Melnick, Vjaya oral history interview

Don Nicoll

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Interview with Vijaya Melnick by Don Nicoll

Summary Sheet and Transcript

Interviewee
Melnick, Vijaya

Interviewer
Nicoll, Don

Date
September 19, 2002

Place
Washington, D.C.

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Biographical Note

Vijaya Lakshmi Melnick was born in India on November 19, 1937. She was raised in India and went to school there until her last year of agricultural college, when she won a fellowship to come to the University of Wisconsin. Since being in the U.S., Melnick has earned her master’s degree and Ph.D. Dr. Melnick served with Senator Muskie on the Nestle Infant Formula Audit Commission [NIFAC].

Scope and Content Note

Interview includes discussions of: personal background; coming to the United States; member of NIFAC; Nestle Infant Formula Audit Commission; Senator Muskie’s interaction with and work on the commission; background of the Nestle controversy; how the commission worked; difficulties faced within the Commission; major contributions of the commission; and Edmund S. Muskie.

Indexed Names

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Transcript

Don Nicoll: It is Thursday, the 19th of September, the year 2002. We are at the offices of the Edmund S. Muskie Foundation, and Don Nicoll is interviewing Dr. Vijaya Melnick. Welcome, Dr. Melnick. Could you state your full name, spell it, and give us your date and place of birth, please.

Dr. Vijaya Melnick: Sure, my full name is Vijaya Lakshmi Melnick. And Vijaya stands for Victoria, or it translates to Victoria. And Lakshmi of course is the goddess of wealth and prosperity, so my parents had very high expectations of me.

DN: Which seem to have been realized.

VM: I was born in the state of Kerala, in a place called, Calicut, and the date of birth is November 19th, 1937.

DN: And you went to school in India.

VM: I went to school in India, I went to school mostly in a school that was run by Franciscan nuns, and it was a girl's, finishing school type of place. The school had very small classes (number of students/class). It was completely English medium and Cambridge system of education. After High school we had something called Intermediate, in India, before you actually went for the degree program, since high school was only ten years of schooling. So the eleventh and twelfth were called Intermediate. Then I went to a girl's college, and after that to the Agricultural College.

But, when I was in my final year of the Agricultural College I won a fellowship to come to the University of Wisconsin. The fellowship was offered by a women's group in the United States called the PEO Group, and it was called the International Peace Scholarship, I won that and I came to the United States. The terms were that if I applied to a university in the US and the university accepted me, then I could use that fellowship.

I wanted to come to the coldest place possible, because I love the cold and I don't very much like the heat, so I picked Wisconsin. Wisconsin was wonderful. I loved Wisconsin; it was a great place for me. It was nice cool weather, lots of snow. I went to graduate school there and did my master's, Ph.D., and then Postdoctoral work at the medical school.

DN: Now you went to an agricultural college.

VM: Initially. Agricultural college in India sort of taught you everything. The two years of
Intermediate, I was a science major, so we had life sciences, physics, chemistry, and of course English literature and a language. The language that I learned was Hindi. Then in the Agricultural college we had a whole set of different courses to learn; we had economics, agronomy, two years of veterinary science, two years of engineering, one year of mechanical, one year of civil engineering, then horticulture, entomology, so there was a whole plethora of courses. And that was a lot of fun, and so I decided I wanted to pursue horticulture, and that's the department that I enrolled. But by the time I started to get more and more interested in the basic sciences, so my thesis actually was in plant physiology and in very basic area of transplanting ovules, which are the young seeds in a fruit, to other fruits to see how far in the species you can do this transplant. So we were doing these transplants long time before, all the current news.

DN: Shades of the genetic . . . .

VM: These new things that have come about…. I mean, Xeno-transplantation where pig's livers can be transplanted to humans and that sort of thing. So I went as far as growing a little strawberry in a pepper, in the pepper placenta, so that was for my Ph.D., It was a lot of fun, but then after that I was moving more and more into the basic sciences so I did the post doctoral work in the medical school, in Experimental Pathology. And that involved looking for the source of a particular enzyme, where that is made in the rat and its role in the system. So I did that for a couple of years. By that time I had a child I decided to take off a couple years and bring up my child, which I don't regret at all, it was a wonderful experience.

Then I came to Maryland, when my husband was offered a job in Maryland. When we came here, I had an offer from NIH as well as from this new college called, Federal City College, which was a DC Public College. And somebody told me that I should not go there, that it is not very good and people are, you know, they're not settled down, there are a lot of problems. And most of all they would not accept me because I was not Black. And so I wanted to know the place that would not accept me, I decided that I have to try this out.

I went there, and I asked the NIH if they can wait for one year for me to make up my mind whether I want to come there or not, and they said fine, they will keep the position open. So I went to Federal City College and there I found students who were very eager to study, and eager to go on to professional work, particularly to medical school. I started a program of pre-medical sciences, and the rest is history. I was so hooked by those students I stayed there and developed a lot of programs, and now I have eighty or ninety students who have their MDs and Ph.D.s all over the country.

DN: I was struck in looking at your CV by the fact that you have pursued throughout your career both a lot of interest in advanced scientific techniques and investigations, and the transfer of scientific technology.

VM: Right.

DN: And bioethics, and the third stream, opportunities for minorities, particularly in the professions. And by 1981, when the Nestlé infant formula controversy erupted, you were invited to become a member of that commission.
VM: Right.

DN: Why did they ask you?

VM: I think I was nominated by the American Society for Pediatric Research, or at least by some of the officers of that society. At that time Mr. [Ray] Pagan, who was actually putting the commission together, was calling around and figuring out what will be the best combination of membership on the commission. And they wanted somebody from, somebody who at least had origins in the Third World, because a lot of the controversies were centered on Third World issues. And so I think they went to Dr. Joseph Bellanti who was at that time the president of the American Society of Pediatric Research, he is a very good friend of mine, so he consulted with a couple of people and said to me that, “We are going to nominate you. Do you have any objection?” So I said, “I will see what it is all about and if it is okay I will join them, but I want to find out more about it.” At that time I was not very much aware of the Nestlé controversy or, the problems surrounding that, I had heard some news here and there but it was not one of my major concerns. So I came to it with a very, very open and objective mind.

DN: Had you maintained much contact with family or the society in India after coming here?

VM: Yes, at that time I had my parents there and my family there, and I used to go back, about every three or four years. Later my brother came here, he's a nuclear engineer, and he's now the safety officer at Brookhaven National Laboratory. I have always kept in contact with my friends and family in India.

DN: But this issue, as it affected India, had not been something of major concern.

VM: No, I mean I knew about it only when the commission traveled to different countries, and India was one of the countries that I traveled to, to find out how the issue played out over there. I was then aware of some of the problems that Nestlé had there. There were some activists groups in protest of Nestlé in India. Particularly I remember an Indian doctor who said that every emaciated baby that came into the hospital was due to feeding with infant formula, and it was mostly Nestlé, who sort of got them hooked onto the formula.

I remember once, my son who was about I think twelve years old, he was my photographer, he's been interested in photography from the beginning, so he said that he will come as my photographer, and Nestlé had in fact asked him to take pictures so that they can have the pictures of the travel and some of the meetings I had. So we went into this hospital and there was this very, very emaciated baby, I mean he could hardly move, he was sort of like just skin and bones. And the doctor came in and he told me all about the problem that they have with Nestlé pushing the formula on mothers, and so on and so forth.

I was just listening to him throughout the whole time, and then he said, “Now look here, here is the absolute evidence for that, this baby was given formula and look what has happened to him.” And then he called my son and he said, “Take his picture as evidence.” So my son said, “No, I won't take his picture. Have you asked his mother whether I can take his picture?” So he said,
“No, you don't need his mother's permission; I'm giving you permission.” And my son said, “No, not in my books.” I was amazed at my son’s answer.

DN: You had obviously given him some ethical values.

VM: So he didn't take the picture. But he did take a picture of my talking with the doctor, but he refused to take the picture of the baby. Anyway, so I did meet with several pediatricians and hospital personnel and other activist members there. And thought, of course there are always two sides to a story. The best thing about the commission was that through the leadership of Senator Muskie, we always kept a very objective attitude. We had received complaints both pro and con Nestlé. Some complaints we received said that Nestlé did this or Nestlé did that and other complaints where that activists had done something in order to precipitate the problem. And we had to act as a semi-adjudicating body and find either ‘for or against’ Nestlé. To do this we had to gather as much evidence as possible, whatever the complainant sent, in addition to whatever evidence we could gather, to come to a decision.

I think that was a fantastic training that I got working on that commission. Watching Senator Muskie and his incredible integrity, he was not fazed by the power of the protest on one side, or the power of the company on the other side, both of which could have been awesome. Only he, I think, could have withstood both of that and then come up with his own version of what it is that we will do and what we will not do. He was for finding whatever evidence, as much as possible, and ruling on the basis of that. But we did not shirk from meeting with the protest group or the company; both wanted to convince us that they have done nothing wrong. But neither of that was true. I mean there were problems with some of the actions of the company, and there were problems with the protest group, and we found accordingly when the cases came before us.

DN: Was there any division within the commission?

VM: I don't think that we had any split decisions. I mean, in our debating the issues sometimes people would have taken slightly different stands, but I think that by the time we came to the decision the commission would make on a case, I don't recall any split decisions. I don't recall any minority reports, for instance, when we wrote those things up.

DN: How did Senator Muskie handle the debate within the group?

VM: I think Senator Muskie actually encouraged the debate. He wanted to hear from everybody, he wanted to hear from all the people. There were several religious ministers on our commission, so he wanted to hear from that point of view. He wanted to hear from us; actually Dr. Morgan and I were the only scientists in the group. And there was Mildred Randall, who was a dietician, she was Phil Wogaman's, colleague and he had nominated her to the commission
subsequently. Initially I was the only woman member of the group, and I used to say to the activists who came in, “You know, actually I'm the only person who can speak from a personal point of view; I'm the only person who has breast-fed a kid,” since most of these were men arguing back and forth about things that they had never experienced.

**DN:** So they finally got you a compatriot.

**VM:** Yeah. I think when we were in Geneva for the first meeting with the Nestlé officers, we wanted to enlarge the group a little bit more and we felt that a dietician-, you know, a person with dietetic training would be very good. And she was also involved with a Methodist group which had an initial foray with this whole issue, I think, they had discussed and talked about it, she was aware of the issues. So she came in with some understanding of the problem, and Phil Wogaman nominated her.

And then we had of course Fatowi Mataafa, the third woman member, she was from Guam and she was the wife of the former prime minister. And she was a very, very impressive lady and did not, shrink from making any statements. So we had a very independent set of people, who did not step on people's toes but they also did not shy away from making a statement that they felt was important to make.

**DN:** Did the commission as a whole, or did any of the members of the commission feel at all intimidated by Nestlé or a feeling that -?

**VM:** No, not at all, not at all. Nestlé, I have to say that Nestlé's behavior, as far as I know and I'm aware of, has been exemplary with the commission, as far as the dealings with the commission are concerned. They did not try to influence us in any way; they did not dictate to us, they did not say, “We find this is terrible that you're taking this stand.” To my knowledge, they never did that. But of course they argued their point of view when we called them and asked them to, and they explained how things work in their corporation and explained why some things happen the way they do because of the culture of that corporation. But beyond that, they did not try to twist our arms or anything like that.

**DN:** In an interview for the oral history project, Reverend Wogaman noted particularly the problem with the Nestlé subsidiary corporations, and the fact that they were semi-independent apparently.

**VM:** In the various countries.

**DN:** Yeah. And that of course was true. So when you go to each country they would have developed their own culture there. I mean, Nestlé is a huge corporation as you know, it’s gross income, probably even its net income, is more than that of many countries, of individual countries. So they are in fact a huge entity, and the various corporations or sub-corporations in particular continents or countries would have developed their own culture and would have developed their own way of doing things.
So we found in some cases where it was said that you should not have a poster with a baby's picture saying “Lactogen” or something, and some places we would still find them there, because word had not permeated down to them, even though the material was I think sent to everybody, to all the companies. They didn't see what was wrong in having a baby's picture saying “Lactogen”, because babies use Lactogen, and so they didn't see what was wrong with that. So in those places we would walk in and we will see that, and that will be actually the source of a complaint if you saw such a poster. So there were problems in making people understand the issue.

And never, as far as I can recall, was a complaint ever launched about the quality of Nestlé products. The problem was always the product in the context of particular countries, and the resources that people had to use that product. I mean, the product was expensive, so one of the major complaints was that Nestlé had people in hospitals, and supposedly this was the reason for the whole Nestlé boycott, that Nestlé had people in hospitals that passed out samples of Nestlé products to mothers before they were discharged. And then they would have, let's say a tin or half a tin of infant formula, or whatever they've received then after that, they have to buy it themselves, and this was sort of a way to hook them onto feeding the baby with formula.

But there were several other issues that were not taken into consideration, whether they had clean water, whether they were able to sterilize bottles, whether they had enough money to buy the next tin of formula, and therefore the problem was that the formula was in many cases greatly diluted because mothers thought, that you could give the formula but she may not have enough so she will just use one spoon of formula instead of putting three spoons or whatever the directions said.

And the other issue is that in many places, as you know there is no clean water and so if the water is not thoroughly boiled and distilled, or sterilized, then you are allowing all of those nasty organisms and everything to get into the formula that is made. Plus the fact they did not have refrigeration, so if there's left-over formula and you leave it outside that will allow the bacteria to breed, and the mother may reuse the contaminated formula. So it was a matter of what happened to the formula, not the quality of the formula that was the problem. The formula in itself was fine. In ideal and appropriate conditions, there should be no “problem”

In this country initially, the pediatricians were actually pushing formula. So a lot of the women in Western countries, particularly in the United States, were not breastfeeding because the pediatricians said, “Well you don't know when you breastfeed how much milk the baby is getting, whereas if you give the formula you know that the baby has gotten seven ounces or five ounces or whatever, because you can measure it directly. And so you can be assured that the baby has received this much food, whereas feeding at the breast you have no idea how much the baby has gotten, so it is better to go to formula.” So the pediatricians actually encouraged, for a long period of time, the use of formula rather than to breastfeed.

Breastfeeding in the United States was at the most I think fifteen or twenty percent at one point. Then this whole move towards, or back to the notion, that breastfeeding is good, came about. They started to find out all the scientific as well as health advantages of breast milk, and there was a move to increase breastfeeding among women. But then our rules are not very friendly
towards that, because we have no maternity leave, we are the only industrialized country that
does not have maternity leave. We do not have any crèche in the places where women work, and
so it's not easy to go to your work and then run back home to breastfeed your child. And
breastfeeding is supposed to be done on demand, not on schedule, so unless the baby is right
there with you, you cannot comply with all of these things.

Our society was not very sympathetic to all that, and so we did not have either government
agencies or institutions, even academic institutions or organizations, anyone who made provision
for a young mother to bring her baby and to have the baby on site. Day care centers, I went to
several other countries, Singapore, Hong Kong, etc in all of them, the big companies would have
a crèche for the young mothers to bring their baby, and leave them there. There will be child care
personnel at these facilities. These facilities allow the mother to periodically come and feed the
baby if she wants to. But we have not progressed to that.

DN: In some ways we're backward compared with other countries.

VM: Very much backwards. I just gave a talk about that in South Africa at the UN Summit, in
fact, the topic of my talk was the impact of HIV/AIDS on children. And one of the things, of
course, is the great advantages of breastfeeding because the infection rate is lower, the baby's
supposedly intelligent quotient is more, immune capacities are higher, all of the development
measures are better, gastrointestinal problems are very much reduced, hospitalization is very
much reduced, all of these are advantages in breastfed babies. But yet, in conditions that South
Africa currently finds itself, with about twenty-five percent HIV infection rate, and the fact that
the virus can be transmitted through breast milk, we have to say that HIV infected mothers
should not breastfeed the child. But then what do they do? They have to be provided with
formula, or some food that is adequate and nutritious for the child.

So that is a great dilemma, I mean, where we are looking at providing antiretroviral therapies for
low cost for people, we have not looked at this issue at all, how to provide children with a
substitute for breast milk. Now, Thailand is one country with its own resources that has done
that, and they have vastly reduced the infection rate in children through the policy of providing
antiretroviral therapy as well as not allowing infected mothers to breastfeed the children.

DN: And providing them with formula.

VM: And providing them with the formula, yeah. And it has been very effective. And in the
US of course, our recommendation is that if the mother is infected she should not breastfeed.

DN: Now, had that issue surfaced at all when the commission was doing its work?

VM: Yes, I think that as scientists both Dr. Morgan and I had argued that there are several
cases and instances where a mother may not be able to breastfeed. And one may be that there
are, though it may be very rare, but there are cases where a woman is simply not able to
breastfeed for a number of physiological reasons: inverted nipples and other such reasons that do
not allow her to breastfeed so we have to acknowledge that.
The other is that there may be some problem, for example, the child may be allergic to milk, there are several such instances where you have to find something else that is suitable for the child, or with which you can feed the child.

Then I think there should also be provision for personal decision on the part of the mother. For whatever reason she's not happy with breastfeeding, she doesn't think that she wants to breastfeed. If that is the case, you cannot force a mother to breastfeed. I mean, breastfeeding is a very committed activity; it takes a lot of your energy and a lot of your time. To do it well, you really have to be committed to that proposition; it's not something that you do half way.

If you are not prepared to do that, then those mothers should have an option of having a substitute to give to the child. And the infant formula has been produced in such a way that it is, if given in the proper fashion with the proper technique and so forth, is an adequate substitute. Many children have grown up on those formulas and are very healthy.

**DN:** Did Nestlé change its pricing at all, or address the pricing question for those who needed to use formula?

**VM:** I don't think no, not that I'm aware of. They may have done that, but I'm not aware of it. What happened is that we, Dr. Morgan and I did a study, I don't know whether you know this, but this was done on behalf of the commission, we did actually do a scientific study of infant feeding in Mexico to see how mothers dealt with children, what did they give to the babies, how did the hospitals handle that, how friendly were the hospitals to the mother, if she wanted to breastfeed, and so on and so forth. We addressed all these questions, and what we found was some incredible stuff. Our findings had an effect on both UNICEF and WHO, they selected certain countries and said that in these countries, the hospitals would not allow any samples of formula to be provided to the mothers.

I think, up to this point there was no scientific study ever done on these questions, and we were amazed at some of the findings that we made in Mexico. We found that mothers, for example, when they did not have access to formula, gave the babies something like twenty-five different teas, you know, they made tea out of something and they gave the kids that. They believed that it was good for the child, but of course it was really not providing very much nutrition at all. And as for samples, the hospital unions had an understanding, not an understanding but had a requirement that mothers must be given six months worth of formula when they leave the hospital. This was something that the union had negotiated with the hospital, so every mother got that. So that was in itself an incentive to feeding with formula. So I think that these issues were made known by our study. I understand that there were some changes made in those provisions in the hospital subsequent to our study.

The other thing is that we found that every kid that was born in Mexican hospitals was given a gastric lavage (putting a tube in and cleaning out the stomach). We asked them, “Why? Did the babies have gastric obstructions or any such problems?” And they said, “No, but we do this to every child.” And not only that, they were going from one baby to another and sometimes with not properly sterilized tubes. Because there were lots of babies born, they didn't have really time to sterilize the equipment properly and they would go from one baby to the other, and there were
incredible cases of gastrointestinal infections and other such problems.

We were sitting in the office of someone who is considered to be a ‘dean of pediatrics’ in Mexico who knew everything about pediatrics and everything that went on there. We told him, that we had initiated a pilot study, just to see whether we should do the larger study, and what we found out at that time was this practice of gastric lavage, so we told him about it. We said, “Do you realize that this is going on here, and why is it?” He said, “No, no hospitals do that,” and we said, “Yes, they do.” And so we said, “Well call any hospital, among the hospitals that, we had selected for the study, we said call any of those hospitals and find out what they do.” He called, sure enough they all said yes, they do it. And what had happened was that long ago some Brazilian pediatrician had come to Mexico, to one of the hospitals, and he said, well this is a good thing to do and he did it. From then on they had continued doing it.

DN:  Untested.

VM: Yeah, untested. And even seeing all the problems that the children were having, they were still doing it. Dr. Morgan and I, were the principal investigators of the project, and Dr. Linda Newhouse was the project director for United States, and Dr. Enrique Rios for Mexico, he was at the Mexican Nutrition Institute, which is sort of equivalent to the NIH. All the interviewers were people from Mexico. We did not, do any questioning or have any interaction with the Mexican population because we felt that it would be most effective if the people there did the research themselves. We just oversaw the design and the survey questions and the reactions, but actual questioning of people, interacting with people were all done by people from Mexico.

DN: Now how did the commission decide to commission the study?

VM: Well, we felt that when the commission had been established we had these opinions that were made by the protest groups, as well as by the company personnel, as to what they did in hospitals. The company said, they didn't do such and such in the hospital, and the protest group said well they did such and such in the hospital. And there was really no scientific evidence for any of this; it was simply opinions from particular people who had already taken a position by virtue of who they were. So we felt that it was important to have some scientific, objective information on the subject. So Dr. Morgan and I proposed the study to the commission, and Senator Muskie, being who he is, immediately saw the value of scientific evidence. He said, yes, this is something that is very much worthwhile, so why don't you do it. And then we told Nestlé that we will be doing such a study and we reserved a certain amount of money for that purpose and we did the study. And I think it was one of the best legacies of the commission.

DN: You did several reports.

VM: We did several reports on various country visits and all that, but this was the one scientific study that we did. We did sort of a partial study in Thailand, but it was nowhere as elaborate as the one done in Mexico. By that time the commission was coming to an end and we were not able to, give that much attention nor commit ourselves to the long period of required time because we knew that we were winding down. So we did a very small study in Thailand, in
addition to the study in Mexico.

DN: How was this funded?

VM: Through the commission.

DN: So Nestlé put up the money for the commission's investigation and for the scientific study.

VM: And then the commission decides how it is going to spend its money. And the commission had complete rights over that money; I mean Nestlé had absolutely no say so once we decided that.

DN: What were the most difficult problems that you encountered in the commission?

VM: I think initially sort of understanding where each person was coming from. I mean, I was not used to the point of views from religious leaders based on something that happened in a particular congregation or the people that they were involved with. So that was an issue, and I had to do deal with this on whatever basis. Because, my thinking was, if you had a question, you had to understand what the problem is, and you had to seek the evidence and you had to do that as objectively as possible. And so I had to learn a lot that there was value also in understanding what people's perceptions are, no matter what the evidence. How people perceive things are just as important.

Public discourse on subjects is incredibly important. In science the answer is never a finished product when you are researching something, because once we know the absolute answer, science is no longer interested in that problem, if it's a fact we don't have to pursue that any more. What we are interested in is uncovering knowledge on something that we don't know, and each time that knowledge could change depending upon the next experiment or the next set of events that happen, you know, within the scientific framework.

So I was used to things that could be questioned, that is not quite understood. I mean, initially my problem was, I said, “Is it the product? I mean is Nestlé making a bad product? Is that the problem why people are protesting?” Then it took a long time for me to understand that Nestlé was picked as a target for protest because it was the largest infant formula entity, not because it was making anything worse than American Home Products or Meade Johnson, or anybody else like that. But Meade Johnson and American Home Products, all those, were small fish compared to Nestlé, and if you are to have a global protest it has to be an international company that everybody knows, so Nestlé was a good target.

And so I learned a lot of politics and economics in the process of doing that, and Muskie was a great teacher, the senator was a great teacher. I saw how he wielded his influence in trying to get people to think in different ways, I mean he encouraged debate, and he wanted people to explain why is it that you think that way, and what is the reason for your point. He wanted people to explain why is it that you hold this point of view, not just that you feel this way, or you like this or whatever, but you had to explain to him why you thought in a certain fashion. And the way that we explained things was very different from how the ministers, or the people from the
religious, or the political side explained things. So it was a great learning experience. And I found that initially sort of difficult to handle because I said, oh my God, I mean this is so simple and why are they talking about it so much? But I had to keep quiet and then I learned that there was a reason for the discussion, and I learned a lot through that. And Muskie, sometimes, the senator, as you know, has a very bad temper, and he -

DN: Did you see that?

VM: Oh yes, we have seen that. And once, I think we had such an argument, and it was Phil Wogaman who disagreed with something, and he and Muskie had a great argument and neither would give in. And finally Muskie was thumping on the table and hitting his hand, turning red and all that, and Phil Wogaman did the same thing, he was also getting angry. And at some point Muskie just got up and left, he went out of the room, and went to his office. So we were all wondering what to do, I mean we have to finish our business and people had to catch a plane in the evening, people who came out of town. We had to finish our business and were trying to get the senator back. And everybody said, “Viji, you go get the senator to comeback, because only you have the guts to talk to him.” They were all sort of reticent when he was in that mood. So I went over to his room, and he was reading his newspaper and I said, “Hi Senator, how are you doing?” And he said, “Fine.” So I said, “You know, there are people who need to leave and catch a plane, so why don't you come back to the room and let's finish our business.” He said, “Okay,” and he walked back as though nothing had happened. By that time Phil had cooled down also, we discussed the subject, we came to a decision, and everything was finished on time.

DN: Was that the only major display of his temper?

VM: Well, there have been episodes like that periodically, but I think I had, known about this because I had read something about him, I think someone had described this as his ‘prickly pear’ temper. And once, when we were talking about something, he got angry about something, and he started to, talk to me about something and his voice got louder and louder. I always sat next to him, so I just sat there and didn’t say anything, I just listened to him. And he went on and on, and I was still not saying anything. I said hmm-hmm and I sat there. Then when he finished I said to him, “Is that it?”

End of Side A, Side B

VM: -When he heard that he just turned around and laughed, he was completely taken aback because nobody had ever responded to him in that way when he was angry. People get very, very upset or very afraid of him. And when I said, “Well, are you finished, can we talk now?” He just broke up in laughter. So that is why people thought I could go and talk to him. I found him to be the most incredible person, I felt that it was a great advantage, and it was a great privilege for me to have worked with him for those ten years. I learned a lot, I learned a lot about what an absolutely great leader and a good politician, (and by that I mean a good politician with high integrity) he can be. I was in great admiration of him.

DN: You've spoken of all you learned from him; how was he as a student?
VM: He was a very good student, because he would listen. And I think that probably came from his senate chairmanship days, that he could take a subject and he would ask people to tell him what is wrong or what is right about that. And he was able to catch on very quickly, so that when we have a press conference or something, he would be able to explain the scientific basis or the economic basis of something very quickly, because he would have learned that. I didn't think that he pretended that he knew everything so you couldn't tell him anything. Quite the contrary, he was a very good listener, and a very good analyst.

DN: As you look back on the work of the commission, beyond the scientific study particularly that you did on infant feeding in Mexico, what do you think are the major contributions that the commission made?

VM: I think the commission demonstrated that a group of people could come together, and a company could fund the operation of such a group, without influencing that group's decision. I think in the business world it was the first such model, and I don't know whether anybody has done that subsequently. The ethical and economic issues of such arrangements may be argued by some, but just because, a company funds such a group and its activity, it doesn't mean that the company will influence the decisions of that group. Because Nestlé had unilaterally agreed that it was going to abide by the WHO guidelines on Infant Formula Marketing Practices. I think that was a first and so it was a first for a business model as to how to negotiate differences and solve problems.

DN: Did you get a sense, or did you have direct knowledge of why Nestlé decided to go that route?

VM: I think Nestlé decided to go that route because of the protest that it faced. It knew that all kinds of right as well as wrong things were being said about them, and there were some things wrong with their own company, with some of their practices, and that it was time for them to change. But they are a very solid company as you know, and have a very long-term vision, and they felt that in the long term they have to deal with this protest and come to some kind of settlement. Otherwise, they will have this constantly, and they will be distracted, and it is not good for the growth of the corporation. I'm sure that's the reason that they did it.

DN: When the work of the commission was over, did you get any feedback from Nestlé as to how they viewed the process, or what they had learned from it?

VM: From the chairman of the board, the CEO at that time, Dr. [Helmut] Maucher, and all the principal officers, every one of them told us what a great service we had provided to the company in resolving some of those issues that were important, and that they were very thankful for it. Initially, the commission was only supposed to go on for a year and a half. We went on for ten years, and that was a long time for any company to support anything like this, and they did it. Unless they believed that their investment was doing something in the right direction, they would not have done it.

We came to a point where most of the issues were solved. It came to a natural period where we
had done all we could as a commission and it was time to end it, and that's when we ended. We even got very good comments from the protest groups, they also said that it was one of the best set of people, not individuals, but a group coming together to do this, that they felt that we had done a very good job. And someone had written I think a thesis on this or a paper, in Berkeley and Dr. Morgan may be able to tell you more about it, from what I hear the protest groups also thought that this was a great model.

DN: Any other observations on Senator Muskie than those you've made so eloquently already?

VM: Well, I am a great fan of Senator Muskie, and I am a student of his, and as I said, I consider it a great privilege to have served with him. It's an opportunity I would not have missed for anything, and having had it I have grown in many positive ways, and I am thankful for that.

DN: One other question. When you went on the commission, what did you know about Senator Muskie, and did you have any expectations?

VM: The only thing I knew about Senator Muskie was that he was a great senator; that he had done a lot of work on clean air and clean water, and he had run for president at one time, and of course that terrible New Hampshire incident, which I felt it was so unfair. But I always admired him for the stance he took, and knew he would have made an incredibly good president. But I think the time probably was not right for him, that he was ahead of his time. And the country probably did not understand how great a man he was, because I think it was the first time that he talked about himself, when he ran for president. He was not a person who trumpeted about himself. But I think if anybody had looked at his work and his stance, and the positions he took, they would have known that he was a great man of great integrity and great leadership.

DN: Thank you very much.

VM: Thank you.

End of Interview