the surplus of the Greek population in a few decades. In Malthusian terms, he claimed that if the Greek population decreased by half, the distribution of products would double. However, simultaneously such diminishment could result in military insecurity and the disappearance of the Greek race in the long run. Louros concluded his thoughts on overpopulation with Viscount Samuel who equated overpopulation with the H-bomb, but without finally expressed a concrete view about Greek demography.

The main body of the article was written by the journalist, who explained the situation with overpopulation and the distribution of goods on the planet along with the experiments and trials of “the pill”. Initially the journalist referred to experiments in Puerto Rico, a country with a huge overpopulation problem and poverty. The first scientific indications showed that the pill was 100 per cent successful and harmless; however, its possible side effects would be disclosed within five years. Presenting the studies of Malthus and Toynbee’s opinion regarding overpopulation, the journalist was positive on the commercialisation of the first oral contraceptive. He also illustrated the statistics of countries with serious overpopulation problems, such as India, China, Japan, Egypt and other Middle Eastern countries. The article included historical facts about Gregory Pincus, who started doing research on the chemical constitution of the oral contraceptive in 1951 in
Massachusetts and Dr. John Rock, an obstetrician and gynaecologist in Boston, who eventually collaborated with Pincus to improve the pill.

Remarkably the author of the article discussed the possibility that population increase could lead to economic disequilibrium and war; a widely accepted opinion of the demographers of the 1920s-1930s. Therefore he concluded the article with the hope that the poor and overpopulated countries receive the pill for free, when released onto the global market, in order to avoid the negative consequences of economic imbalance and war.

During the late 1950s and in particular in 1958, there was strong interest in Greece in the problem of overpopulation expressed in the press, such as the above-mentioned articles, and in conferences, such as the seminar on population problems of the Southern European countries, organised by the UN in co-operation with the Greek government, held in September 1958 in Athens. As such, the conference on overpopulation, organised by the HES in 1959, was timely.

2. The HES’s Conferences on Population Issues

The Problem of Overpopulation (1959)

Some months after the publication of Louros’ views by the press, the HES organised one of the most important and popular conferences in its history with the same theme: “The Problem of Overpopulation”. It was held in the

17 This seminar has been discussed in Chapter 2.
hall of the Archeological Society in Athens on 15 March 1959. The initiative for this conference was attributed to Louros, but Konstantinidis also insisted in discussing the importance of birth control. The wide popularity of the conference, the attendance of Prince Peter and a large audience marked its success. The second newsletter of the HES devoted its largest part to this conference. Moreover, the entire discussion was recorded by the National Radio Institution (Εθνικό Ινστιτούτο Ραδιοφωνίας).

After the conference the newsletter of the HES included a report by P. Linardos, a journalist, who claimed that the reasons why the conference on overpopulation was so successful were three: 1. The subject was timely and important, 2. The subject was presented by a variety of experts, leading to a multi-disciplinary approach, 3. The presenters’ personalities: Nikolaos Louros, an obstetrician-gynaecologist and President of the HES, Michael Goutos a sociologist, Konstantinos Goustis an economist, Alexandros Merenditis, Colonel of the Hellenic Army, Panos Panayiotou, Professor of Obstetrics and Gynaecology at the University of Athens, Georgios Pantazis, Professor of Zoology, and Nikolaos Svoronos, General Director of the Hellenic Statistics Service. As a result, the analysis of this conference illustrates the dominant views on overpopulation of eminent Greek scientists, scholars, health professionals and military officials of the given period.

19 Louros Archive, Minutes of the Executive Board’s meeting, Alexandra Hospital, Athens 25 October 1958 [in Greek].
20 Louros Archive, Newsletter of the Hellenic Eugenics Society (October 1959), pp. 1-5 [in Greek].
Louros introduced the problem of overpopulation, outlining the classic Malthusian argument about the simultaneous multiplication of people and food shortage. He explained to the audience the theory that humans increased geometrically while the food supplies of the Earth produced arithmetically. Louros offered the most representative examples of places facing overpopulation, namely India, China and some African countries; always using the relevant statistics to justify his arguments. Louros posed some questions about overpopulation to stimulate the discussion: “Something has to be done about it, but what? Should we use birth control measures? This is not only a global, but also a Greek problem”.21

Nikolaos Svoronos, as the General Director of the Hellenic Statistics Service, referred to the Greek population’s movements since the nineteenth century, but focused on the period after 1930. Svoronos intentionally chose the period after the 1930s, because at that time there was no territorial growth as was the case in the period prior to 1930, with the exception of the annexation of the Dodecanese islands in 1947. Furthermore, the refugees who inhabited the country during the 1920s were integrated into the total population by 1930. As a result, it was more accurate to discuss Greek demography starting from the 1930s, after which there was no significant population change in the country.22 Svoronos informed the audience about the rise 24 per cent in the Greek population during the period 1930-1956, while simultaneously there was a rise of 36 per cent in the global population. Statistics show that Greece did not exceed the international level

22 Ibid., pp. 151-152.
of population increase, resulting in the absence of an overpopulation concern. Svoronos portrayed the demographic situation of the period 1950-1956 when the Greek population increase rate dropped to 8 per cent. According to him, this was due to massive emigration not because of the drop of the birth rate. The Greek birth rate in 1950 was 19 per cent the same as the average European rate. In Asia and Africa, however, the rates were much higher up to 50 per cent. Svoronos attributed these unequal rates to the use of contraceptives in the developed countries at the same time when in developing and under developed countries people made limited or no use of contraceptive means.23

Regarding the average life expectancy rate, Svoronos presented the facts that in Europe the life expectancy from 43 years for males and 47 for females increased in 1950 to 65 years for males and 69 for females. In Greece there were no official statistic tables for the average life expectancy, but Svoronos estimated it to be approximately 65 years. On the contrary, in the countries where the birth rate was very high, life expectancy was much lower than in developed countries. In India and some African countries life expectancy did not exceed 40 years.

Svoronos claimed that the global population would be doubled by the year 2000 and would increase fourfold by 2043. He added that the food supplies resulting from the use of new forms of agriculture and other technological means of production, could nurture 10 to 12 billions of people. Svoronos was very cautious about the future because there were large populations facing malnutrition and poverty who might continue to be

vulnerable to these dangers even if the science and technology of nutrition progressed during the following decades. Who would have access to these advances? Would technology advance according to the estimations? Would people be so educated as to use these advances to their benefit? These were some of the questions that Svoronos posed in order to highlight the importance of the issue of overpopulation in relation to malnutrition. He argued that only discussions at an international level could prevent overpopulation and its harmful consequences. However he had a totally different opinion for Greece, because the birth rate had dropped to 16 per cent in urban centres and 22 per cent in villages, so there was no need to advocate for birth control. He closed his speech thus: “Our national pride should not allow a nation such as the Greek, whose spirit had offered so much to the global culture and today represents only the 3 per cent of the global population, to diminish its contribution to global culture in the future”.  

Georgios Pantazis, Professor of Zoology and Vice-President of the HES, referred to overpopulation from a different perspective and through biology. He mentioned the process of “natural selection” which keeps nature in equilibrium. There is no possibility of overpopulation in flora and fauna due to the natural elimination of the unfit by the environmental conditions. Pantazis claimed that approximately the same process existed in aboriginal populations where infant mortality outweighed the population increase. Infant mortality and miscarriages were called “natural checks” by population experts. The aim of birth control proponents was to replace these

---

“natural checks” of population with the free choice of contraception.\textsuperscript{25} Aligned with the birth control movement, Pantazis embraced their theory of “natural checks”, as it appeared in aboriginal populations. “The civilization”, he suggested, “which began by the white race and gradually spread to the rest of the world, created on one hand factors that impede nature’s “weapon”, namely the natural selection, and on the other hand factors that facilitate the opposition to the natural selection”.\textsuperscript{26}

Pantazis then highlighted the fact that advances in medicine eliminated infant mortality and the spread of infectious diseases, which could be used as an excellent example of the suspension of natural selection. On the other hand, the elimination of births caused by voluntary birth control, not by some genetic factor, was also an example of interference with nature. Pantazis claimed the abovementioned examples, while disturbing the natural balance; not only were desirable, but in some cases unavoidable.

According to Pantazis, birth control could be theoretically the most effective measure to avoid overpopulation that would be an inevitable outcome due to the opposition it posed to natural selection. He claimed that this was only an idea, practically non applicable at the international level. The reason why birth control could not save the planet from overpopulation was that the civilised white race would apply this measure whereas the other races would not. Therefore, according to Pantazis if the white race uses birth


control techniques while the African and Asians do not, “the white race will face the “yellow peril” and the world would be in racial imbalance”.27

As far as Greece was concerned, Pantazis believed that there was an unofficial birth control in urban centres where families with more than three children were rare. In the countryside there were large families, but it would not be wise to try to restrict their proliferation because the Greek population would automatically decline. At the time, Pantazis considered birth control in Greece undesirable and inappropriate.28

Panayiotis Panayiotou discussed the eugenics view, which concerned the quality of the population, not the quantity. Panayiotou argued that eugenics helped to understand the importance of the environment in human growth and development; therefore human conditions, good or bad, are products of the interaction of both hereditary and environmental conditions. He developed his argument by discussing the importance of the social conditions in human development. The fact that socio-economic conditions, social justice and prosperity affect human development leads to the hypothesis that every law or institution could be a potential eugenic policy. The eugenicist, Panayiotou argued, should play the role of the “natural selection” in society by replacing the rejection of the unfit (which happens in nature) with appropriate policy-making. Eugenics was applicable to hereditary diseases, such as hemophilia, incompatibility of the factor Rh of a married couple and epilepsy; also to socio-biological phenomena, such as marriage between relatives, adoption, artificial insemination; premarital health certification and to general problems including the elimination of

28 Ibid., p. 157.
infant mortality. Moreover, Panayiotou supported the view that in order to achieve the optimal social organisation, instead of trying to genetically determine human, importance should placed upon education, hygiene and intelligence.29

Konstantinos Goustis, an economist, questioned Malthus’ theory and finally rejected it by considering it a vague perspective that would not be applicable in every population in every place of the planet; therefore useless. According to Goustis, Malthus discussed the relationship between the population problem and the sources of income and acknowledged a link; but this was by no means a solid theory to apply to the worldwide population. Goustis insisted that there was no general population problem because some areas of the world were overpopulated but others were not. There were different population tendencies which should be examined separately, and in their context. Regarding Greece, Goustis believed that the major socio-economic problem of the country was the high rate of unemployment. There was an immediate need to give Greeks the opportunity to work and be productive. He claimed that birth control was certainly not the solution; it was too strict a measure to impose. However, he supported family planning in the form of advice on the size of the family.

Michael Goutos, a sociologist who was interested in trying to answer the question whether birth control would be an effective measure in Greece presented an overview of the latest official national censuses. He also mentioned that high birth rate does not necessarily mean that the population increases; it is always a matter of correlation among the number of births,

deaths and emigration. Figures showed that the Greek population in 1950 was stable with a tendency towards ageing. As a result, Goutos was critical of birth control in Greece. As he put it: “the survival of a nation is not only achieved by hygienic measures but mainly by high birth rate”. Regarding social policies, Goutos claimed that they favoured only the urban, working class, putting aside the rest of the members of the society. The first step should be to implement social policies at the national level. In agreement with Goustis, Goutos suggested facing the problem of unemployment and avoiding birth control.

Alexandros Merentitis, a Colonel in the Hellenic Army, undertook the responsibility of discussing the matter of national defense in relation to birth control. Firstly, he drew a line between keeping the population stable and reducing it. If birth control did not result in the decline of the existent Greek population, then it would not hinder the defense of the country. Merentitis explained that the number of fighters was not so significant to the outcome of a battle because the possession of weapons of mass destruction was a far more important factor. Merentitis also explained that a secure line of soldiers should exist in the borders in case of a sudden outbreak of war. Therefore he argued that birth control should be avoided in the provinces of Macedonia and Thrace where the borders of the country should be secured from a possible invasion from a neighbouring country. Merentitis’ views were rather moderate; in fact he contradicted the common argument that birth control should be avoided for the safety of the country. As he explained, the government should worry more about the armaments

---

than the number of the soldiers, because weapons of mass destruction were deemed more effective than a populated army.

Louros at the end of the conference introduced another view of birth control; its practical, medical application. As he put it, while there were many contraceptive methods, none of them was absolutely effective and on the other hand most of them could not be afforded by poor populations. Abortion was also a means of birth limitation, to which Louros was straightforwardly opposed. To strengthen his position, he referred to countries, such as the Scandinavian countries, Russia and Switzerland that permitted abortion for social reasons, but soon regretted it. Louros insisted on the equation of abortion with homicide, except when the mother’s life was in danger. He questioned the idea of birth control, per se, and expressed his cautiousness for its practicality.31

Among numerous conferences of the HES, the conference on the problem of overpopulation was the mostly published in the Greek press. Popular newspapers dealt with it and commented on the viewpoints of the presenters. In particular, the newspaper *Acropolis (Ακρόπολις)* published a series of eight articles on the conference. Their titles were impressive and eye-catching such as:

- “The agonising problems produced by overpopulation. Is there enough space for the Greeks in Greece? A sensational discussion among seven top academics”.32

---

• “Does overpopulation threaten Greece? If the civilised people apply birth control, the coloured will cover the Earth”. 

• “Does overpopulation threatens us? Birth control is not the number one problem of our country, but provision of labour to everybody”. 

Giorgos Koronaios, the author of the series of articles, portrayed the content of the discussion and the reactions and comments it provoked to the audience. He highlighted the importance of the subject and the reputation of the presenters. The originality and audaciousness of the papers was also mentioned. It is also important that the first part of the articles were hosted on the first page of the newspaper. The first, and introductory article, included the editorial and Louros’ keynote speech. This series was, in fact, the publication of the minutes of the conference in parts.

However, Acropolis took the discussion further by inviting scholars, who did not have the chance to participate in the conference to publish their opinion to provoke a public discussion. The responsible researcher was P. Papaioannou, who praised the originality and importance of the subject which was publicly brought to light for the first time in Greece.

The second article had the title: “Is there enough space for the Greeks in Greece? Greece is among the countries with high population

33 G. Koronaios, “Does Overpopulation Threaten Greece? If the Civilised People Apply Birth Control, the Coloured Will Cover the Earth”, Acropolis (29 April 1959), p. 1 [in Greek].
34 G. Koronaios, “Does Overpopulation Threatens us? Birth control is not the Number One Problem of our Country, but Provision of Labour to Everybody”, Acropolis (2 May 1959), p. 1 [in Greek].
35 G. Koronaios, “Agonising Problems Produced by Overpopulation”.
increase which is decreased by emigration”36 and was again on the first page. The author mentioned Louros’ and Svoronos’ contributions to the conference. The third article published the following day included a summary of the previous and Pantazis’ contribution.37 The fourth part of the series had the provocative sub-title: “Not only is the quantity, but also the quality of the race is a depressing problem of Greece”38 and hosted Panayiotou’s contribution. The following publication hosted Goustis’ contribution under the sub-title: “Birth control is not the number one problem of our country, but the provision of labour to everybody”.39 On 3 May the newspaper published the contributions of Goutos and partly of Merentitis under the sub-title: “The country’s defense is not threatened by birth control. The military means are more important than the number of the soldiers”.40 The rest of Merenditis contribution and Louros’ concluding remarks were published in the next issue on 6 May 1959 having the sub-title: “Today’s wars do not demand a great number of soldiers—Abortion is homicide”.41 The last publication had the sub-title: “We are responsible for

36 G. Koronaios, “Is there Enough Space for the Greeks in Greece? Greece is among the Countries with High Population Increase which is Decreased by Emigration” Acropolis (25 April 1959), p. 1 [in Greek].
37 G. Koronaios, “Does Overpopulation Threaten Greece? If the Civilised People Apply Birth Control, the Coloured Will Cover the Earth”.
38 G. Koronaios, “Not only is the Quantity, but also the Quality of the Race is a Depressing Problem of Greece”, Acropolis (30 April 1959), p. 1 [in Greek].
39 G. Koronaios, “Does Overpopulation Threatens us? Birth control is not the Number One Problem of our Country, but Provision of Labour to Everybody”.
40 G. Koronaios, “The Country’s Defense is not Threatened by Birth Control. The Military Means are more Important than the Number of the Soldiers” Acropolis (3 May 1959), p. 1 [in Greek].
41 G. Koronaios, “Today’s Wars do not Demand a Great Number of Soldiers—Abortion is Homicide” Acropolis (6 May 1959), p. 1 [in Greek].
our offspring Professor Louros highlights—Birth control is a matter for the authorities of the countries”.

The presenters developed their arguments regarding overpopulation on the global scale, but also the population problem in Greece. While some supported birth control, others rejected it as inapplicable or inefficient. Contrary to the common Greek argument of the “threat of the neighbours” used to justify aversion to birth control, Svoronos did not mention the possible military threats but focused on the safeguarding of “national pride”, while Merenditis put more emphasis on the kind of armaments, not the quantity of the soldiers. Pantazis on the other hand supported the global birth control movement only with international consensus. However he considered birth control in Greece undesirable, due to population decline. Panayiotou, as expected, generally supported and insisted in eugenic policies. Goustis and Goutos, who were non-medical professionals, added another dimension to the population problem, the high rates of unemployment. They argued that the most urgent problem of the Greek population at the time was that people did not have employment opportunities. The problem, of course, was proportionally aggravated by population increase.

---

42 G. Koronaios, “We are Responsible for our Offspring Professor Louros Highlights—Birth Control is a Matter for the Authorities of the Countries” Acropolis (8 May 1959), p. 1 [in Greek].
The growing concern for environmental disasters was the reason why the HES, in co-operation with the Archaeological Society, organised a conference on the environment. The presenters highlighted the dangers posed by environmental disasters and their reverberations for humanity; and the relations between the human behaviour and its surroundings. This conference was also concerned with population issues, although indirectly.

Louros was again the discussion leader. In his keynote speech, he associated the environmental matters with the philosophical trend of Positivism. He mentioned Johan Peter Frank, the founder of the “Hygienic Police”, the first who talked about hygiene (in the modern era), Christian Wilhelm Houfeland, who discussed for longevity and Auguste Compte, who foresaw the problems caused by technological progress. In this way, he introduced the conference with a philosophical touch before permitting the presenters to express the practical view of the subject. Having already discussed the problem of overpopulation, Louros argued that the problem of overpopulation was crucial and agreed with Julian Huxley that each man would end up having one square meter to breathe. Overpopulation and urbanisation were indispensable parts of the discussion about the environment. However, Louros admitted that overpopulation was no longer a problem in Greece. Greece was an exception to the global overpopulation problem. On the contrary, under-population was the real problem of the country. He believed that the root of environmental disaster was the

development and the uncontrolled expansion of industrialisation, which he equated with suicide.\footnote{44} In the 1970s, Louros distanced himself from views supporting of birth control—once strongly advocated by him—due to the demographic decline of the Greek population during that period.

Marios Raphael, a sociologist and General Secretary of the HES, referred to the science of Ecology but focused on the struggle against disease and death. He argued that there was a continuous fight between humans and epidemics.\footnote{45} On the one hand, the scientific and medical advances helped in the elimination of epidemics and the extension of the human life span. On the other hand, new health problems appeared, such as cancer, mental illnesses, allergies and others, which were caused primarily by the change of human’s daily life due to technology; what we may call today “lifestyle diseases”. Humans tried to control the environment, but ended up destroying it. The consequences of this behaviour were considerable and dangerous. Furthermore, man was isolated from the natural environment, losing contact with it. He lived in controlled artificial environments, where he did not see the daylight; did not feel the natural temperature; did not swim in the sea; but replaced all those ancient habits with new ones that fit to a man-made environment. Raphael argued that the way of living influenced a lot the environmental conditions and altered them; he said that man needed more than just good health to survive; there were many dangers created by the lifestyle and the intellectual condition. He believed that George Orwell’s dystopic novel 1984\footnote{46} was prophetic and it

\footnote{45} Ibid., p. 33.
\footnote{46} George Orwell, Nineteen Eighty-four (London: Secker and Warburg ,1949).
was highly probable to end up living in Orwellian controlled spaces under constant observation. The isolation in micro-societies could lead to the damaging of the environment and of the people living in it. Notwithstanding all these depressing thoughts, there was evidence that man survived by adapting to the environment. Therefore it was highly possible to survive under any circumstances.\textsuperscript{47} He gave a positive view of the subject in the hope that people would finally find a compromise between technological progress and environmental protection.

At the same time Pantazis believed that since man was the only creature that knew about evolution, he had to try to command and control it for his own benefit.\textsuperscript{48} Pantazis, as a biologist, focused on the great importance of the role of the environment to human development. He argued that environmental factors had equal weight with the hereditary ones. Human organisms have mechanisms of fitting to the environment which allow them to survive despite the environmental changes, when those are not extremely intense or long-lasting. Pantazis used the word “plasticity” to describe the Darwinian mechanism. Moreover, the environmental influence on someone’s health was not inherited, because it did not influence the genes. It could induce anomalies or damages, but the person did not pass them on to his descendants. There were only a few types of environmental changes that affect the genes, such as some medicines, radiation, and some chemical substances. According to Pantazis, the greatest environmental changes were artificial; not natural disasters. Man bore the responsibility of damaging the environment. Human choices, such as ignorance, indifference

\textsuperscript{48} Ibid., p. 42.
towards the environment and uncontrolled technological progress, brought
disastrous results.\textsuperscript{49}

In agreement with Pantazis, Timos Valaes\textsuperscript{50} underlined the
importance of the environmental factors to human development. He argued
that every paediatrician deals with child development which is inextricably
linked with the environment. He defined human development as a group of
features such as aggrandizement, differentiation, growth, and spiritual and
physical maturity. According to Valaes, people achieved fast growth and
maturity by improving the environmental conditions. The environment, that
they provided their children with, allowed their genetic inheritance to be
better manifested. During the preceding decades, people gained 10 to 12
centimetres of height due to the technological progress and better living
conditions. Although reluctant to admit that better environmental conditions
resulted in a higher level of intelligence, he mentioned that there were
studies that proved that under-nutrition was associated with low
intelligence.\textsuperscript{51} Moreover, he referred to the side-effects of urbanisation such
as the damage of personal and social relationships and increased
psychological stress. Drakoulidis, also member of the HES, had expressed
in 1963 the same argument about the negative psychological repercussions
of urbanisation.\textsuperscript{52} He concluded his contribution with the reassurance that
man was not deterministically a “victim” of blind evolution, but had the
power to change his environment for his own benefit.

\textsuperscript{50} Timos Valaes was a paediatrician and Director of the Institute for Child Health at the
Aghia Sophia Children’s Hospital, former colleague of Louros and Doxiadis.
\textsuperscript{52} Nikolaos Drakoulidis, “Consequences de la Surpopulation sur la Sante Mentale et

231
Ioannis Papaioannou, a musicologist and Vice-President of the Institute for Child Health, focused on two main points regarding the environment: water supplies and nutrition. Even if water supplies seemed to be sufficient for the world’s population, it was highly probable that serious problems of exhaustion of water supplies in the near future would be faced due to the increase of oceanic pollution. Papaioannou merely endorsed Malthus’ theory about the gradual shortage of food because of the growth of the population. He expressed his concerns about the fast increase of the population; which was much quicker than the increase of food production. However, in contradiction with Malthus’ pessimism, he expressed his optimism that this problem could be solved by new food crops. He gave the example of wheat, which was planted in countries such as Mexico, India, and Pakistan. This was very successful, because its production ended up to be more than expected and covered the needs of the countries in which it was planted.

The dangers of air-pollution were highlighted by Mariolopoulos, a former Dean of the University of Athens. The main point of reference was pollution from industry and the car exhausts. Frantzeskakis, a specialist in street traffic, added to Mariolopoulos’ paper the urgency to confront the situation aiming at long-term outcomes.

Konstantinos Doxiadis, brother of Spyros and an internationally renowned architect summed up the environmental problems. First of all, he acknowledged a crisis in the relationship between man and the environment. He underlined the real dangers for man; particularly in an urban

environment, such as the diseases caused by the intrusion of “machines” in human daily life. The uncontrollable use of any machine caused more harm to the people than good. Secondly, according to Doxiadis, too much information was another cause of problems. The wealth of information by television and radio made man dizzy and dangerous because of the lack of clear thinking. He also mentioned the damage that people caused to the monuments and the national heritage in general. Following on from this, pollution has expanded far from natural pollution to cultural pollution. Doxiadis believed that man could change this situation for the better by using technology in his favour. It would need to use the scientific advances with prudence, but also to be encouraged to make great changes to overpopulated urban areas.  

An overall impression of the discussion on the environment was the fact that people should be watchful of the environmental disasters, because their implications could be catastrophic. While man exploited the environment and severely altered it by extensive use of technology, he could use his technology to his benefit and save himself and nature from disastrous outcomes.

The Reproduction Problems of the Greek Population (1975)  

The conference “The Reproduction problems of the Greek population” took place on 20 March 1975 at the National Research Institute (Εθνικό Ιδρυμα Ηθοποιίας).  

In brief, Turkey invaded Cyprus in July 1974 and the Greek government of the military Junta was criticised for its poor strategy. Shortly after that first conflict the dictatorship unable to confront the situation gave its authority to politicians. At that time the new “emergency government” (κυβέρνηση έκτακτης ανάγκης) or government of “national unity” (κυβέρνηση εθνικής ενότητας) under Konstantinos Karamanlis undertook the governance of the country. Unfortunately neither the dictators nor the politicians managed to confront the sudden Turkish invasion which was repeated three weeks after the first operations. In November 1974 there were the first elections after the dictatorship in which the New Democracy, a political party again led by Konstantinos Karamanlis, won and gradually

56 Louros resigned as president of the HES because he was appointed Minister of Education in July 1974 and due to his old age. In 1974, he was 76 years old.
returned political and social stability in Greece. As a result the conference was postponed for March 1975.

The discussion was coordinated by Danezis and the participants were: Spyros Doxiadis, Professor of Paediatrics; Mrs. D. Milonakis, an economist; A. Pepelasis, Professor and a manager of the Agricultural Bank of Greece; N. Polyzos, a demographer and economist; D. Trichopoulos, Associate Professor of Hygiene and Epidemiology; and D. Tsaousis, Lecturer in Sociology at the Panteion University of Athens.

Firstly, Danezis emphasised that the purpose of the HES was to bring to light the world and national population problems, not to offer concrete solutions. According to the organisers, the ultimate aim was to disseminate knowledge about the problematic nature of subjects associated with population tendencies into the public arena. Danezis also referred to the World Population Conference in Bucharest (1974), which followed the World Population Conference in Rome (1954)58 and the World Population Conference in Belgrade (1965). What made the one in Bucharest unique was the fact that the delegates represented their governments, not an academic institution. Demography was inextricably linked with politics, a fact which was shown in the conference.59 The population problem was addressed at the political level, a fact which made the signing of a common plan of action very difficult. However, a consensus was achieved by the majority of the participating countries. Some of the proposed actions were to promote the education and information of the general public on population and fertility

58 This conference was discussed in Chapter 4.
problems; to take measures about the distribution of population in each
country and to improve the study of demography and family planning. The
main aim was to promote health programs and social policies. The ultimate
goal was the improvement of the quality of life.  

Valaoras was one of the four people who represented Greece in the
World Population Conference in Bucharest. The leader of the Greek
delegation was Andreas Kokkevis, Minister of Social Services. Two works
of Valaoras were distributed among the delegates of the conference. Those
were the Protein-Calorie Deficiency and Child Health and the Urban-Rural
Population Dynamics of Greece, 1950-1965. The presence of a delegation
showed that the Greek state was concerned about population problems and
demography. Added to this, Valaoras’ work was highly appreciated and
respected.

Danezis focused on two outcomes of the conference; the fact that
population was an important factor for the development of a country, and
that gender equality in family matters was essential. Furthermore, each
government was responsible for its population policies and reproductive
problems. Emigration, urbanisation, poverty, energy supplies and education
were also discussed as intrinsic aspects of the population problem as a
whole. On a personal level, each couple should be free to decide whether

---

395.
61 Vasilios Valaoras, Studies, Titles, Activity and Scientific Works: additional text, February
62 Andreas Kokkevis was Minister of Social Services for the time period from 24 July to 9
October 1974. He thus participated in the Government of National Unity under
Konstantinos Karamanlis, when also Nikolaos Louros became Minister of National
Education and Religion. Spyros Doxiadis succeeded Kokkevis until on 21 November, the
accessed 23 May2012].
63 Valaoras, Studies, Titles, Activity and Scientific Works: additional text, p.4.
and when to procreate and be responsible for baby-spacing. As for the family planning institutions, which Danezis was very familiar with; these should be incorporated to the general health programs of each country so as to make citizens aware of family planning strategies and techniques.

In the conclusion of his keynote speech, Danezis highlighted the insufficiency of the Greek demographic statistics and the lack of a demographic policy. “Anarchy of reproductive forces”64 was his exact description of the Greek population problem.

More accurately, this was a round table discussion, in the form of dialogue among the participants, not the typical presentation of individual papers. The discussion began with Trichopoulos’ contribution, answering Danezis’ question about the factors that shape demography. Trichopoulos referred to the three major aspects of demography: reproduction; mortality and emigration. The outcome of their interdependence and intertwining depicted the population tendency of a country. More importantly, Trichopoulos analysed the situation in Greece. By the 1970s the mortality rates had been decreased; much below the world average. In particular infant mortality, which was the most critical, had been adequately decreased too. There was, however, room for improvement. Low reproductive rates were the most alarming population problem of Greece during that period. Since the 1960s, there had been recorded a rise of nuclear families and at the same time an increase of the marriage age. It was that period just after the Greek women gained their right to vote (1952) when their full emancipation gradually occurred. Having access to higher education and professional

development, the founding of a family was postponed to a later age by the modern Greek woman. As a result, the reproductive years became fewer and the predominant family model was the nuclear family. Trichopoulos was optimistic though, because the trend of getting married at a young age, from 20 to 25 years, revived in the 1970s. This shift automatically meant that there were more chances to have large families. Moreover, positive was the fact that emigration rates gradually decreased when immigrants from the 1960s began to return in the 1970s.

Doxiadis, on the other hand, focused more on infant mortality. He agreed with Trichopoulos that there was improvement in infant mortality rates, due to medical advances, but he added that the inappropriate socio-economic circumstances should not be overlooked in the persistence of the problem. While medical progress and technology improved both maternal and child health, the lack of hygienic living conditions and proper education of the mother were factors which hindered the good health of the newborn. Often infant deaths occurred after familial negligence. According to Doxiadis, the number of the members of a family was crucial for child development. Based on the results of research carried out in England, he argued that children who were descendants of large families (more than two children) did not manage well at school. He, therefore, proposed that the ideal family model was that of two or maximum three children. According to Doxiadis, more attention should be paid to the increase of the children in nuclear families than to the multiplication of large families. This was a realistic and achievable solution, if equilibrium between quantity and
quality was to be reached.\footnote{Hellenic Eugenics Society, “Reproduction problems of the Greek population”, p. 203.} Furthermore, Trichopoulos’ opinion on financial aid for large families fitted neatly into this way of thinking. As he claimed, he had already discussed it with Louros and reached a consensus that the state should cut financial aid for families of three or four children because parents were tempted by the money and gave birth to children without having the means to raise and educate them properly. As a result, the number of illiterate and undereducated people was growing.\footnote{Ibid., p. 204.} As stated previously, illiteracy could lead to unwanted conditions of living.

In addition, Nikolaos Polyzos agreed that the poor were most vulnerable to disease and death.\footnote{Polyzos was the founder of the Greek Society for Demographic Studies (Ελληνική Εταιρεία Δημογραφικών Μελετών).} He attributed child and infant mortality to illiteracy and outdated baby nursing knowledge of mothers, particularly in rural Greece. Polyzos argued that illiteracy rates were commensurate with infant mortality rates. Therefore, the rate of infant mortality shows the cultural level of a country.\footnote{Hellenic Eugenics Society, “Reproduction Problems of the Greek population”, p. 192.} The same idea continued to prevail in population studies. Infant and child mortality was also attributed to the lack of hygienic conditions of the lower classes.\footnote{I. Th. Papavassiliou, “Intelligence and Family Size”, \textit{Population Studies}, 7, 3 (March 1954), p. 226; for more details on infant mortality see Vasilios G. Valaoras, “Refined Rates for Infant and Child Mortality”, \textit{Population Studies}, 4, 3 (December 1950), pp. 253-266.} The living conditions and the environment where a child was born and raised were crucial. Again, it was claimed that the popularisation of hygiene and child care was imperative. Danezis, on the other hand, stretched the issue of the lack of prenatal care and medical observation of pregnant women. Again, women in rural areas were prone to miscarriages and infant mortality. Moreover, in 1970,
statistics showed that 82 per cent of the total deliveries took place at the large maternity hospitals of urban areas.\textsuperscript{70} Pregnant women living in the countryside, in their last month of pregnancy, moved to the big cities to deliver their baby; which was also a dangerous procedure for the health of the newborn. The lack of state and individual pre-natal and post-natal care was clearly illustrated by the statistics.

Trichopoulos presented three factors playing the most important role to the diminishing number of births. First of all was, of course, the high rate of abortions, for some the eternal reproductive problem of Greece. Trichopoulos pointed out that secondary sterility added to the harm of the abortion itself. Undertaking an abortion could increase the possibilities of sterility four times that of other causes. Secondly, the postponing of marriage affected reproduction rates, because in traditional Greek society, childbearing before marriage was a social taboo. Therefore the combination of late marriage and absence of births before marriage resulted in fewer children. Thirdly, demographic research indicated that Greeks preferred to have two children, on average.\textsuperscript{71} Trichopoulos insisted that the ways to achieve this number of children were contraceptives and abortion. This assertion provoked Danezis’ reaction who argued that contraceptives were neither used at large nor suspended reproduction; instead they helped couples to better plan their family and baby spacing. Danezis also argued that contraceptives were the antidote to abortion, that family planning advice helped raise the educational level of women—and the rest of the

family—in health and reproduction issues and that control of reproduction should be the right of every woman. Danezis highlighted the fact that very few (0.5 per cent) Greek women used contraceptives for the control of reproduction. As a result the claim that contraceptives contribute to the decrease of birth rates was groundless.

Mylonaki presented the economic aspect of population dynamics. She claimed that in the short term the domestic and national economy might benefit from the low birth rate. In the long run though, low fertility would diminish the number of workers and reduce the level of a country’s productivity. All depended on the government’s population choices and policies.

In contrast, Pepelasis argued that there was no concrete evidence that low fertility provoked low productivity; there were only hypotheses. He referred to people’s high physical and professional mobility, which influenced the fertility rates as well. Although Trichopoulos insisted that reproductive rates in the rural areas were very high, Pepelasis argued that the children of the villagers emigrated during their reproductive age, so the statistics were not realistic and the demographic problem of Greece was much more serious. Polyzos, as a demographer, insisted that statistic figures depicted the reality which was gloomy for Greece due to the diminishing of the number of children, emigration and the ageing of population (gerontogrowth) leading to degeneration.

Tsaousis shared Pepelasis’ opinion about mobility, both geographic and social, with regard to the preferences in the family size. Moreover, he

---

underlined the change in women’s social image, having lost the label of “reproductive machine”. Conjugal relationships were also ameliorated resulting in effective decision-making for family size from both parents.

At the international level, the participants mentioned the global population problem which was reflected in the high rate of births in underdeveloped or developing countries in contrast with the adverse rates in developed, mostly Western, countries. Although on the global scale births should be decreased due to overpopulation, in Greece the opposite should be the target. Louros—as a member of the audience this time—referred to the critical geographical position of Greece which demanded a robust army. As expressed before the neighbouring countries continued to threaten the national integrity of the country. As a result the global movement against overpopulation was at odds with the population problem in Greece. As Polyzos argued, the impeding of low-fertility was not “national selfishness” (nationalism) but the right of the Greeks to survive.

**The Problems of the Elderly (1974)**

Among various population problems, ageing was crucial because in conjunction with its demographic consequences, it stimulated important socio-economic changes. While the reduction of mortality is desirable, it is not advantageous if not accompanied by increased birth rate. Only in this case is there equilibrium in the quantity and quality of population. In Greece

---

73 See Chapter 4 and Merenditis’ paper in this chapter for the relation between low fertility and military insecurity in Greece.
from 1951 to 1971 the ageing of the population was both continuous and rapid. This resulted in the decrease of morbidity and the increase of the average life span correspondingly. During that period, the socio-economic development affected the birth rates which gradually decreased. Simultaneously, emigration to the western countries was massive.

The round table discussion “Problems of the Elderly” was inspired by a conference at the Medical School in Athens in 1971.76 Dontas, an expert in gerontology in Greece and the chairman of the conference, appeared to have a cynical approach on this issue. He claimed that medical advances had a twofold impact; firstly, the life span was prolonged 10 to 15 years and secondly, the lower classes benefited from the improvement of therapeutics, most notably preventive medicine. Furthermore, the elderly, who were “less fit” for society, caused profound changes in the constitution of the population, because of their long lives. Not only was their care a financial burden for the rest of the society; but also they were isolated, both socially and psychologically, even when living with relatives. Dontas believed that the state and the society should adopt practical solutions to confront this problem.

According to Dontas, health experts should reach a consensus on some determinant issues: the definition of death; the time limitation of the living years of people in vegetate state and the problem of euthanasia.77 He wondered if finally the price of individual longevity was the misery of the many; the rest of the society that cared for the elderly.78

---

In general, even during the 1970s and 1980s, the majority of demographic publications referred either to low birth-rate or the ageing population. These two problems were indeed the most alarming at the time. The scientific study of demography was neglected for a long period of time. On the contrary, “less scientific” publications and articles multiplied. Kontzamanis, for instance, claimed that the discussions organised by the Eugenics Society about the above mentioned problems and their consequences, often highlighted a nationalistic approach to the present and future situation. However, such an approach was at the time reasonable, because every country cared for its own population and opted for its improvement in quantity and quality. The devastating period during the first half of the century favoured nationalistic approaches on population which were widespread in the context of national reconstruction after the wars.

Drakatos, a demographer, expressed the popular belief that lower, poor classes multiply quicker than the upper classes. During the period between 1951 and 1971, the Greek middle class was the biggest portion of the population; its members had chosen to form small, nuclear families. As a result, Drakatos claimed that the low birth rate in Greece was due to the socio-economic development and that lower classes gave birth to more children than the middle and upper classes. Drakatos presented again the demographic situation in Greece which included the decrease of mortality rates and massive emigration to Western countries during the decade 1960-1970. Reflecting these changes in demographic patterns, Drakatos proposed a specific financial solution for the low birth rate and the nuclear families;

approximately the same as that of Trichopoulos, but from a different point of view. Drakatos believed that the state should aid financially only the middle class, for example the civil employees, who should get a 10 per cent increase in their salary for every child until the third. He noted that the Greek population ought to increase not only in size but also in quality. According to Drakatos, the most effective pro-natalist policy would be to promote the creation of families having two or three children but from middle or upper classes, instead of the creation of large families having four or five children of the lower classes; a view shared by Spyros Doxiadis. If that plan worked, it would lead to a formation of a new category of people coming from middle and upper classes, who would not create any more social problems.\(^8\) Drakatos clearly stated that the adoption of this strategy would positively affect demographic evolution for the next 10 to 15 years.

Pepelasis presented a different perspective, focused on the problems of the workforce in relation to ageing. The ageing of the population was also financially multifaceted. On the one hand, the workforce, thus productivity diminished. In addition there was the paradox that Greece “imported” inexperienced and unqualified workers from abroad but simultaneously “exported” Greek high-qualified professionals. On the other hand, financial help to a big part of the population burdened the state. Along with education and health, the financial burden of the elderly was the biggest economic problem of Greece in the 1970s.

From another point of view, state services sometimes substituted familial services. This was due to industrialisation. In rural areas the family

---

\(^8\) Hellenic Eugenics Society, “Problems of the Elderly”, p. 446.
took care of its elder members. On the contrary, in urban areas, aged people relied on public services to survive. As Mousourou argued, the care of the elder members of the family was no longer the rule, but the exception. Even worse for the aged population, from 7 per cent in 1956 it increased to 11 per cent in 1971 but the public services remained inadequate for their care. Dimaki suggested the “humanisation” of the industrialised society as the optimal solution so as to achieve high quality of life for the elderly and smooth adaptation of the “biologically younger” elder in the family and society.

Furthermore, Dimaki referred to the “psychological” ageing of the population. Modern young people matured quicker than the past generations. Following Mead’s outlook, modern youth had equivalent experiences with older people of the past; “a modern teenager is the adult of the past”, according to Dimaki. She argued that “ageing” and “youth” had not absolute or static meaning; they were subject to socio-economic circumstances. She mentioned that the “conflict of genealogies” was inevitable when the elders managed society, because most of them occupied positions of authority.

Christodoulou added to the discussion that old age was not a disease, but a normal state. Humans react to ageing by trying to confront their new state. Although personality does not change, some of its traits tend to be expressed in exaggeration.

Louros, who attended the discussion, remarked that Greece did not have fertility problems, but the excessive number of abortions resulted in the reduced birth rate. Moreover, urbanisation was another important factor of diminishing population. Decentralisation against urbanisation and the wider use of contraceptives instead of abortion could help the country to revive.

Population problems ranging from high density to desertification, from obesity to starvation, from robustness to epidemics, and from over-productivity to under-productivity were discussed at large by demographers, sociologists, physicians and other population experts mostly with regard to the international scale. When discussed in the national context, however, the discussion focused on the nucleus of population, the family. Preoccupation with issues of the institution of family is indispensable to the wider population’s concerns and so will be analysed in the following chapter.
Chapter 7

Eugenics and Family

The Institution of the Family

The change of the regime in 1974, when the government of the National Unity succeeded the military Junta, had repercussions on the legal framework of the country. The need to change the Constitution set out by the Junta in 1968 was immediate and urgent. Therefore, in 1975 the democratic government adopted a new Constitution to replace the former. One of the significant alterations was the addition of Paragraph 2 of Article 4 which declared that: “The Greek men and women are equal to the law and have equal rights and obligations”.\(^1\) The new Paragraph 2 of the Constitution stipulated that the Greek men and women had the same rights. This simple sentence provoked a series of reactions on many grounds.

Following the legally established equality of the sexes, a series of discussions and meetings of experts took place in order to incorporate equality of the sexes into the entire Greek legal framework and society. A committee under the supervision of Andreas Gazis, professor at the Law School of the University of Athens, was responsible for changing and integrating the new family law into the former one. The committee examined the implications of the establishment of equal rights for both sexes, as reflected in the family life. They were responsible for adapting this major socio-political change, the equality of man and woman, into the family law of the Civil Code. Most importantly, equality of rights dictated

the eventual collapse of the patriarchic model; for example, children’s nurture and education was then both parents’ responsibility. Added to this, there had been important changes in the matters of abortion, adultery and dowry. Moreover, the situation of single mothers was then legally supported.

In fact, equality of the sexes and the changes it provoked to the institution of marriage were effectively implemented with the passing of new laws at the beginning of the next decade. Among the significant legal innovations was the equation of civil with religious marriage in terms of legality in 1982\(^2\) and when the equality of the sexes was fully incorporated in the legal texts of the Civil Code, the Commercial Law and the Code of Civil Procedure in 1983.\(^3\) In the same context, another law contained the cancellation of the previously compulsory law for the premarital health certificate and the legalisation of the family planning advice in 1980.\(^4\) This law permitted family planning advice in public clinics and maternity hospitals along with the establishment of special units for family planning in ten regions of the country. A few years later, abortion was also legalised in 1986.\(^5\)

Establishing equal rights for men and women was actually the legalisation of the Greek social reality. As elsewhere in Europe, during the World Wars Greek women also participated in the warfare either as heroines


249
or victims while safeguarding the survival of the country. Although female participation in the wars was largely neglected in historiography, it was an indisputable fact. Thus, it might be the devastating experience of the war that strengthened their personality and eventually led them to claim their rights after the end of it. As mentioned before, the role of the Greek woman began to change since 1952, when she acquired the right to vote in parliamentary elections. She also had the right to study and work; which made her an active and productive member of society. Consequently, the role of the mother changed as well, since it had to be combined with that of a working woman. The modification of woman’s role during the second half of the twentieth century was crucial to family life since she gained important legal rights and was emancipated. As was widely known, after entering the workforce, the traditional model of the housewife broke down and was replaced by a more multi-dimensional role. Women were absent from their house more hours during the day and had to let their children be raised by somebody else. Furthermore, the traditional Greek family model was reshaped; firstly due to innovative medical advances, such as in vitro fertilisation and sperm banks and secondly, due to societal changes, such as woman’s emancipation and urbanisation. As a result the change to family law in the mid-1970s was a reasonable outcome of the existing situation.

As Gazis argued, the challenge of his committee was to replace father’s authority with parental care. The essential meaning of this replacement was that the care of the children became obligatory for both

---

parents. In the past, the authoritarian role of the father did not leave room for the mother. The new family law regarded the mother as equal to the father. Both had to be in agreement in matters concerning the child. If they did not, then the law would protect the child. This was exactly the purpose of the new legal framework, to protect the child from a possible conflict between its parents.\(^8\) Other matters of concern were divorce and the function of single-parent families.

Gazis and Michalis Stathopoulos, a member of Gazis’ committee, participated in the conferences of the HES. This is another example showing on the one hand, the importance of the participants in the HES’s activities and on the other hand, the connection between them and the Greek state. In particular during this period members of the HES, such as Louros and Doxiadis, were also members or former members of the government.

In the late 1970s, the HES devoted three conferences to the institution of the family. The selected time period was not at all accidental, but fitted the context of changing the family law. The first and most thorough public discussion of the new family law was organised by the HES in 1976: “The Family Today and Tomorrow”. Later two more conferences, one in 1978: “Legal Problems from the Point of View of Medical Sciences” and another in 1979: “Parental Authority or Care” followed, but only to examine the legal aspects of family law.\(^9\)

---

\(^8\) Hellenic Eugenics Society, “Parental Authority or Care”, *Nomiko Vima*, 28, 2-3 (1979), p. 396 [in Greek].

The discussion at the 1976 conference was interdisciplinary, including perspectives ranging from pedagogy to theology. The theological view could not be missing from a discussion on family in Greece. The Greeks were traditionally strongly attached to the Orthodox Church and its Christian morality. Savvas Agouridis, Professor of Theology at the University of Athens, presented the Christian perspective on marriage and the conjugal relationship. Marriage was the first step towards the foundation of a family, which was translated into the “completion” of a human being and the continuity of the human species. Agouridis explained that according to the Holy Bible and Christian tradition, the institution of marriage was regarded as a highly respected relationship between a man and a woman that cannot be spoiled. However, from the Christian eschatological point of view, no human relationship was final. The “new life” in the future Kingdom of God would be beyond human relationships, as these were perceived and experienced by humans. This new state of being would not be humane, but a situation where man would acquire God-like characteristics and surpass his nature.\footnote{Hellenic Eugenics Society, “The Family Today and Tomorrow”, pp. 204-206.} Agouridis focused on the Orthodox perspective of marriage and family, as it was experienced in Greece. In the Greek tradition, marriage and family were of great importance. The foundation of a family was regarded as the main purpose of life. Unmarried people were considered incomplete and sometimes even marginal. This traditional thinking gradually altered simultaneously with the change from the extended family to the nuclear. Nuclear families replaced the large families of the past and this was a matter of concern, because the new family model was not as stable and cohesive as
the old one. The traditional model offered psychological security and stability, whereas modern nuclear families which were built in stressful, city centres, retained loose bonds among its members and could be disrupted easier.

The sociological view of the institution of family was successfully presented by Artemis Emmanuel.\textsuperscript{11} She began with a classical sociological principle that each society was a network which included many subsystems, one of which was the family. As in every relationship between a wide system and its subsystems, a mutual feedback was observed between the work of the society and that of the family. Consequently, the foundations and functions of society were often reflected in the family and conversely the activity of the family unit influenced the motion of society. In particular from the beginning of the twentieth century, the Greek family had to confront a number of difficulties, some of which were national insecurity, immigration and emigration, financial inadequacy and a poor educational system. Emmanuel quoted Valaoras’ observations on Greek demography, which had shown that this uneasy situation of the Greek society led to demographic stability and population ageing. The sudden urbanisation of the new-Greek society in big urban centres, such as Athens, was followed by a passive imitation of foreign, Western ideals. As Emmanuel argued, the majority of the new-Greeks, who inhabited the cities, pursued a fake “cosmopolitism”, which became threatening for the national and cultural identity of the country. Following the previous explanation of the relationship between the family and society, the imported lifestyle models

\textsuperscript{11} Hellenic Eugenics Society, “The Family Today and Tomorrow”, pp. 208-209.
were so influential to the family models that they contributed to the shift from “familism” to “individualism”. Therefore, the traditional Greek family model, along with the values and principles it represented, was finally thrown into disarray and the nuclear family model prevailed.¹²

However, Emmanuel was optimistic about the future of the family. On one hand, she argued that the foundation of a family was an innate characteristic of human beings; on the other hand that in every society there was a family model, which was transformed in accordance with the societal changes. Therefore, it was possible that a positive development in society would result in the betterment of the family. Social progress and scientific development could improve the quality of life gradually, in both individual and collective levels. To this end, a social agenda based on science, technology and moral values was absolutely necessary. In this context, family planning was essential, because the role of the family was significant to society. Moreover, the return to the older, traditional image of the family was essential to fulfill this purpose. Emmanuel also mentioned that genetics, eugenics and sociology should be aware of the problems that arise from the new family models, namely the technologically engineered families such as those resulting from sperm banks or in-vitro fertilisation. She acknowledged, though, that these scientific advances primarily assisted the institution of the family in fulfilling its psychosocial and cultural role. According to Emmanuel, Greek families, on the one hand should keep their

authenticity and their national identity, but, on the other hand, should be incorporated into the European idea of a unified but pluralistic society.¹³

As is widely known, every social change should be under a legal protection in order to be safeguarded. The above mentioned condition of Greek society in the twentieth century had to be legally secured. In fact, as Skorini-Paparigopoulou, Professor of Law at the University of Athens, explained, the legal system usually follows a social change, not the opposite. This time lapse was called “cultural lag” and reflected the delay in legalising a social fact.¹⁴ In the case under examination, the legal response to social change was Article 4 of the Constitution about equality between the sexes. The advanced position of women in the family and society had already existed, but it needed to be legally acknowledged.

Later, during the conference “Parental Authority or Care” (1979), Kalliopi Spinelli, a sociologist of Law, added that the modification of family law in accordance with Article 4 would not introduce anything new, but would adapt its outdated legal provisions to modern society. The legal framework was anachronistic; it did not follow the contemporary social reality of the institution of the family, which was formed in the technologically developing society of Greece.¹⁵ Maria Fatourou added that Greece should follow the example of other European countries that changed their family law in the past five years; because Greece belonged to Europe.¹⁶

The conflict between modernity and tradition was mirrored in many aspects of the family life, including child-rearing. From a paedagogical

---

¹⁴ Ibid., p. 214
¹⁵ Hellenic Eugenics Society, “Parental Authority or Care”, p. 398.
¹⁶ Ibid., p. 400.
point of view, Evangelos Papanoutsos, argued that the change from parental child-rearing to child-raising by grandparents or nannies was the most problematic. In the past, the children did not leave home before primary school; they learned the first elements of knowledge inside the familial environment. In the modern society, the children were raised by a person, all too often, from outside of the family circle; starting around the time of breastfeeding. Nannies and baby-sitters took the place of parents and the paedagogical role of the family failed.\(^\text{17}\) Therefore, according to Papanoutsos, the state had to enrich the educational system for its future citizens.

The, then modern, social conditions did not benefit the cohesion of the family. As a psychiatrist, Georgios Christodoulou presented the psychological side and a possible reaction of the children. The emotional bonds between children and their parents had become so loose that in many cases they faced serious psychological problems. Christodoulou explained that the lack of a good familial environment caused children to experience disturbances in behaviour, speech, and personality. In extreme cases there were studies that supported the idea that people raised in problematic families tended to have criminal behaviour. It was not a coincidence that many psychoses were attributed to the bad relationship that the patient had with his familial environment. Christodoulou quoted the theories of Sullivan,\(^\text{18}\) Lidz,\(^\text{19}\) Singer and Wynne,\(^\text{20}\) and the double-bind theory of


Bateson;\textsuperscript{21} to justify his position.\textsuperscript{22} It is worth mentioning that these theories formed the basis for the anti-psychiatry movement, which demonstrated the link between a problematic social environment and the development of psychoses.

**Sex Education**

The originality of the HES's conferences was not limited to eugenics and population problems, but included the thorny issue of sex education. Although the HES discussed the subject in 1963,\textsuperscript{23} the time was not appropriate to produce significant outcomes. There were negative reactions and doubts about the effectiveness of the addition of sex education as a separate course in schools. The prevailing Greek perspective was that the family should play the role of the educator in sexual matters.\textsuperscript{24} As was previously demonstrated though, the educational role of the family was limited or non-existent. The absence of sex education was part of the wider problem of restricted knowledge of reproductive health and hygiene, which resulted in the large number of unwanted pregnancies, abortions, single mothers, the spread of venereal diseases and limited use of contraception. Up to the present day, sex education has not been part of the Greek schools'...


\textsuperscript{22} Hellenic Eugenics Society, “The Family Today and Tomorrow”, pp. 219-220.


\textsuperscript{24} Elizabeth Ioannidi-Kapolou, “Use of Contraception and Abortion in Greece: A review”, p. 176.
It is surprising that in a country with a significant problem of numerous induced abortions, sex education is ignored.

Although there were teachers and scholars who voiced the necessity of sex education in schools, no progress had been made until 1979 when the HES organised a two-day, interdisciplinary symposium on sex education; illustrating many aspects of the topic and referring to the obstacles that impeded its inclusion in the school curriculum.

Alexandros Stavropoulos, a theologian, was responsible for the organisation of the symposium and delivered the keynote speech. The minutes of the conference were published by the Hellenic Eugenics Society in 1981. The then President of the HES, Ioannis Danezis, claimed that the published volume aimed at filling the gap of sex education in Greek scholarship. He added that the country was prejudiced against sex education, which was true. Therefore, that volume would be a useful tool for those who supported the dissemination of sex education and worked toward its materialisation. Except from the minutes of the three sessions that comprised the symposium, the volume included a list of addresses and telephone numbers of centres, organisations, public services and journals for sex education related directly or indirectly with sex education in Greece, UK, France, Switzerland, Belgium and Germany. Moreover, there was a thematic bibliography which included a list of dictionaries, encyclopedias, book series, journals, research studies and audiovisual material, handbooks,

---

25 Anastasios Antonopoulos, Sex Education of the Youth (Patras: n. p., 1953) [in Greek].
institutions, as well as information on international opinions for sex education. It also included information on special subjects, such as sexual anthropology, handicaps, contraception, unmarried mothers, venereal diseases, marriage, women, abortion, family planning and sterility. This was a unique companion for sex education which provided the reader with unprecedented information about the subject in Greek and international contexts.

The papers were prepared in advance by three working groups, each dealing with a different aspect of sex education. The first one chaired by G. Maniatis discussed the human sexual life under the prism of sex anthropology and biological, psychological, sociological and theological approaches. The second one chaired by M. Kinigou dealt with the international presence of sex education in comparison with Greece. The last group, chaired by I. Markantonis, prepared the discussion for the possibility of the inclusion of sex education in the Greek schools’ curricula.

Kleopatra Oikonomou-Mavrou, Professor at the National School of Hygiene portrayed the condition of the sex education in Greece. She thus explained that it was neither prohibited nor encouraged by the state. Although there was no legal constraint for its implementation, prejudice impeded it. The absence of sex education led children to obtain indirect and often non-scientific information about sexual affairs, mostly from their peers, their parents or printed material. Oikonomou-Mavrou identified the reluctance of teachers to undertake the responsibility of sex education. Simultaneously, teachers lacked training in teaching such subjects as reproductive health, sex, contraception or family planning, because colleges
and universities, even the medical school, did not include sex education in their curricula. However, the Orthodox Church was actively preoccupied with the subject and often organised relevant lectures and meetings about the preparation of adolescents for marriage, procreation and familial life.²⁷

From the “secular” perspective, the only example of premarital advice was the Premarital Advisory Centre at Alexandra Maternity Hospital under the direction of the president of the HES, Danezis and the participation of Valaoras and Kanavarioti. The establishment of the Centre was initiated by the HES and partly-funded by the Ministry of Social Affairs.²⁸ As mentioned before, its function lasted only for a couple of years (1966-1968), because it was an experimental institution aiming at evaluating the situation of premarital and conjugal relationships of the Greeks. The ultimate target was to take advantage of the results of the function of this Centre in order to establish an official premarital and conjugal advisory institution. Among the reasons for establishing such an institution was to confront the low birth rate and the incidence of unwanted pregnancies and abortions; and the prevention of divorces and venereal diseases. However, their target was not realised after the closure of the experimental centre. Similarly, sex education was not disseminated by any official institution. Much later, the initiative to publicly disseminate family planning advice was taken by a non-governmental organisation established in Athens by a group

of volunteers under the leadership of the gynaecologist, Dr. Kintis and a member of the Parliament, Mrs Tsouderou in 1976.\textsuperscript{29}

Mass media and publications for sex education were also scarce; only a few books, which were translations of foreign ones, were published. Remarkably, Oikonomou-Mavrou claimed that paediatricians, who asked radio stations to include brief messages or interviews about sex education, experienced disapproval and rejection.\textsuperscript{30} Oikonomou-Mavrou also identified the widespread belief that sex education would encourage children and youngsters to begin their sexual life earlier than “normal”. Fear of premature sexual activity, caused the majority of Greek society, including parents, teachers and health professionals to oppose sex education.

As already discussed, the role of the Orthodox Church was not pervasive, albeit decisive to the life of the Christian. The orthodox rhetoric in favour of sex education was based on the belief that man is a psychosomatic union. Thus, the physical entity of man cannot be ignored by the Church. According to Fouskas, a priest of the Greek Orthodox Church, the Church should be actively involved in sex education because the Christian does not blindly obey the commands of the priest, but demands argumentative discussion and education.\textsuperscript{31} Similarly as with schools and universities, the appropriate education of the clergy in order to confront the problems of teaching and advising about sexual matters was central to Fouskas’ argument. Profound study and appropriate methodology were deemed necessary for a successful education. In this context, Fouskas

\textsuperscript{29} Elizabeth Ioannidi-Kapolou, “Use of Contraception and Abortion in Greece: A review”, p. 177.
\textsuperscript{30} Hellenic Society of Eugenics and Human Genetics, \textit{Sex Education}, p. 127.
\textsuperscript{31} Ibid., p. 185.
claimed that the Orthodox Church should publish one or more encyclicals such as the *Casti Connubii* of the Catholic Church and the *Problems of Marriage and Divorce* by the Archbishop of Canterbury.  

Summarising the general outcomes of the symposium, it was unanimously argued that: sex education was necessary at every age, with an emphasis to childhood and youth; parents should co-operate with teachers in order to assist the child during its psycho-sexual development; and, particular attention should be paid to the selection and training of sex educators, in schools, churches or other institutions. Above all, the implementation of sex education courses should result from a coordinated action by the family, educational, religious and state institutions. The HES offered the expertise of its members and bibliographical and audiovisual material at the disposal of every interested agent or institution and the state.

**Eugenics during Pregnancy**

Although genetic determinism was popular among physicians and biologists, many health professionals urged the need for prevention from environmental, harmful factors during pregnancy that cause birth defects. Experts have admitted that the advantage of this kind of preventive medicine or eugenics during pregnancy was the ability to avoid, control or

---

eliminate the presence of external damaging factors, such as radiation, consumption of chemical drugs and maternal infection, which could lead to malformation or injury.

In 1963 the HES inaugurated a series of scientific conferences targeting primarily physicians. It was part of their plan to educate health professionals about issues of eugenics. The first solely medical round table conference, organised by the HES, was on the subject of “The harmful influence of various factors on embryogenesis”. The minutes of the conference were entirely published in the journal *Iatriki (Ιατρική)* by the Society of Medical Studies (Εταιρεία Ιατρικών Σπουδάων). The participants, who were all physicians, discussed physical, pharmaceutical or chemical factors that could have negative outcomes in pregnancy. Papers included: “The harmful influence of external and inherited internal factors on gene cell and the embryo” (N. Louros), “The Morphological Elements of Reproduction” (V. A. Papatheodorou), “The Elements of Physiology of the Reproductive System and Harmful Influences on the Gene Cells and the Embryo” (I. Danezis), “The Hormonal Negative Effect on the Embryo” (M. Batrinos), “The Importance of Pharmaceuticals on the Induction of Defects to the Formation [of the embryo]” (K. I. Moiras), “The Effect of the Maternal Infection to the Embryo” (K. Papadatos), “The Influence of the Ionic Radiation on Gene Cells” (G. Pontifikas), and “The Congenital Diseases Caused by Radiation on the Embryo” (I. Kostaridis).

The conversation which followed the end of the presentations was equally important because many important physicians expressed their views

---

on the subject. Among them was Konstantinos Choremis who congratulated
the President of the HES, Louros, for the initiative to organise such a
conference on the harmful effects of chemical and other pharmaceuticals
during embryogenesis. Choremis defined the remedial role of eugenics to
the prevention or modification of external factors after conception, because
the discovery and prevention of harmful environmental factors was more
promising and plausible than the discovery of genetic factors. He claimed
that congenital diseases were only partly confronted by the medical
advances and prenatal tests. Choremis was very critical of pregnant women
who took medication without any restraint. He remarked that “patience and
pain seem alien to human nature nowadays that people exploit scientific
advances more than is necessary”. 34 The role of eugenics should be to
educate pregnant women and help them to avoid such irresponsible
behaviour and pharmaceutical abuse. He propounded that “Modern
dysgenics and the multiplication of mental illnesses are more the result of
modern civilization; the work of human, and less the work of Nature.
Eugenics should aim at the prevention of harmful and dangerous effects on
human behaviour”. 35 In conclusion, Louros suggested that the research of
environmental harmful effects to embryogenesis was very important and
should continue to advance. However, in most cases, there was a genetic
predisposition. Therefore the manifestation of malformation was
multifactorial. Louros also focused on the education of the gynaecologists in
saying that it is their responsibility to inform and protect pregnant women.

35 Ibid.
Putting that conference in the medical historical context, it must be acknowledged that it was a pioneering work for the Greek medical community. On one hand during the 1960s many new drugs were released on the market but on the other hand many physicians did not know how to prescribe them correctly. Furthermore, the issue of polypharmacy was tormenting Greek society and affected pregnant women that used to take unnecessary medication without prudence. As was commented by Louros, the conference lasted four hours and the audience was large. Aside from environmental influence, another matter of concern for the pregnant women was the transmission of hereditary diseases.

**Hereditary Diseases: the Case of Mediterranean Anaemia**

The prevention of hereditary diseases was an essential component of eugenics. In Greece, as in the majority of Mediterranean countries, there was a growing concern for a particular disease, that of Beta-Thalassemia or Mediterranean anaemia. Its name is due to the high percentage of carriers in the region, even though it was also detected in people of African and Asian descent among others. As was often expressed during the period from 1950 to 1980, Mediterranean Anaemia was the primal social and medical problem in Greece, justifying the special attention that was given to this disease. The HES discussed Mediterranean anaemia specifically during three of their conferences: Blood and Heredity (1970), Round Table Discussion: Antenatal Diagnosis (1975) and Premarital Medical Examination (1978).

---

Mediterranean anaemia is a congenital blood disease, which provokes blood disorders that escalate to a form of anaemia. In its most severe condition: “homozygous Beta-Thalassaemia” (or thalassaemia major); the clinical symptoms varied from extreme anaemia to severe osteoporosis with spontaneous fractures, bone deformities and abdominal swelling.\textsuperscript{37} In the most common cases, the patients would require blood transfusions for the rest of their life.\textsuperscript{38} According to Fessas, a pioneer in studies on Mediterranean Anaemia in Greece, medicine should keep these people alive because blood transfusions were the only thing that a patient should do. No matter how difficult such a situation might be; it was effective because people with Mediterranean anaemia had no other mental or physical problem, apart from a small number of red blood cells.\textsuperscript{39} Although he supported the above view, he argued that physicians should be obliged to recommend or impose preventive measures, such as a simple blood test to prospective parents. The matter of safety, regarding the accurate prognosis and diagnosis of the disease, was quite clear here. Although for a number of hereditary diseases the prognosis was not accurate for Mediterranean anaemia it was safe.\textsuperscript{40}

Mediterranean anaemia belongs to the category of genetic diseases, which are not apparent in the prospective parents before taking the blood test, because the trait carriers do not manifest the disease. The only

\textsuperscript{40} Hellenic Eugenics Society, “Premarital Medical Examination”, *Materia Medica Greca*, 6, 4 (1978), p. 303 [in Greek].
advantage of Mediterranean anaemia is that it can be accurately predicted even before marriage and conception. After taking the blood test, the prospective parents were able to decide about their future and bear the responsibility for taking the risk of giving birth to a genetically defective child.\textsuperscript{41} The percentage of transmission of the disease to the children of the carriers is the same as any other congenital disease, where the Mendelian laws of heredity\textsuperscript{42} were applied. Moreover, a defective gene was expressed only when the person had inherited it from both parents.

There were numerous studies dealing with the incidence of this disease.\textsuperscript{43} In order to better understand its range, Christos Kattamis presented the results of studies between 1962 and 1972, which showed that in particular areas of the country, such as Euboea and the island of Rhodes Mediterranean anaemia reached 20 per cent, and, sickle-cell anaemia reached 23 per cent in areas such as Chalkidiki and Orchomenos. In 1974, Kattamis conducted research in the First Pediatric Clinic of the University of Athens regarding the number of children suffering from congenital diseases who were hospitalised, the number of days of hospitalisation and the number of the beds that they used. The results showed that 2,071 out of 9,664 children with congenital diseases, which correspond to 21.4 per cent, suffered from Mediterranean anaemia. The percentage was extremely high

\textsuperscript{41} Hellenic Eugenics Society, “Round Table Discussion: Antenatal Diagnosis”, \textit{Iatriki}, 30, 2 (1976), p. 128.
\textsuperscript{42} Gregor Mendel’s laws of inheritance are the following: a. the Law of Segregation; b. the Law of Independent Assortment; and c. the Law of Dominance. These are described in every book on biology and explain the transmission of a genetic trait. For a critique on Mendelian eugenics and anti-Mendelism see Hamish G. Spencer and Diane B. Paul, “The Failure of a Scientific Critique: David Heron, Karl Pearson and Mendelian Eugenics”, \textit{The British Journal for the History of Science}, 31, 4 (December 1998), pp. 441-452.
\textsuperscript{43} See the field study: B. Malamos, Ph. Phessas, G. Stamatoyannopoulos, “Types of Thalassaemia-Trait Carriers as Revealed by a study of their Incidence in Greece”, \textit{British Journal of Haematology}, 8, 5 (1962), pp. 5-13.
and showed the gravity of the problem. The second more frequent disease was sickle-cell anaemia, 138 children (1.3 per cent) and the third was cystic fibrosis with 20 children (0.2 per cent).\footnote{Hellenic Eugenics Society, “Round Table Discussion: Antenatal Diagnosis”, p. 136.} Kattamis was convinced that the medical advances could be better appreciated with the co-operation of other sciences and the sympathy of the entire population in order to tackle the disease.

It is worth mentioning that Stamatoyannopoulos, Fessas, Kattamis and Loukopoulos were the founders of the first Centre for the Prevention of Mediterranean Anaemia, in 1975 in Athens.\footnote{Hellenic Eugenics Society, “Premarital Medical Examination” and Centre of Mediterranean Anaemia, Laiko Hospital Athens [http://www.laiko.gr/index.php?option=com_content&view=article&id=81&Itemid=125 accessed 12 January 2012].} The Greek state financially supported the function of the Centre and the campaign for the prevention of the disease.\footnote{Hellenic Eugenics Society, “Premarital Medical Examination”, p. 128.} In particular, Loukopoulos claimed that when a problem took national dimensions, such as Mediterranean anaemia in the region of the Mediterranean Sea or the sickle-cell anaemia in people of African origin, then a genetic policy was called for.\footnote{Ibid.}

Genetic counselling dominated the discussions on Mediterranean anaemia. Fessas expressed the opinion that the most important medical recommendation was prevention by examination; namely the couples about to get married should be examined. He claimed that the only possible solution for a couple who are both carriers of the disease is not to have children, because there is a high percentage of having a defective child. He suggested in vitro fertilisation with a donor or adoption, as alternative
solutions. Timos Valaes, Director of the Institute of Child Health, agreed with Fessas in the prohibition of marriage when both parents were carriers, but acknowledged that the measure was very strict, since these people would still have 75 per cent of giving birth to a normal child.

As for the introduction of the examination for Mediterranean anaemia to the premarital certificate, Fessas argued that it would not be possible technically; each couple should take its own responsibility towards this problem. There were so many marriages, that it was not possible to know if every couple was properly examined.

Premarital Medical Examination and Premarital Certificate

Blood examination before marriage was a topic of discussion in the Pan-Hellenic Medical Conference organised by the Medico-Chirurgical Society in 1958. During the conference, the prevention of hereditary diseases to secure good progeny was the prevailing opinion. Professors of Cardiology and Pathology emphasised the disastrous repercussions for family, society and race resulting from the marriage of unhealthy individuals. Katsilamprou, Professor of Cardiology, argued that the neurological examination should be added to the laboratory examination in order to avoid the birth of epileptic children. Even cancer predisposition was attributed to a mother’s deficient heredity, being transmitted through breastfeeding. Thus

48 Ibid, p. 121.
49 He meant that they will have 25 per cent possibilities to give birth to a normal child and an additional 50 per cent to have a child-carrier, who had only one defected gene, so the child would be apparently healthy. Hellenic Eugenics Society, Public Discussions, vol. 3, p. 23.
the premarital certificate of health was deemed absolutely necessary by Katsilamprou.\textsuperscript{50}

Although the discussion about premarital health certificate was prominent since the beginning of the twentieth century, it became compulsory only during the years of the dictatorship (1967-1974) with Law 300/1968.\textsuperscript{51} After being legally imposed to the prospective spouses, every couple was obliged to provide it to the authorities in order to get married. The results of the medical examination, however, were confidential and the physician was protected by the law. This suggests there was no official means for state intervention in marriages and procreation, with eugenic marriage guidance mostly occurring in private practice.

This certificate was voluntarily given to couples who wanted to be examined before marriage. They visited a doctor to whom they provided the necessary information about their family’s medical history and they were also examined themselves. This examination occurred in two parts. One part was the actual examination and the other was the examiner’s advice in case of an undesirable result.

Apart from including the premarital health certificate in various discussions, the HES discussed it in detail during its conference: “Premarital Medical Examination” (1978), in order to evaluate its usefulness ten years after its legal implementation. The members of the symposium were unanimously positive towards the voluntary character of the examination, but negative towards the compulsory one. In fact, Danezis admitted that,

\textsuperscript{50} E. M., “Blood Examination before Marriage is Necessary”, \textit{Ethnos} (15 September 1958), p. 6 [in Greek].
globally the premarital medical certificate was not compulsory. Furthermore, many states proposed the establishment of special genetic centres, where the examination and advice would be absolutely voluntary, such as the experimental Pre marital Advisory Centre at Alexandra Maternity Hospital and the Centre for the prevention of Mediterranean anaemia in Athens.\textsuperscript{52}

Chaniotis, Director of the Ministry of Social Services, analyzed Law 300/1968 and explained its features. Firstly, the premarital medical examination became obligatory for those who wanted to get married legally. Secondly, the certificate could be obtained by the couple only after examination. Thirdly, in the event of an unwanted result, this would not be written on it. The purpose of the certificate was only to show that the examination took place. This was the reason why it was named “Certificate of Medical Examination” (Πιστοποιητικό Ιατρικής Εξετάσεως) and not, for example, “Health Certificate” (Πιστοποιητικό Υγείας). A fourth point was that the physician should be absolutely discreet. There were penalties, if they transgressed the medical confidentiality. Furthermore, in the case of a defected person, the physician was obliged to inform the patient about all the details of the disease; but in the end to let the patient decide for himself. The patient alone was the person responsible for the decision of whether to get married and have children or not. The decision should be made independently. Last but not least, the examination was free of charge when the couple was examined at a public health institution or at their cost if they wanted to visit a private physician. In general, the diseases that were

\textsuperscript{52}Hellenic Eugenics Society, “Premarital Medical Examination”, p. 300.
considered dangerous were mainly infectious diseases and not just congenital; such as leprosy, tuberculosis, syphilis and psychological disorders. The law permitted additions and exclusions in this list.\footnote{Hellenic Eugenics Society, “Premarital Medical Examination”, p. 300.}

A problem that came up was the possibility of one spouse hiding the disease from the other. As was shown, someone could obtain the certificate claiming that he is healthy, while he was diagnosed with a disease. The presence of the document could provide false evidence of the person’s health. Therefore, the premarital health certificate was deemed ineffective and misleading.

From the medical point of view and as an expert in Mediterranean anaemia, Fessas underlined the fact that it could prove dangerous, because someone could choose to get married and have children despite the fact that he was diagnosed with a congenital disease. Therefore, this couple could give birth to defective children intentionally. As for the safety of the diagnosis, Fessas claimed that there was a large number of diseases that could not be accurately diagnosed; whereas there were others, like sickle-cell anaemia and Mediterranean anaemia that could be diagnosed safely.\footnote{Ibid., p. 303.}

From the legal point of view, Kassimatis, a prominent professor of Constitutional Law, explained the potential harmful repercussions of Law 300/68. He used the “slippery slope” argument to question the limits of state intervention on an individual level for reasons of positive and/or negative eugenics. Moreover, he wondered about the presuppositions that the lawmaker based his guidelines of the eugenic medical examination.\footnote{Ibid., p. 301.}
referred to the vagueness of the article 3 of Law 300/68, which gives the right to the state to impose some prohibitions in case of undesirable medical results. These were the prohibition of marriage for a certain time period or forever; which he thought was an insult to human dignity. According to Kassimatis, the atrocities of National Socialism in Germany were made because this political party wanted to impose their politics via hygiene programs and laws; not to protect society from bad progeny. In order to prevent society from the repetition of the above example, he proposed that two fundamental principles that were stated in the Declaration of Human Rights be respected. The first one was the respect of human dignity; the state should not intervene in people’s personality, the second was the principle of free expression; each person had the right to use social institutions as they wished; in this case, the institution of marriage. Based on these principles, every examination which aimed at negative eugenics, such as the prohibition of marriage, should be banned as unconstitutional. Kassimatis claimed that while a system of eugenics should be adopted by the state, in order to prevent the spread of the congenital diseases; this should be based on the respect of human liberties.\textsuperscript{56}

To this end, Kattamis proposed a system of pre-marriage counselling aiming at the creation of healthy families from the physical, spiritual and psychological view. Apart from the prevention from congenital diseases, the premarital advice should point at the information for the dangers of the embryo and its protection. In some cases, the physician should extend his contribution to matters of fertility, procreation and family planning. The first

\textsuperscript{56} Hellenic Eugenics Society, “Premarital Medical Examination”, p. 302.
stage of advice should be information, the second safe laboratory examination and the third and most important should be the proper guidance of the couple.\textsuperscript{57}

In fact the word “guidance” was not accurate, because the physician in such cases had to be as neutral as possible. The role of the advisor was to analyze and explain the health condition of the examined individual in order to help him make a decision about whether to get married and have children or not. The physician should hide nothing from the patient and try to be very informative in order to enlighten him.\textsuperscript{58} Fessas, as a physician, admitted that it was very difficult to be absolutely neutral because most of the time the patient asks for a physician’s advice and because the profession was, by nature, invasive. It would be easy for a physician to impose his opinion as the right one, but when acting as a genetic counsellor, he should only be informative and neutral despite his ability to influence the patient.\textsuperscript{59}

As far as psychological disorders were concerned, there was a conflict between Christodoulou, a psychiatrist, and Kattamis, a physician. On the one hand, Christodoulou complained about the lack of information regarding the advice to be given to psychotic patients. Furthermore, he discussed the case of schizophrenia and argued that everyone had a possibility of 0.5-1 per cent to develop this disease; if one of their parents was schizophrenic, then the percentage would be 11 per cent; if both parents were schizophrenic, then they would have a 45 per cent possibility to develop this disease. As a result, not only was it important to know the way

\textsuperscript{57} Hellenic Eugenics Society, “Premarital Medical Examination”, pp. 303-304.
\textsuperscript{59} Ibid., p. 308.
a disease was transmitted, but also the damaging experience of a child who lives in a psychotic environment. Maybe schizophrenia was not transmitted genetically, but it should be examined as well. Kattamis, on the other hand, insisted on the fact that psychosis could not be proved genetically; in a laboratory. It could develop after 30 or more years. Therefore, it could be reckless to adopt certain rules of advice for those cases. Fessas added that the psychiatrist, not the physician who would perform the premarital examination, should advice a psychotic patient.\textsuperscript{60}

To sum up, there were some common conclusions that all agreed with. First of all, every prospective parent should be responsible of their actions regarding reproduction and should visit a doctor who could help them do so. Therefore, they insisted on the importance of medical counsellors, who were supposed to explain in detail the medical problem and give useful medical advice to the couple. The new couples should be aware of the dangers that threatened them and their offspring. Furthermore, the members of the HES emphasised the difference between the preventive character that such an examination entailed and the constant eugenic control of the nation by the state.

Family planning and the premarital health certificate were eventually re-defined by Law 1036/80 in 1980. This permitted the foundation of Family Planning Centres and simultaneously abolished the compulsory premarital health certificate. Remarkably, Law 1036/80 was signed by the then Minister of Social Services, Spyros Doxiadis, former President of the

\textsuperscript{60} Hellenic Eugenics Society, “Premarital Medical Examination”, pp. 310-311.
HES. The Hellenic Society of Family Planning, Contraception and Reproductive Health was active in Greece only after 1976 and in 1985 it became an official member of the IPPF.

Eugenics and Genetic Diagnosis

The HES paid particular attention to the diagnosis of a genetic disorder. In December 1975 it organised a round table discussion under the title “Antenatal Diagnosis”. The approach was holistic and interdisciplinary, and the overall aim was to bring together academics of different backgrounds to exchange opinions and ideas regarding the issues posed by a genetic diagnosis. Based on the commentaries expressed by the participants the following topics deserve attention: medical counselling, preventive measures, genetic policies, the option of abortion in case of genetic abnormality and the role of religion.

In his paper, Loukopoulos underlined the importance of proper medical guidance after a genetic test and diagnosis. The need for such guidance was necessary, he argued, mainly in three cases: when one of the parents had a congenital disease, when a child with a genetic abnormality was already born in the family, but the parents were in fact healthy and when the parents have undertaken a medical test which indicated high

---

64 Ibid., pp. 125-129.
possibility of giving birth to a child with a genetic disease. The role of the medical advisor was crucial in this respect, although he/she had to base the diagnosis on two premises: confidence about the diagnosis of the genetic disease of the parent or the child and its gravity as well as available information about the way of transmission.65

Taking this argument further, Fessas added three more cases where medical intervention was necessary: when the disease was very frequent, when it was severe, and when it was neither frequent nor severe, but lasted for a long period, thus also becoming a serious social problem. One such genetic condition was considered to be Down’s syndrome. Fessas then highlighted that there was still insufficient knowledge about the so-called “bad gene”, except from these genes that caused serious illnesses. What was a “bad gene” today could be a “good gene” tomorrow, he argued. As a result, scientists often could not offer a definite answer and a safe choice to the public.

Fessas considered the role of the physician and the impact of the diagnosis on the patient equally important. He argued that scientific advances influenced the function of society. People should be aware of the new technologies in medicine along with their use. Fessas claimed that people should not be tempted to alter their genetic inheritance for eugenic reasons and that scientists ought to allow biological variety in society.66

The psychiatrist, Konstantinos Panagiotakopoulos, described the psychological problems caused by a negative genetic diagnosis.67 Many

65 Hellenic Eugenics Society, “Round Table Discussion: Antenatal Diagnosis”, p. 125.
66 Ibid., p.176.
people who confronted such problems needed the help of a specialist and proper medical guidance. A negative diagnosis not only affected the parents, but also the wider family circle. Panagiotakopoulos then discussed the role of the genetic advisor who could be the family doctor. Being in this position, the family doctor had to be compassionate but remain neutral and try not to influence the parents when making a decision. The doctor should only help the parent decide and not impose his own beliefs. In many cases, though, this was not possible, Panagiotakopoulos conceded. Genetic diseases not only affected the individual and his family but caused social problems as well.\textsuperscript{68} With this consideration in mind, genetic advisors often prompted the parents to make the, presumably, correct decision.

In agreement with Panagiotakopoulos, Eleni Marouli, a social worker, argued that genetic counselling should be neutral but very informative, so as to be helpful to the couple. It was the doctor’s responsibility to bring about equilibrium between the couple and to ensure that there would be a good relationship between the couple and the rest of the family circle. Genetic counselling, she suggested, should consider every patient individually. Each person was different and unique; therefore the genetic counsellor should be flexible and caring. Marouli added that the genetic defect was perceived in various ways according to its external manifestation; the level that affects the patient’s social life; and society’s behaviour towards the affected individual.\textsuperscript{69} In this context, Marouli pointed out the psychological repercussions of a negative genetic diagnosis for the

\textsuperscript{68} Hellenic Eugenics Society, “Round Table Discussion: Antenatal Diagnosis”, p. 145
\textsuperscript{69} Ibid., p. 151.
life of the couple.\textsuperscript{70} When someone knew that he or she was a carrier of a genetic disorder they frequently became insecure, frustrated and generally shaken. The reaction to such a diagnosis varied according to the individual’s cultural and educational level, religious beliefs, etc.\textsuperscript{71}

Danezis was the only participant who mentioned the other side of genetic testing: positive diagnosis. If the test was positive, the parents were generally not anxious about the health of their child, particularly when they already had an “imperfect” child or when there were recorded congenital diseases in their families. Danezis thus described genetic testing as a method of prevention and as a means of stress-relief for prospective parents.

Genetic testing as a method of prevention was also raised by other participants. According to Dimaki health improvement could be accomplished in three ways: firstly, early diagnosis of a genetic abnormality, secondly, the prevention of conception of defective children and thirdly, selective abortion. Dimaki emphasised the second option, in particular. She believed that prevention was better than cure, so everybody should focus on the methods of prevention. The methods she suggested were the following: selection of spouses on a rational basis according to their medical record, the permanent use of contraceptives or even voluntary sterilisation in case of negative diagnosis of one or both spouses, or in vitro fertilisation using a healthy donor.\textsuperscript{72} She admitted that the above recommendations were going to elicit negative social reactions, which depended on the social structure and the dominant social values of each society.

\textsuperscript{70} Ibid., p. 148.
\textsuperscript{71} Hellenic Eugenics Society, “Round Table Discussion: Antenatal Diagnosis”, p. 149.
\textsuperscript{72} Ibid., p. 162.
Dimaki argued that the disciplines of sociology and biology should meet at some point, because their co-operation would provide solutions to the problems of eugenics.\textsuperscript{73} Both disciplines should find a way to secure the socio-biological betterment of mankind. She claimed that both sciences interact with each other and have a common target, which is eugenics.\textsuperscript{74} On the contrary, Marouli focused on education and suggested sexual education and courses of family planning in schools, educational television programs and the continuous education of the specialists, such as physicians, social scientists and educators; as effective, preventive measures.\textsuperscript{75}

The most important factors to take into account in order to tackle the hereditary diseases, Kattamis argued,\textsuperscript{76} were the disease’s frequency and gravity, lack of therapy, effectiveness and the cost of prevention measures of each disease. Therefore, population studies of the congenital diseases in Greece were imperative. Kattamis focused on three congenital diseases; Down’s syndrome, which was also associated with the age of the mother; Mediterranean anaemia and sickle-cell anaemia, which frequently appeared in Greece. Constantinos Crimbas for instance would accept eugenic policies for Mediterranean anaemia, sickle-cell anaemia, and maybe a medical intervention for Down’s syndrome. He made clear, though, that the decision should be personal and not after state intervention; the state should only provide the person with the relevant services.\textsuperscript{77} In addition, Kattamis was absolute about the urgent necessity of abortion in the case of such a

\textsuperscript{73} Hellenic Eugenics Society, “Round Table Discussion: Antenatal Diagnosis”, pp. 160-165.
\textsuperscript{74} Ibid., p. 160.
\textsuperscript{75} Ibid., p. 151.
\textsuperscript{76} Ibid., pp. 133-136.
\textsuperscript{77} Ibid., p. 174.
diagnosis. Sometimes selective abortion was the only available means of tackling a disease.

Moreover, Crimbas claimed that medical and biological advances offered the opportunity to establish and apply measures of genetic policy either individually or governmentally. He explained that these policies could be divided in positive and negative eugenic policies. The negative were translated into the effort to avoid the presence of pathological phenotypes; the positive was the effort to multiply the “positive” hereditary traits, based on systems of selection; like animal breeding. He claimed that only some of the negative eugenics policies should be adopted by the state; not positive ones, in the fear of a repetition of the Third Reich’s atrocities. Crimbas suggested certain measures, in the event that both prospective parents were carriers of a hereditary disease: a). to prohibit their marriage, b). to let them get married and reproduce, but to examine the embryo and propose selective abortion if it is defective, c). to let them get married, but either to decide by themselves or to be prohibited by the state to have children, d). to let them get married, but to have only the choice of in vitro fertilisation using a donor.

From the biological point of view, Crimbas admitted that these measures would not lead to genetic purification, because the diagnosis was not always accurate and the knowledge regarding the transmission of disease was not always clear. Only a slight biological change could appear by adopting these policies. Crimbas finally suggested that the optimal

---

78 Ibid., p. 135.
79 Hellenic Eugenics Society, “Round Table Discussion: Antenatal Diagnosis”, p. 137.
80 Ibid., p. 139.
solution was to allow the couple to get married but to abstain from procreation. He argued that eugenic policies could lead to the breeding of people, who suffer from a congenital disease, but it could not alter the genetic pool of a population; this could not be genetically enhanced.

Regarding selective abortion, Simopoulos focused on the possibility of the birth of a defective child. He admitted that once the prospective parents were informed about the health condition of their child, they were responsible for the continuation of pregnancy. The psychological and financial burden of this decision was heavy and important concerning both their own and their child’s future life.

Although today there are medical methods of dealing with some genetic problems, at the time the most suggested solution was selective abortion. As Danezis noted, at that time there were only three methods of diagnosis during pregnancy; amniocentesis, intrauterine overview, and placentacentesis, the last two of which were in an experimental stage. For example Down’s syndrome is not as severe a condition as it was in the 1970s. A large part of people with Down’s syndrome have the chance of getting an education and living a “normal” life. However, there is still genetic and social discrimination against people with Down’s syndrome. Genetic counselling is often against continuing a pregnancy when the embryo is diagnosed with Down’s syndrome. Lack of accurate information about a child with Down’s syndrome, such as their average lifespan, often

81 Hellenic Eugenics Society, “Round Table Discussion: Antenatal Diagnosis”, pp. 143-145.
82 Ibid., pp. 130-133.
leads a pregnant woman to decide to terminate the pregnancy. Although it does not represent a eugenic policy, misleading information by medical professionals to influence a pregnant woman’s decision-making might be a form of eugenics. ⁸⁴

Many eugenicists, including members of the HES, called selective abortion “therapeutic” because of that it was proposed as a method of therapy in cases of genetic abnormalities. Danezis argued for the necessity of therapeutic abortion, although he recognised the lack of accurate diagnosis. He believed that genetic diagnosis of an abnormality must lead to the decision of therapeutic abortion. ⁸⁵ He explained that the above diagnostic methods could take place between the 14th and 17th week of pregnancy, because then it was safe to interrupt a pregnancy in the event of a negative diagnosis, despite the fact that the results of the test would be more accurate if the test was taken later that 17th week, when the interruption of the pregnancy could be dangerous.

On the other hand, Stamatis distinguished, in legal terms, the life before and after birth. Human life—after birth—and health had intrinsically great value which made them the greatest natural and legal rights. ⁸⁶ The protection of life after birth was absolute and unconditional; whereas before birth it was comparative. ⁸⁷ The legal approach was thus put on a different basis. Apart from the protection of the unborn child, there were legal problems that arose from a prenatal diagnosis, such as the responsibility of the physician who performed amniocentesis or abortion for reasons of

---

⁸⁵ Hellenic Eugenics Society, “Round Table Discussion: Antenatal Diagnosis”, p. 132.
⁸⁷ Ibid., p. 172.
eugenics. If amniocentesis caused the death or malformation of the child, it could not be regarded as murder, because it was done without the intention to kill or harm. However, from the beginning, the physician should have excluded the possibility that his action could cause injury or death of the fetus.\(^{88}\)

At that time (1976), abortion for reasons of eugenics was prohibited. According to the Greek Penal Code, Law 304, Paragraphs 4 and 5, abortion was legally accepted only for the following reasons: the danger of life or health of the mother, in case of seduction, rape or incest. As a result the physician could not legally suggest the interruption of pregnancy in any other case.\(^{89}\)

The Christian Orthodox point of view was discussed by Alexandros Stavropoulos who repeated that genetic counselling should be informative, yet neutral. The medical advisor should not make the decision on behalf of the couple. Nobody should decide on behalf of somebody else in spiritual matters; such as matters of life or death.\(^{90}\) Stavropoulos based his interpretation of genetic diagnosis on Christian anthropology.\(^{91}\) There were some fundamental values of Christian tradition that were outlined, such as the belief that man was created by God in His image, that man and woman were responsible for the transmission of life, and that procreation was blessed by God. According to Stavropoulos, the Orthodox tradition associated the sinful life with disease and bad progeny. Furthermore, in the

---

88 Hellenic Eugenics Society, “Round Table Discussion: Antenatal Diagnosis”, p. 173.
89 As mentioned, the Law 304 was replaced in 1986 by the Law 1906, which permitted the interruption of pregnancy in case of prenatal diagnosis showing severe abnormality of the embryo, which is going to result in the birth of a pathological newborn.
90 Hellenic Eugenics Society, “Round Table Discussion: Antenatal Diagnosis”, p. 170.
91 Ibid., pp. 168-171.
ceremony of marriage was included the wish "υπέρ καλλιτεκνίας", for good, beautiful and healthy children. Moreover, the Church cared about the good progeny, and showed it practically by prohibiting the marriage between relatives and the prohibition of sexual relationships when the woman is menstruating, because it was believed that conception during menstruation, would lead to the birth of children with genetic defects. The ideal case for the Orthodox Church would be if the conception was the result of a physical sexual relationship of the married couple, without the intention to avoid procreation, either by contraception or interruption of the pregnancy. The only means of avoidance of procreation should be the abstinence of the couple. As for abortion, the Christian tradition was clear, abortion was contrary to the Christian perception of life; it was considered as murder and an attempt against human life.\textsuperscript{92} On the other hand, the Church understood the difficulty of raising a defective child and had to be sympathetic towards those people who made the decision to interrupt the pregnancy for reasons of eugenics, when they came to Church with repentance.\textsuperscript{93} Dimaki, on the other hand, mentioned the “latent eugenics” expressed in the Christian prohibition of incest in order to retain the familial relationship out of sexual conflicts and rivalries. She believed that behind it hid the effort to avoid the birth of defective children.\textsuperscript{94} Stavropoulos replied that the Church always supported medicine and its curative role. Even if the respect of human life was above all virtues; the Church would not promote or allow the conception, which was predicted to give birth to defective children.\textsuperscript{95}

\textsuperscript{92}Hellenic Eugenics Society, “Round Table Discussion: Antenatal Diagnosis, p. 170.
\textsuperscript{93} Ibid., p. 171.
\textsuperscript{94} Ibid., p. 163.
\textsuperscript{95} Ibid., p. 169.
Dimaki, in agreement with previous presenters, argued that the choices after a diagnosed defect in one or both members of the couple were limited to the following: to avoid marriage; to get married but avoid procreation with the use of contraceptives; in vitro fertilisation with a healthy donor; or to risk a pregnancy, but choose abortion for reasons of eugenics, in the event of negative prenatal diagnosis. Unlike most of the members of the HES, Dimaki went as far as to support the sterilisation of such a couple in favour of the rest of the society.96

From the financial point of view, Petros Gemptos claimed that public expenses for health were a form of investment, due to the fact that they eventually offered prosperity and increased the value of human capital.97 Regarding genetic policies, Gemptos argued that when the cost of prevention from a congenital disease was lower than its future therapy, then, from a financial point of view, these preventive measures were desirable. He seemed to agree with Crimbas, who was cautious about new biomedical technologies and genetic policies. Gemptos believed that additional research should be done on influential factors of the health conditions. He thus said: “Even if in the future we have the ability to test the impact of a defective gene, genetic policies should be applied only in states of emergency”.98

As far as the role of the state was concerned, Dimaki claimed that it should be more active in matters of procreation. Moreover, it should incorporate into its system the pursuit of the birth of healthy children.99 At that point, she mentioned the valuable contribution of sociology in a eugenic

---

96 Hellenic Eugenics Society, “Round Table Discussion: Antenatal Diagnosis”, p. 170.
97 Ibid., p. 167.
98 Ibid.
99 Ibid., p. 164.
Sociology could predict the social consequences of the application of preventive measures of the birth of abnormal children; it could examine the reaction of different social groups in scientific advances, which related to family planning; and finally provide the state with useful data regarding the ways of progressing public health without provoking intense social tension. Stamatis expressed the legal point of view and underlined that state eugenic policies should be limited by the constitutional freedoms of the citizens, because if we exceeded these limits, then a totalitarian ideology might appear.

Female Emancipation and Eugenics

The establishment of women’s clubs and societies at the time also reflected the fact that feminism in Greece became stronger. In this regard, the most successful achievement was the winning of the right to vote in parliamentary elections in 1952. However, gender equality was only acknowledged by the state almost 30 years later. In the meantime, women entered the workforce and academia; they elevated their social status and became actively involved with politics.

---

100 Hellenic Eugenics Society, “Round Table Discussion: Antenatal Diagnosis”, p. 165.
101 Ibid., p. 174.
Lina Tsaldaris is one illustrative example of a woman who made
great efforts for child protection in Greece. She also supported women’s
clubs and became President of the PIKPA; represented the country in
international organisations, such as the UNICEF, and managed to become
Minister for Social Care in the Greek parliament. In accordance with her
socio-political activities, Tsaldaris was interested in eugenics and family
planning too. Evidence shows that she was one of the founding members of
both the Hellenic Eugenics Society and the National Union for of Sanitary
Education and an honorary associate of the International Planned
Parenthood Federation.

Popi Spelioti-Bazina, a gynaecologist, President of the Intellectual
Women Society and member of the Hellenic Eugenics Society, was another
example of a Greek woman who struggled for their emancipation and
gender equality. Most importantly, Spelioti-Bazina was one of the few
women who deliberately published articles on eugenics and birth control.

Considering that women had access to education and job
opportunities, much of their time was spent on their activities outside the
home. This automatically meant that her role as housewife was only part of
the new multi-dimensional role. One of the first alterations in family life
was the postponement of a woman’s role as a mother. In the 1950s, women
tended to marry later than previously resulting in later childbearing. As a
consequence, the reproductive years and the number of children diminished;
then, large families gave way to smaller ones. Moreover, there was an
observed willingness to control reproduction and have access to
contraceptive techniques, either amateurish or professional. Gynaecologists,
such as Louros and Panayiotou in Athens and Tsacona in Thessaloniki, justified the desire of their patients to learn how to plan their families and avoid unwanted pregnancies. The huge number of unwanted pregnancies and abortions was also the result of the total absence of sex education in schools or elsewhere. As was portrayed in the analysis of the conference on sex education organised by the HES, not only was sex education in Greece non-existent, but also efforts towards its implementation were limited and often prohibited either by parents or teachers. The lack of sex education was an important deficiency of the reproductive health and choices of Greek women.

At the time, eugenics in Greece was intrinsically connected with family and procreation. The timeline of eugenics arguments begins with proper spouse choice, in terms of health and heredity, continues to eugenics during pregnancy and ends with proper childcare. Following this rationale, a variety of opinions of eminent Greek scholars and scientists for the legal protection of the child were examined: environmental influence during pregnancy, premarital medical examination, and congenital diseases — with a particular focus on Mediterranean anaemia— selective abortion and genetic counselling. Despite the divergence of opinions and the variety of topics, one can claim that a consensus was reached on the value and effectiveness of preventive medicine.
Conclusions

As was discussed in this dissertation, the choice of this particular period of examination (1950-1980), resulted from a variety of factors. In each country’s history of eugenics the researcher primarily seeks information for the official eugenics society. Following this consideration, my research was initially directed to the period of activity of the Hellenic Eugenics Society which approximately ranged from the 1950s to the 1980s. Moreover, this period coincided with Greece’s modernisation process, which in turn was associated with eugenics; feminism; birth control and social reconstruction. Before the 1950s, family planning was non-existent in the country, partly because there was no need to practice it during the long period of warfare and partly because experts in the IPPF focused on Greece after the establishment of the IPPF’s office for the region of Europe, Near East and Africa in London, in 1952. Another point of reference was that during this period of time, the preparatory work of experts, with different educational background, towards the repealing of laws that prohibited the reproductive freedom of the citizens took place. The most significant laws that were ultimately cancelled and replaced with ones that corresponded to the social reality were: the legal declaration for sex equality, the validity of the civil marriage, the cancellation of the premarital health certificate as a prerequisite for marriage, the permission for the establishment of family planning centres as integral units of public health institutions, and the legalisation of abortion and contraception. Until the present time, there has
not been a publication or research study to include, present and analyse these aspects altogether.

Furthermore, the period under discussion in this dissertation represents an ideal period to study demography in general and eugenic debates about the institution of marriage and family in particular. As demonstrated here, post-1945 attitudes to marriage, reproduction and family planning altered Greek traditional family models. The reason why the reshaping of the Greek family model was so important to the eugenicists was the fact that it affected the demography of the country. Individual reproductive choices influenced the balance of the population and, conversely, state population policies prohibited or allowed the materialisation of personal wishes. This mutual relationship brought consensus or argument, among women (or prospective parents), population experts, gynaecologists and state authorities.

Greek eugenics, as it developed during the 1950s and 1960s, promoted the idea of the proliferation of the population, the improvement of public health, preventive medicine and the dissemination of hygiene education. At the same time, opposition to birth limitation was legally secured by the state with prohibitive laws on contraception and abortion, for other than medical reasons, actually narrowing the range of reproductive choices of the individual. To a considerable extent, this pro-natalist policy aiming at the proliferation of births, namely the growth of population quantity, amounted to state intervention in personal and family life.

The HES, however, endorsed many of these ideas and policies, whilst arguing for the pursuit of personal and social prosperity, the
promotion of free reproductive choices, and the desired “quality” of births. These issues were brought to public attention to stimulate individual interest, irrespective of their educational level, social status or profession. The organisation of lectures and conferences primarily aimed at public awareness but also at academic dialogue. As was mentioned, the HES organised pioneering conferences, such as the one on overpopulation in 1959, those on family matters during the 1970s, and many more. Not only did they attract public interest, but also academic and political attention. This became obvious from the new family laws, passed by the Greek Parliament in the early 1980s which were firstly discussed in these public deliberations initiated by eminent scholars, physicians and lawyers who were members of the HES. The HES, therefore, accomplished its target set out in the preliminary meetings before its official foundation and the statutes: to study issues of eugenics, family and demography, in order to educate and influence the Greek political authorities in shaping the legislation accordingly.

The hitherto untold history of the HES was used as a prism through which this dissertation presented the development of modern Greek attitudes towards the family and ultimately the reproductive choices, closely related to eugenics and family planning. Although the HES was established and led by physicians, mostly gynaecologists, its conferences and public discussions was also populated by sociologists, social workers, economists, statisticians, demographers, lawyers and politicians. They targeted public awareness of eugenics and its dissemination to educated and non-educated people alike. Eugenics was a matter that appealed to a natural process of mankind:
procreation. Therefore, the HES aimed to play a significant role in shaping the entire Greek society, not only a group of enthusiastic academics. However, educated individuals undertook the responsibility to achieve this target. Given that the HES was the first coordinated action towards eugenics propaganda, support from abroad was deemed necessary.

Foreign influence was so important that it occupied a large part of this dissertation. It was deemed important to explore the relationship between Greek eugenicists and international organisations associated with eugenics and birth control and has identified very close relationships among the Greek, British and American eugenics societies in parallel with the IPPF and C. J. Gamble, internationally recognised for the promotion of the birth control movement, the foundation of birth control clinics, and the distribution of contraceptives worldwide. The findings of this research study changed the existing knowledge of Greek eugenics both in the Greek and the international context. Although is widely known that the Greek protagonists in eugenics studied and worked abroad during the interwar period, the connections with foreign colleagues and institutions during the post-war period is often neglected. Most importantly, Greek eugenicists were in contact and collaborated with international institutions to promote eugenics and family planning in Greece. As was discussed, the contact was not only on a personal, but also on a collective level, such as the co-operation among the IPPF, the HES and maternity hospitals in Greece. This study revealed for the first time the existence of a previously unknown network of post-war eugenicists, which included people and institutions from Greece, Britain and the USA.
The established international networks were based on personal correspondence, the sharing of entrusted information and guest visits from both sides, proving that these relationships, to some considerable extent, became more than solely professional. In this case, not only were the external connections important, but also essential to the family planning work in Greece. Foreign contacts were critical and sometimes interfered in domestic matters. The contribution of Gamble, for instance, was more than advisory; his supply of contraceptives transcended Greek law and, with the aid of Greek physicians, filled up clinics both in the public and private sector.

In terms of contraceptive techniques, Gamble provided contraceptives, such as caps, rubbers and spermicidal gels, which were more or less unknown to Greek gynaecologists and, of course, users. Before Gamble’s supplies, the majority of gynaecologists prompted women to control their reproduction by abstinence, withdrawal and the sponge and salt method. These practices were neither simple nor effective, resulting in many unwanted pregnancies and induced abortions. In the same context, Gamble’s contribution was crucial because he also provided training and published material on contraceptive techniques to Greek gynaecologists, so as to familiarise them with the new methods.

As a result, Gamble’s contribution was twofold: on the one hand, he materialised women’s and eugenicists’ desire for contraceptive use, and on the other hand, he set the basis for further preoccupation with reproductive matters. The HES took reproduction control in Greece one step forward by publicising it during organised open conferences; promoting publications in
daily press and journals; and incorporating it in academic lectures and discussions. Drawing a timeline of significant events from the 1950s to the 1980s, this dissertation illustrated a course beginning with the rise of eugenics in the 1950s, through the dissemination of contraceptives and the first attempts for family planning advice in the 1960s, included the intensive discussions regarding change to the legal framework of family law in light of gender equality and free control of reproduction in the 1970s, to the implementation of the new laws regarding family; reproduction and conjugal relationships in the 1980s.

***

As demonstrated in this dissertation, the post-war eugenics movement in Greece was stimulated by Whelpton’s visit in 1952. Whelpton was an eminent demographer, who, at the time of the visit, was Director of the Population Division at the UN Secretariat. Thus, it is not surprising that his lecture on population impressed the Greek audience. Moreover, the lecture was timely because a “eugenics mentality” had already been developed after the wars. As a part of, or as an outcome of, the efforts of Greek physicians to bring hygiene and preventive medicine to public attention, eugenics soon gained ground in their minds. Consecutive wars, health deterioration, deaths and inadequate nutrition resulted in social, financial, demographic and reproductive problems. According to their way of thinking, eugenics was a way to tackle these problems at their core; to heal the wounds of the nation by improving both the current and next generation.
The western version of eugenics developed in countries such as Britain and USA had to be adapted to the Greek context. Local particularities included the power of the state authorities and the church. It was unanimously argued and often repeated that the new eugenics society should be on good terms with the state and the church. Furthermore, in the fear of a possible repetition of the negative outcomes of Nazi eugenics, extreme eugenics practices, such as forced sterilisation and euthanasia, were immediately rejected. The HES primarily aimed at helping the Greeks to improve their living conditions, to become physically robust, to learn how to raise their children and protect them in terms of hygiene and nutrition, and to elevate the level of education. While there was no specific target group, because their plans eventually included the entire population, priority was given to mothers and children. Eugenics is intrinsically a matter of reproduction; therefore, issues of sterility, contraception, premarital health certificate, heredity, hygiene during pregnancy and child rearing came first.

After all, the HES mainly consisted of gynaecologists and paediatricians. Already in July 1953, they made a chart of the statutes of the first eugenics society in Greece. However, it was officially registered on 19 April 1954. Until then, the HES was very reluctant to publish its activities or reach out to the public; it existed as a restricted group of scholars and scientists interested in eugenics. State approval was the foremost prerequisite for the successful establishment of the eugenics society in the country. Legal conformation was indispensable to social recognition. The founding members agreed to strictly follow the legal process and secure the state’s approval before attempting to become publicly known. Furthermore,
due to the reputation of the members, reaching the public would be an easy task after the approval. Thus, the official approval of the statutes was the starting point for the HES’ activity.

Before that Kanavarioti, the HES’ first secretary, and the rest of the members were more interested in getting guidance from similar institutions abroad, such as the British Eugenics Society and the IPPF. While one can claim that giving priority to reaching foreign individuals and institutions and then local ones is a paradoxical way of action, this was in fact the most reasonable choice for the HES. Given that eugenics societies in the western countries already had a long-time history was advantageous for the HES, because they could offer their expertise and experience to the new eugenics society in Greece. Kanavarioti’s training and conference attendance abroad were the most valuable contributions to the establishment of the HES.

One could claim that the HES made a step forward when Nikolaos Louros became President on 6 August 1954 and the HES was housed at the Alexandra Maternity Hospital in Athens. The HES became thus completely distinct from the Athens Medical Association and a new period in its history began. After its internal re-organisation, the HES expanded its activities and became popular both in Greece and abroad. Kanavarioti and Louros, key persons of the eugenics movement, developed foreign contacts and local ones correspondingly. Kanavarioti was more familiar with people abroad, but Louros had important contacts in Greece. Already in his fifties, Louros had connections in academia, science and politics, which he used for the benefit of the HES.
Without doubt, the HES gained wider public acceptance and respect after Louros’ first public lecture “Eugenics: An Appeal”. Its content, based on the British eugenics background, included matters of marriage and reproduction; family planning; transmission of congenital diseases and, of course, demography. Greeks and foreigners responded very positively to the lecture which was highly praised. Not only was the audience of 800 people supportive to this initiative, but it also impressed foreign eugenic societies. The content of the lecture defined the HES’ viewpoint on eugenics, thereby giving its advocates the necessary focus to achieve their goals.

This is how the HES liaised with similar Greek institutions such as the National Union of Sanitary Education (NUSE) and the PIKPA. Given that these institutions shared members and ideas, they successfully collaborated during the next years, particularly by organising joint lectures. The NUSE was founded in the National School of Hygiene in Athens. It was housed at the same block of buildings and the NUSE’s president, George Pangalos, was a Professor at the School. The NUSE was predominantly preoccupied with everyday issues of hygiene reaching the wide and non-educated public via radio broadcasts. However, Pangalos’ point of view was so provocative, supporting extreme eugenics practices and state intervention, such as the sterilisation of certain groups of people; similar views apparently did not fit with the School’s or the HES’s approach both of which preferred keeping a low profile and opposing negative eugenics.

Unlike the NUSE and the HES, the PIKPA’s activities were not theoretical but practical. It was established in the beginning of the century, based on the fundamental principles of solidarity and volunteerism. Its work
for the protection of mothers and children was the most fruitful in the country. Vaccination, communal meals, free medical examination and shelter for single mothers and their children were some of its activities. What is remarkable is that its Medical Director, Konstaninos Saroglou, was a member of the NUSE and a member of the Executive Board of the HES for many years.

Despite beginning with favourable prerequisites, the HES faced difficulties at the end of the 1950s. There was a period of decline, between 1957 and 1959, when interest in eugenics faded and the HES lost ground. Thanks to Louros, who remained focused on the dissemination of eugenics; the HES revived; expanded its network and gained significant public attention. A tool for the HES’s “regeneration” was its newsletter which was edited by Louros and distributed among the regular members to stimulate their interest in eugenics. The newsletter included news of the HES, similar institutions in Greece and abroad, success stories of its members and international news on population and eugenics. Disseminating information for international developments in the field sensitised local responsiveness.

The HES was not alone in promoting these views on family and reproduction; foreign support included guidance, moral encouragement and material help; justified with frequent correspondence and visits. Following the analysis of the correspondence between the HES and foreign individuals and institutions, a new understanding of the relationship between professionals, society and the state in Greece during the 1950s emerges. It was clear that the establishment of the HES was inextricably linked with the activities of the IPPF and the BES. Bearing in mind that the first steps
towards the establishment of the HES dated back to 1953, it is not surprising that the Greek protagonist in the eugenics movement in Greece, Maro Kanavarioti, became a fellow of the Eugenics Society in London as early as 1954. Adamopoulos and Valaoras also gained fellowships in 1957 and 1959 respectively. However, fellowship was mainly an honorary acknowledgement, because the fundamental contribution of external agents was only materialised by close contact and wide support.

Above all, regular correspondence was by itself a great moral encouragement to those attempting to organise a novel association to deal with eugenics, population problems and family planning. Experts from the IPPF were the mentors of this initial effort, particularly during the years 1953 to 1956. The fact that the HES was regarded as the representative of the IPPF in the country was also an act of encouragement to continue its work and activities. Furthermore, the HES’s activities were widely publicised in journals such as the *Eugenics Review* and the *Around the World News on Population and Birth Control*. In addition, Houghton’s letters often included educational material for the benefit of the HES. Along with her letters, she sent to Kanavarioti articles, books, book reviews and journals about eugenics and family planning. Therefore, the HES continued to be well-informed about the progress of the birth control movement worldwide.

Most importantly, the financial contribution of Joseph van Vleck and Dorothy Brush was a significant aspect of international collaboration. Funding is particularly mentioned because it was, in fact, the materialisation of external agents’ confidence in the success of the newly-founded eugenics
society in Greece.

As extracted from the correspondence, Joseph van Vleck was Vasilios Valaoras’ friend and colleague; thus probably it was Valaoras who introduced him to the eugenicist circles in Greece. Van Vleck initially participated in the activities of the HES as external funding agent and then, according to Louros, promised to fund 49% of the HES’ budget. Although there is no evidence that this indeed happened, there is no indication that it did not. Based on the assumption that he kept his promise, this offer was definitely a substantial aid to the HES. Van Vleck also contributed in other ways; he was present in Greece giving lectures on eugenics and family planning during the 1950s-1960s and communicated with both the Greek eugenicists and individuals outside of the country. Furthermore, it was revealed that important correspondence between Gamble and people from the HES was communicated with van Vleck too. His interest in Greece was keen and his assistance in the dissemination of eugenics and family planning considerable.

As far as Brush is concerned, she also stood by the HES in terms of moral encouragement, publication of their activities, physical presence in Greece and financial support. She also promised to send films for educational purposes, but this study could not confirm this. On a personal level, the daughters of Brush and Kanavarioti were friends, both living in the USA. Moreover, as extracted by her correspondence with Kanavarioti, her daughter was married to a Greek man, which was partly an excuse to often visit Greece. However, her relationship with the country was not just touristic. Apart from Kanavarioti, she met other members of the HES and
made efforts to multiply the readership of the journal *Around the World News of Population and Birth Control*, which she edited. According to Louros, Brush donated money to the HES to expand its activities. Although she was wealthy, it seems that the donation was an outcome of her acquaintance with the HES and particularly Kanavarioti.

Undisputedly, Kanavarioti was the link between Greece and abroad. The success of including the Greek eugenics movement in an international network was predominantly hers. Her determination, along with her excellent command of English and the desire to establish eugenics and birth control in Greece and abroad, was decisive in achieving her goal. Mantellos, the first President of the HES, Louros, the second, Houghton, Blacker, van Vleck, Valaoras, Gamble, and many more people praised Kanavarioti’s work and thought of her as the leader of the post-war eugenics movement in Greece. Therefore, they trusted her and she eventually became a member of the Governing Body of the IPPF in 1954.

Kanavarioti’s trips abroad provided the most significant training, especially her visits to Britain. There, she had the chance to visit experts and institutions; she received training in some of them and had the opportunity to discuss issues of eugenics with many important people. The itinerary of her visit was entirely organised by Houghton, who arranged her meetings, travel information for Oxford and London and accommodation. Available correspondence reveal that Kanavarioti was welcomed and treated with kindness by all her hosts, who were also willing to guide her around clinics and other family planning institutions.

As the representative of the HES, Kanavarioti cultivated public
relationships not only by correspondence and meeting people abroad, but also by attending meetings and conferences. As indicated, she was present in Stockholm in 1953, in England and in Rome in 1954. In Stockholm, she met in person, for the first time, people like Sanger, van Vleck, Vogt, Rama Rau and others. While in England, she personally met important people, such as Blacker, and in Rome attended the World Population Conference; the meetings of the IPPF which took place after the conference and was honoured with the membership of the official Governing Body of the IPPF. A formal invitation for the IPPF’s official conference in October 1955 in Tokyo was received, but this was too far for Kanavarioti to attend. However, the fact that the HES was considered at all was significant.

Another point of reference was the IPPF’s delegation to Athens, or other planned visits to Athens that were ultimately without success. Whelpton was the first visitor and whose contribution was the most important of all, as his work was appealing to Greek eugenicists. As already mentioned, Dorothy Brush and Vera Houghton also visited Athens to meet with Kanavarioti, particularly. Kanavarioti hosted Houghton for ten days after the conference and meetings in Rome. Due to unfortunate timing, Dr. Stones’ visit had to be cancelled. Furthermore, Houghton had proposed to send a delegate of Kanavarioti’s choice to meet with her before or after the conference in Tokyo but unfortunately Kanavarioti’s reply has not been found.

External help was invaluable to the young HES, without which it would be very difficult to have achieved such progress. The list of international contributions to the activities of the HES could not be
completed without a mention of Dr. Gamble’s offer for contraceptives. His material help was accepted with gratitude by the Alexandra Maternity Hospital and Louros was personally responsible for this transaction in 1955. As revealed by the correspondence, birth control techniques were practiced by some Greek gynaecologists the following years. The cases of Tsacona and Andritsakis confirm foreign involvement in private medical practice outside of the HES too.

Without Gamble’s contribution, the history of family planning in Greece would have been totally different. It was with his personal efforts that the distribution of contraceptives in Greece began in the mid-1950s. During this period and until the early 1980s the sale and distribution of female contraceptives was illegal, with the exception of medical contraindication. Gamble and his associates worked hard to overcome the legal obstacles, in order to achieve their ultimate target to supply gynaecologists with contraceptives. The common practice was to disguise the boxes containing contraceptives by labelling them with complex medical terminology. Greek customs and relevant laws were very strict which made importation a difficult task. Therefore, the effort to ship contraceptives did not last long, because Louros and then the majority of the Greek gynaecologists finally compromised with the current legal framework.

Another relevant finding was that Gamble’s correspondence and his delegates’ reports on Greece portrayed Louros’ paradoxical thinking about family planning. Louros was one of the first who publicly discussed the necessity of family planning and eugenics; he also contacted foreign organisations and population experts, including Gamble, in order to gain
assistance for disseminating family planning techniques in Greece and receive contraceptives. He tried to convince both the National Hygiene Council and the Ministry of Health to change the law that forbade the use of contraceptives; and eventually he was given permission to provide family planning guidance in his clinic at Alexandra Maternity Hospital. At the same time though, Louros tried to limit the HES’ activities to public education on hygiene and eugenics without direct reference to birth control refusing to participate in any similar activity and ultimately he questioned the practicality of some female contraceptives. He ended up agreeing with the political authorities’ argument that Greece needed population proliferation in order to secure its borders and condemned any opposing effort.

This unstable relationship with the HES and Kanavarioti’s resignation that followed (1959) led Gamble and his team to seek other institutions in Greece, such as the PIKPA and women’s clubs and gynaecologists in the private practice. By the mid-1960s the relationship between Gamble and the HES seems to have ceased to exist. The HES, however, in the following decades of its existence continued to discuss issues of demography, family planning and reproduction choices, but only theoretically. Before the implementation of the laws permitting family planning advice and the use of contraceptives, gynaecologists promoting birth control were, in fact, acting illegally, as were those who performed abortions for reasons other than the risk of mother’s health. In the light of this situation, gynaecologists preferred to remain at the theoretical level rather than to risk their professional careers.
In this context, Greek academics and professionals from many different disciplines were invited by the HES to participate in its conferences and present their opinion in issues of population; demography and environment. Furthermore, politicians also participated in these conferences, illustrating their wide public acceptance. The first important conference was on overpopulation, held in 1959. This was a topic which concerned population experts worldwide since the beginning of the century and was inextricably linked with eugenics, biopolitics, geopolitics, emigration, unemployment and population control. The common ground among the participants was that birth control was necessary, but only in some overpopulated parts of the world and definitely not in Greece.

The demographic decline, which occurred during this period, gradually continued downwards and alarmed population experts. Therefore, future conferences were dedicated to population problems, such as fertility and sterility, population ageing and the harmful influence of environmental factors on the health of the population. The various repercussions of the high rates of induced abortions and the lack of sex education was also discussed in many different occasions during these conferences. Population problems were always at the core of the HES’ plan, thus their discussion and analysis were not eliminated during the following years. They were extensively discussed in another important conference, the “Reproduction Problems of the Greek Population” held in 1975, which was organised in the aftermath of the World Population Conference in Bucharest in 1974.

Moreover, the HES organised a conference for the less-discussed issue of population ageing. Greece was one of the countries where the
average life span was high, but the birth rate very low. This inconsistency resulted in the false image of the Greek population which seemed to increase in numbers, but realistically the number of seniors was stable, while the number of newborns declined. Of course, the problem was not only arithmetical, but also social. The modern lifestyle indirectly dictated the isolation of the elderly, who were no longer included in the narrow circle of the new family structure comprising of the parents and the children. In combination with the poor health infrastructure, the tackling of the issue of population ageing became imperative.

Furthermore, in the mid and late 1970s the most important matter for concern of the HES was the institution of family; together with hereditary problems, such as the prevention of hereditary diseases, spouse and reproductive choices, hygiene during pregnancy and raising of children, nurture and culture, premarital health certificate and sex education. The selected time period of the organisation of the conferences fitted neatly into the socio-political circumstances and the process to change the family law. It could be argued that the 1970s was a turbulent period when bio-medical studies flourished and simultaneously groundbreaking societal changes were manifesting around the world. Consequently, the family, being the nucleus of society, was highly influenced by them.

At the bio-medical level, there were new methods of reproduction, such as in vitro fertilisation and new diagnostic tools, such as prenatal genetic tests, which altered the perception of the institution of family and procreation as a whole. In addition, Greek society experienced radical social changes, such as the aforementioned emancipation of women and the
change of family models. Urbanisation and environmental changes also played a part in the overall situation.

A large part of the Greek society eventually embraced utilitarianism putting emphasis on the result of their choice rather than intention. Although not always producing accurate results, the ability to predict a disease or malformation through a genetic test was seen as a panacea for all concerns and was widely used by individuals. A positivist ethic dictating the greatest good for the greatest number of people also gained ground on a collective level. This attitude had repercussions on the medical profession in general and the genetic counselling in particular. The wide use of genetic tests provided physicians and the public with the ability to diagnose and avoid a disease, such as Mediterranean Anaemia, by non-conception or abortion; yet raised ethical concerns and prompted psychological implications. It was a puzzling period for both the physicians-advisors and the parents-patients; the former had to be as neutral as possible and the latter trusted physicians’ authority and expertise and demanded proper and accurate guidance. However, things were not as clear as the average patient would have imagined and genetic counselling rules were set out much later to harmonise the relationship between the two sides.

***

Without access to the archives used in this dissertation it is hard to imagine that a group of Greek physicians had developed so close contact with the IPPF, the American and British eugenics societies and participated in their activities. It was also beyond imagination that so many and eminent birth control experts offered their diverse support to a eugenics society in
Greece, even before its establishment in its country of origin. Who would know that the secretary of the HES, Kanavarioti, would become a member of the governing body of the IPPF?

Kanavarioti, alone, is a separate “chapter” in the history of eugenics in Greece in general and the HES in particular. This is the first time that information about her work on the dissemination of eugenics has been brought to light. The only published information about her is her name listed in the Fellows of the British Eugenics Society and reference in the journal *The Eugenics Review* that she was secretary of the HES. As revealed by this research, her contribution and work for the Greek eugenics movement was crucial. Apart from the fact that she contacted Whelpton and instigated the founding of the eugenics society, she was active abroad too. Kanavarioti received appreciation, respect and trust from both the Greeks and foreign colleagues. Gamble and Gates mentioned her activity years after her resignation from the secretarial work in the HES. It still seems unreasonable that she is not included elsewhere in Greek or foreign scholarship. Admittedly, this study did not provide complete information and details about her personal and academic background. This dissertation might offer considerable information about her, but more details are yet to be discovered.

Given that the scholarship which deals with the history of family planning in Greece begins in the late 1970s and female contraception was illegal until then, it is not at all surprising that Gamble’s contribution is not included and here is discussed for the first time. Gamble and the Greek eugenicists collaborated quietly because of the contraceptive’s illegality and
the Greek women’s ignorance for the use of contraceptives. Although Louros Archive included information about Gamble, what was missing was Gamble’s and his team’s contact and collaboration with gynaecologists and institutions outside the HES. Furthermore, the reports on Greece, written by Gamble and his delegates in Greece, were extremely useful because they depicted the situation in Greece abroad, without any prejudice or constraint. This is the reason why the combination of Louros and Gamble’s archives, which provides a comparative perspective of the eugenics and birth control history in Greece, is more significant than the study of each one independently.

With respect to Greek history, it is hoped that this dissertation will fill the gap in the history of eugenics and family planning during the post-war period. In particular, the history of the Hellenic Eugenics Society, since its theoretical conception; through its establishment nationally and internationally; and up to its latest organised conferences; which is the core of this research study, will be the most valuable contribution to current scholarship. This dissertation also offers the insight of the most renowned Greek physicians, statisticians and demographers to global issues, such as environmental disasters, population ageing and overpopulation.

In the European and international context, although the history of British and American eugenics and the history of International Planned Parenthood Federation have been extensively researched, this research study added useful information to the established network of these associations with the Hellenic Eugenics Society. The multifaceted support of those who were involved in eugenics and birth control during and after the 1950s in the
newly founded HES reflects their desire to expand their network as widely as possible. As was discussed in this study, the IPPF’s tactful approach of Greek eugenicists and the persistence of its members to guide the development of eugenics and birth control in Greece aimed at promoting their programme in a country in which modern contraception was not officially endorsed. Due to the pro-natalist policies of the Greek governments, female contraceptives, as well as information about them, were non-existent. Greek women were completely unaware of their use and there were no family planning clinics.

As was often mentioned throughout this study, many European and international health organisations, such as the League of Nations Health Organisation, acted in Greece since the beginning of the twentieth century. Given the difficult position that Greece was found after 1949 and its struggle to survive amidst a civil war, external support was deemed absolutely necessary. In this context, Greek eugenicists sought support abroad, which was eventually received from the IPPF, the American and British Eugenics Societies, and from various individuals attached to these institutions. Although scholars have examined the activity of international organisations in Greece during the first half of the twentieth century, the same cannot be said about the post-war period. This study is the first examination of the involvement of international health organisations in Greece and their impact on Greek eugenics and family planning.

Furthermore, this study is important not only because it enriches the historiography with a discussion of the co-operation between Greek and foreign eugenicists, but also because it confirms that eugenic societies and
relevant institutions in Europe and the USA continued to develop their activities after the Second World War. Therefore, the main historiography claim of this study challenges the widely supported view that eugenics was brought to an end in 1945. Based on the information and analysis provided here, eugenics continued after this moment through ideas and practices of population management. It was proved that the foundation of a eugenics society in Greece after the Second World War was not an “accident”, but the result of a joint collaboration between local and foreign eugenicists. In fact, the role of external collaborations, and of members of powerful, international organisations, was the most crucial in establishing the HES.

The view that institutions such as the UN Population Division and the IPPF were not interested in eugenics is incorrect. Established professionals and members of these institutions, such as Pascal Whelpton, Abraham Stone, William Vogt and Joseph van Vleck, were directly involved in the development of the Greek eugenics movement in the 1950s. It is very significant that these health organisations, in co-operation with Greek eugenicists, also impacted Greek health institutions, both state and private.

Clarence J. Gamble’s involvement in Greek eugenics and birth control movement was decisive and also mirrors the international interest in these topics. Before contacting Greek eugenicists, Gamble had already established a network of people and institutions, such as the Pathfinder Fund acting as the main funding body of the birth control movement. His desire to help poor Greek families with uncontrollable reproduction was expressed both theoretically and materially, through the supply of contraceptives to the HES and other Greek gynaecologists, in a period when the sale of
contraceptives was illegal in Greece. While Gamble’s involvement in the birth control movement is known in other countries, it is the first time that his interest in Greece is discussed. It is surprising that such an important fact, as the supply of contraceptives in maternity hospitals, gynaecologists’ private practice and individuals in Greece, was until now neglected.

Finally, and in contrast to the existing neglect of post-war eugenics, this study, which revealed an international network of eugenicists active from the 1950s to the 1980s, challenges the contention made in international historiography that eugenics disappeared after the Second World War, allowing for further research on the less discussed post-war period.

Further Research

The fact that the dissertation illustrates both the Greek and international perspectives on the history of post-war eugenics and birth control, written in English makes it easily accessible and beneficial for international consideration; comparative studies and a valuable tool for further research.

This study could be used as a stepping stone for someone to conduct research in post-war eugenics in Greece in topics less discussed in this dissertation. The history and activity of the National Union of Sanitary Education, for instance, which emerged at the premises of the National School of Hygiene in Athens; included renowned academics, scientists and social workers. Similarly with the HES, the NUSE was associated with an international organisation, the Union International d’ Education Sanitaire. A researcher in the history of medicine; hygiene or eugenics, might benefit
from the concise history of the NUSE presented in this dissertation and expand on this research in relation with the Union International d’ Education Sanitaire and in comparison with the rest countries of their network. Given that comparative research studies are often preferred to restricted ones, such a task would become both valuable and an original research study.

Further study could include a comparison between Gamble’s personal involvement in Greece and his most known activities in countries, such as India and Pakistan. While the population sizes are significantly different, Gamble’s mentality and effort to disseminate contraceptives is practically identical in every country he was interested in.

As already mentioned, although this dissertation refers many times, to the work of Maro Kanavarioti, personal information is incomplete. However, what is most important is her work as Secretary of the HES. In fact, the descriptions as “Secretary” or “Housewife”, which is written in the statutes of the HES, are more than understated titles for Kanavarioti. She was the one who perceived the idea for the formation of a eugenics society in Greece; gathered the founding members; organised the international correspondence; travelled and trained abroad to help the HES to become an international, yet independent entity. One could compare her work with Sybil Gotto’s work in the organisation of the Eugenics Education Society in Britain and not only with a secretary of an association. Similarly, Vera Houghton, Secretary of the IPPF’s London office, was a significant agent for the international activity of the IPPF. While many studies focus their interest on the most famous protagonists of eugenics associations, little research has been done for the less obvious, but significant, contribution of
the rest of the staff. The unknown example of Kanavarioti could inspire someone to conduct research on the missing part of scholarship on the hidden activity of secretaries and organisers in these associations.

In the local Greek context, what is also unknown is the unexplored Lina Tsaldaris Archive, which is vast and provides crucial information about the protection of mothers and children, the activities of Greek women’s groups, the relationship between Greece and international organisations, such as UNESCO, UNICEF, WHO, and on Greek political manoeuvring around child protection, because she was the first female Minister of Social Care and certainly one of the most active ones. As already mentioned, this dissertation is the only source for Tsaldaris’ activity in relation to eugenics and family planning; a more targeted study might be beneficial to the existing scholarship.

Illustrating the importance of Louros Archive, this dissertation will hopefully stimulate the interest in the rest of the archive which is still under preservation and examination. An excellent idea would be to digitise the entire archive, not only on the part of his archive which demonstrates Louros’ preoccupation with eugenics. Firstly, it might reveal more information about eugenics and family planning in the context of the rest of his activities and secondly it would be accessible to the wider public because a large part of it is in English. Hopefully, the N. Louros Foundation will continue its valuable work towards the digitisation of the archival material. Furthermore, this dissertation could be the stimulus to translate into English all the material in Greek, for reasons of accessibility and understanding of the wider public.
Last but not least, this dissertation revealed the fact that the demographic problems of post-war Greece have lingered on to the present day. It is hoped that its finding will inform decision making in Greece and alert state officials about the persistence, for almost 70 consecutive years, of certain demographic problems such as low birth rate, high rates of induced abortions, limited use of contraceptives, lack of sex education and, finally, the mass emigration of educated adults.
Appendix I

Biographical notes

Danczis, Ioannis (1926-2012) studied in Athens and then in the USA. He became Professor of Gynaecology at the University of Athens and Director of the Second Gynaecological Clinic in Evangelismos General Hospital. In 1962, he founded the Centre for the Study of Physiology of Reproduction (Κέντρο Έρευνας της Φυσιολογίας της Αναπαραγωγής). From 1966 to 1968 he was Director of the first Premarital Advisory Centre at Alexandra Maternity Hospital. From 1964 to 1976 he was Director of the Department of Sterility and Fertility at the First Gynaecological Clinic of the University of Athens. He was the Director of the Department of Infertility for twelve years (1964-1976).

Dontas, Anantasios (1921-) studied medicine at the University of Athens. After receiving his PhD, he was a Fulbright Scholar at the University of Michigan for three years followed by a fellowship at the Laboratory of Physiological Hygiene at the University of Minnesota. Dontas is a pioneer of cardiovascular epidemiology, initiating field studies in 1957 in Crete. He has made particular contributions to the study of renal and pulmonary function and aging and is an international leader in gerontology.

1 Hellenic Society of Eugenics and Human Genetics, Sex Education, p. 126 and Stavropoulos, Bilan Analytique et Clinique du Centre Experimental de Consultations Premaritales et Conjugales de la Société Hellenique d’Eugenisme a Athènes, p. 15.
Doxiadis, Spyros (1917-1991), was a paediatrician and a professor of Paediatrics. He studied medicine in Athens and worked in England, initially with James Spence in Newcastle upon Tyne and then with Ronald Illingworth in the Department of Child Health in Sheffield. When he returned in Greece, he built Greece’s first Department of Newborn and Premature babies at Alexandra Maternity Hospital. He was also Director of the Paediatric Unit of Aghia Sophia Children’s Hospital. In 1965 he founded, and was the first president of, the Institute of Child Health, which continues his work and has his name until the present day. In 1977, he became Minister for Health and Social Services, a position he held in two consecutive governments. In 1981, he founded the Foundation for Research of Childhood. He focused mostly on child health and the prevention of diseases, as well as medical education and ethics.

Gamble, Clarence James (1894-1966) studied medicine at Princeton and Harvard universities. He was one of the strongest birth control advocates and funded the foundation of birth control clinics around the world. He established the Pathfinder Fund, the Human Betterment Foundation and the New York Maternal Health Clinic. He served on Board of Directors and Executive Committee of Birth Control Federation of America and was associated with the IPPF. He also committed himself to field work and the dissemination of contraceptives in many countries worldwide.

---

5 Harvard University Library, [http://oasis.lib.harvard.edu/oasis/deliver/~med00082 accessed 18 February 2014].
Higgins, Margaret Louise (1879-1966), known as Margaret Sanger, was born in Corning, New York. She studied nursing at White Plains Hospital, but later she was mostly interested in sex education and women’s health. She became a radical feminist and joined anarchist circles. In 1916, she founded the first birth control clinic in Brownsville, which at that time was considered illegal. As a result, she was imprisoned for 30 days. Some years afterwards, in 1923, she took advantage of a law which allowed physicians to found birth control clinics and opened one under the name “Birth Control Clinical Research Bureau”. In 1929, she founded the “National Committee on Federal Legislation for Birth Control”, which favoured the dissemination and use of contraceptives. In 1939 she reshaped and renamed the “Birth Control Clinical Research Bureau” as “Birth Control Federation of America” and later, in 1942, as “Planned Parenthood Federation of America”. During these years she promoted birth control education, having the “Birth Control International Information Centre” as a cornerstone. In 1952 she succeeded in founding the IPPF “the largest private international organisation devoted to the promotion of family planning”.

Kanavarioti, Maro was a physician and member of Athens Medical Association. She was the first secretary of the Hellenic Eugenics Society, holding this post from its establishment in 1953 until 1959. Kanavarioti became a Fellow of the British Eugenics Society in 1954 and member of the Governing Body of the International Planned Parenthood Federation in the same year. In 1966 she participated in the organisation and function of the

6 The Margaret Sanger Papers Project, New York University [www.nyu.edu/projects/sanger/aboutms/about.html accessed July 2012].
first Premarital Advisory Centre at Alexandra Maternity Hospital in Athens.\textsuperscript{7}

It is very probable that in the 1970s she emigrated to the USA.

**Kaskarelis, Dionysios (1915-)\textsuperscript{8}** studied medicine at the University of Athens. He began his specialisation in Obstetrics and Gynaecology directly in 1940, working in the Aretaieion General Hospital, then in the public Marika Iliadi Maternity Hospital and then in Alexandra Maternity Hospital. In 1944 he finished his specialisation and in 1947 received his PhD. In 1952 he was assigned by Nikolaos Louros to the organisation of the Department of Sterility in the Alexandra Maternity Hospital, which was the first of its kind in Greece. In 1974 he became Professor of the First Obstetrics and Gynaecology University Clinic in the Alexandra Maternity Hospital. During his postgraduate studies in Paris he received the title “Assistant Étranger” in 1951. In 1979 he was named “Honorary Visiting Professor” of the School of Medicine in Emory University, USA. During his long career, he wrote about 190 works in Greek and about 200 in other languages. The most famous of his monographs is: *Sterility: Diagnosis and Therapy.*\textsuperscript{9}

**Louros, Nikolaos** (1898-1986) was a renowned Professor of Obstetrics and Gynaecology at the University of Athens. He studied medicine and worked in hospitals in Switzerland, Austria and Germany, with famous physicians and surgeons. In Greece, he contributed to the establishment and function of the Aghios Savvas Anti-Cancer Hospital in Athens; he was Director at the

\textsuperscript{7} Stavropoulos, *Bilan Analytique et Clinique du Centre Experimental de Consultations Premaritales et Conjugales de la Société Hellenique d’Eugenisme a Athènes*, p. 15.


\textsuperscript{9} Dionysios Kaskarelis, *Sterility: Diagnosis and Therapy* (Athens, n. p., 1966) [in Greek].
Marika Iliadi Maternity Hospital and later scientific director at the Alexandra Maternity Hospital. Moreover, Louros—like his father Konstantinos Louros—was the personal physician of the Greek Royal Family. His medical achievements include the invention of a method of painless labour.\textsuperscript{10} Following the example of Otto von Bismarck and William Beveridge, Louros published his own suggestion for a healthcare system for Greece.\textsuperscript{11}

Panayiotou, Panayiotis (1909-1994) studied at the Medical School in the University of Athens. He became assistant doctor in the public hospital of Nea Ionia, in Athens and at the same time he worked as part time assistant in the private clinic “Louros”. From 1935 to 1942 he worked as internal assistant to Nikolaos Louros in Marika Iliadi Maternity Hospital. In 1940 he became lecturer of Obstetrics and Gynaecology at the University of Athens. Panayiotou was a health inspector for the protection of motherhood in the National Organisation of Christian Solidarity (Εθνικός Οργανισμός Χριστιανικής Αλληλεγγύης, Ε.Ο.Χ.Α.) from 1942 to 1944. He helped the foundation of thirteen Diagnostic Centres of Obstetrics and Gynaecology.\textsuperscript{12} He studied in the UK, Sweden and Ireland holding a scholarship from the British Council. During his stay abroad, he worked as internal doctor in the Obstetrics and Gynaecology Clinic of the University of Sheffield, in “Jessop Hospital for Women” where he focused in Chirurgical Gynaecology working next to John Chrisholm, John-Eric Stacey, Leslie Patrick and Glynn

\textsuperscript{10} Nikolaos Louros, “Accelerated Painless Labour”, \textit{The British Medical Journal}, 1, 4564 (June 1948), p. 1248.
\textsuperscript{11} Nikolaos Louros, \textit{The Health System of the Country: A Plan}, (Athens: K. Papadogiannis, 1945) [in Greek].
\textsuperscript{12} Nikolaos Louros, \textit{Yesterday}, p. 184.
Davies. In parallel he worked with Dr. Payne in the university’s laboratory and in the Centre of Experimental Cancerology of the same university. In London, he attended courses of eugenics with Sir Lionel Penrose, courses on genetics with Professor H. Calmus and courses of Biometrics with Professor J. B. S. Haldane in the laboratories and universities of London, where they were teaching. He became Professor at the University of Athens and Thessaloniki and Director of the Alexandra Maternity Hospital and Director of its School of Midwifery.

Pantazis, Georgios (1906-1973)\(^{13}\) was a Professor of Zoology and Biology, at the University of Athens and Vice-President of the Hellenic Eugenics Society. He studied Medicine in Mytiline and Leipzig. He obtained the diploma of Doctor of Zoology at the University of Munich. He continued his post-doctoral studies in Germany and Italy and in 1930 worked on the study of Mediterranean fauna at the zoological station in Naples, Italy. He worked at the School of Hygiene in Athens as a Professor of Medical Zoology, teaching Zoology and General Biology. He directed and organised the Museum of Zoology and laboratory. In 1955 he founded the Greek Biological Society and in 1967 the Institute for Oceanographical and Fishing Research.

Valaoras, Vasilios (1902-1996) was the founder of modern demography and biostatistics in Greece. He studied medicine at the University of Athens; at the School of Medicine and Institute de Technique Sanitaire et Hygiene

Sociale in Paris and the School of Hygiene and Tropical Medicine in London. He also obtained the Diploma of higher education in Hygiene at the School of Hygiene in Athens and the diploma of Doctor of Public Health in Biostatistics at the School of Hygiene and Public Health of Johns Hopkins University.\textsuperscript{14} Under the direction of M. Balfour, M. Barber and R. Shannon, he participated in anti-malaria actions in Greece. Then, he worked as a hygienist in the Ministry of Hygiene. At the same period, he was Professor at the School of Hygiene of Athens, where he taught Biostatistics and Epidemiology. Valaoras also worked at the Population Division of the UN in New York. In 1962, Valaoras, with the aid of the University of Athens; the United Nations (Population Division) and the Population Council of New York, established the Centre for Biometric and Demographic Research (Κέντρο Βιομετρικών και Δημογραφικών Ερευνών) in Athens. The WHO (World Health Organisation) funded the Centre for the research study of the Epidemiology of Breast Cancer.

\textbf{Vogt, William} (1902-1968) was National Director of the Planned Parenthood Federation of America from 1951 to 1962.\textsuperscript{15} William Vogt was also the author of the best-seller \textit{Road to Survival}.\textsuperscript{16} Vogt studied journalism and then became interested in ornithology. His latter interest led him to observe nature and research its functions in terms of conservation, population and environmental degradation. Vogt wrote about ecology of birds and human long before it was identified as a separate science. In 1960


he published the *People: Challenge to Survival*\textsuperscript{17} where he presented his position on the problem of overpopulation and birth control.\textsuperscript{18}

**Whelpton, Pascal Kidder** (1893-1964) was one of the most famous American demographers worldwide. In fact, he stimulated the progress of demography in the United States. During 1950-1953 he was Director of the Population Division in the United Nations Secretariat and then from 1954 to 1957 he was Vice-President of the International Union for the Scientific Study of Population. Whelpton was particularly interested in the study of fertility, thus he promoted the project “Growth of American Families” and the national fertility studies undertaken by the Scripps Foundation and the Survey Research Centre of the University of Michigan respectively.\textsuperscript{19}


Appendix II
Images

pages 326-341 have been removed from the electronic version due to potential confidentiality and copyright issues
Bibliography

Primary Sources

Archival Material


Konstantinos A. Doxiadis Archive, Benaki Museum, Athens.

Clarence Gamble Papers, Series: III. Countries Correspondence and Records, 1927-1965, box 77 (1207-1215) HMS c23. Harvard Medical Library, Francis A. Countway Library of Medicine, Boston, Massachusetts.

Dorothy Hamilton Brush Papers, Sophia Smith Collection, Smith College, Northampton, Massachusetts.

Lina Tsaldaris Archive, Konstantinos Karamanlis Foundation, Athens.
Nikolaos Louros Papers and Archive, N. Louros Foundation, Division of History of Medicine, Faculty of Medicine, University of Crete.


Printed material


“Announcement: Series of Lectures by the Crusade of the Scientific and Social Organizations for the Psychological, Mental and Physical Health of Greek People”, *Deltion Iatrikou Syllogou Athinon*, 10, 5 (May 1952), pp. 20-21 [in Greek].

Antonopoulos, Anastasios, *Sex Education of the Youth* (Patras: n. p., 1953) [in Greek].


-“Biography”, Harvard University Library: 
  [http://oasis.lib.harvard.edu/oasis/deliver/~med00082 accessed 18 February 2014].

Gardikas, Konstantinos D., “Medical Education in England”, *Deltion Iatrikou Syllogou Athinon*, 10, 10-12 (October-December 1952), p. 24-26 [in Greek].


Hellenic Eugenics Society, “Conference of the Hellenic Eugenics Society”,


- *Legal Problems from the Point of View of Medical Sciences* (Athens: n. p. 1978) [in Greek].

- “Parental Authority or Care”, *Nomiko Vima*, 28, 2-3 (1979), pp. 395-409 [in Greek].

- “Premarital Medical Examination”, *Materia Medica Greca*, 6, 4 (1978), pp.299-315 [in Greek].


347


Kaskarelis, Dionysios, *Sterility: Diagnosis and Therapy* (Athens, n. p., 1966) [in Greek].


Koronaios, Georgios, “Is there Enough Space for the Greeks in Greece? Greece is among the Countries with High Population Increase which is Decreased by Emigration”, *Acropolis* (25 April 1959), p.1 [in Greek].

“Does Overpopulation Threaten Greece? If the Civilized People Apply Birth Control, the Colored Will Cover the Earth”, Acropolis (29 April 1959), p.1 [in Greek].

“Not only is the Quantity, but also the Quality of the Race is a Depressing Problem of Greece”, Acropolis (30 April 1959), p.1 [in Greek].

“Does Overpopulation Threatens us? Birth control is not the Number One Problem of our Country, but Provision of Labour to Everybody”, Acropolis (2 May 1959), p.1 [in Greek].

“The Country’s Defense is not Threatened by Birth Control. The Military Means are more Important than the Number of the Soldiers”, Acropolis (3 May 1959), p.1 [in Greek].

“Today’s Wars do not Demand a Great Number of Soldiers—Abortion is Homicide”, Acropolis (6 May 1959), p.1 [in Greek].

“We are Responsible for our Offspring Professor Louros Highlights—Birth Control is a Matter for the Authorities of the Countries”, Acropolis (8 May 1959), p.1 [in Greek].

*Archives Balkaniques de Médicine, Chirurgie et leurs Spécialités*, 1, 1
(January-March 1939), pp. 15-21 [in French].

Lane, K., “Hellenic Eugenics Society”, *The Eugenics Review*, 46, 4 (January

Louros, N. and Kairis, N. M., “Some Aspects of Midwifery in Greece”, *The

Papadogiannis, 1945) [in Greek].

- “Accelerated Painless Labour”, *The British Medical Journal*, 1, 4564
(June 1948), p.1248.
[in Greek].
- “Fertility, Sterility and Overpopulation”, *International Journal of

M. E., “Blood Examination before Marriage Is Necessary”, *Ethnos* (15

Makridis, Nikolaos G., *For the Protection, Improvement and Ennobling of the Greek Race* (Athens: Anatoli, 1940) [in Greek].


Moisidis, Moisis, *Eugenics and Marriage* (Constantinople: n. p., 1922) [in Greek].
- *Woman: Hygiene of Marriage and Married Woman* (Alexandria: n.p., 1925) [in Greek].


- Law 4069: “For the Establishment in Athens of the School of Hygiene and the Physicians’ Postgraduate Studies on Hygiene Abroad”, A, 94 (5 March 1929).


Papaioannou, Antonios Ch., Student’s health card (Athens: n. p., 1939).


Roukas, Konstantinos, Sexual Intercourse and Induced Abortions Rates of Students in Athens (Athens: Laboratory of Hygiene and Epidemiology, University of Athens, 1979).

Savvas, Konstantinos, Handbook of Hygiene (Athens: n. p., 1928) [in Greek].
Spelioti-Bazina, Popi, “The Twentieth-Century’s Woman”, Halkyonides 1, 1 (May-June 1950), pp. 1-3 [in Greek].
- “Health as a Modern Issue”, Halkyonides 1, 2 (July-August 1950), pp. 5-7 [in Greek].
- “The Course of Sexual Instinct: Part 1”, Halkyonides 1, 4 (November-December 1950), pp. 3-6 [in Greek].
- “The Course of Sexual Instinct: Part 2”, Halkyonides 1, 5 (January-February 1951), pp. 3-7 [in Greek].
- “Sterility”, Halkyonides 2, 7 (May-June 1951), pp. 6-10 [in Greek].
- The Problems of a Working Woman, (Athens: n. p., 1952) [in Greek].

Stavropoulos, Alexandre M., Bilan Analytique et Clinique du Centre Experimental de Consultations Premaritales et Conjugales de la Société Hellenique d’ Eugenisme a Athènes (Louvain: Université Catholique de Louvain, 1970) [in French].


- “Our Hygienic Problem. Man and Production: the Fundamental Problem of Greece”, *Deltion Iatrikou Syllogou Athinon*, 11, 2 (February 1953), pp. 5-6 [in Greek].


**Secondary Sources**


Chatzinikolaou, Nicholaos, *Free from Genome. Orthodox Bioethical Approaches* (Athens: Stamoulis, 2002) [in Greek].


-“The School of Hygiene in Athens and its Development to National School of Public Health”, *Iatrika Themata*, 39 (2005), pp. 24-31 [in Greek].


Kotzamanis, Byron and Androulaki, Eleftheria, *Elements of Demography* (Volos: University of Thessaly, 2009) [in Greek].


Mantzarides, Georgios, *Christian Ethics* (Thessaloniki: Pournaras, 2009) [in Greek].


Pinard, Adolphe, De la Puériculture (Lyon: Imprimeries Reunies, 1908).


Pichot, André, La société pure, De Darwin à Hitler (Paris : Flammarion, 2000) [in French].


Turda, Marius, “To End the Degeneration of a Nation”: Debates on Eugenic Sterilisation in Inter-war Romania”, Medical History, 53, 1 (January 2009), pp. 77-104.
- Crafting Humans: From Genetics to Eugenics and Beyond (Goettingen: V&R Unipress, 2013).

Vantsos, Miltiadis, *Ethical Consideration of Abortion* (Thessaloniki: K. Sfakianakis, 2009) [in Greek].

Veremis, Thanos (ed.), *Metaxas and his Time* (Athens: Evrasia, 2009) [in Greek].


Wingfield, Nancy M. and Bucur, Maria, Gender and War in Twentieth-Century Eastern Europe (Bloomington and Indianapolis: Indiana University Press, 2006).


Websites

Academy of Athens,


Centre for Mediterranean Anaemia,


Centre for Newborns “The Mother”,

373
Constantinos A. Doxiadis,
[www.doxiadis.org accessed 12 September 2011].

Eugenics Society Members A-Z 2012,

Harry S. Truman Library and Museum,
[www.trumanlibrary.org accessed 13 November 2013].

Harvard University Library,
[http://oasis.lib.harvard.edu/oasis/deliver/~med00082 accessed 18 February 2014].


Laboratory for Experimental Pedagogy,
[www.ergastirio.ppp.uoa.gr accessed 4 March 2013].

Museum für Verhütung und Schwangerschaftsabbruch (Museum of Contraception and Abortion),
National Health Service (NHS, UK),
[http://www.nhs.uk accessed in 8 January 2011].

The General Secretariat of the Government,

Spyros Doxiadis: Diagnostic and Treatment Unit for the Child,