

The Rockefeller Foundation's Rural Health Program and the Oil Nationalization Crisis in Iran, 1949-1951

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Abstract

This research report examines the efforts of the Rockefeller Foundation (RF) to build a rural health initiative in Iran from 1949 through 1951. It details the RF's progress in contributing toward improving Iranian public health during this period, and it analyzes the impact of the Iranian oil nationalization crisis that began in early 1951 on the Rockefeller Foundation's activities. Ultimately, this report argues that the oil nationalization crisis forced the RF to end its Iranian initiative in late summer 1951 without completing its work there, but these rural health initiatives nevertheless helped lay a foundation for Iran's later public health efforts and contributed to positive American-Iranian relations prior to the 1953 coup.

The late 1940s probably seemed like a good time for the Rockefeller Foundation (RF) to launch a rural health project in Iran. The United States government had become involved meaningfully in Iran's affairs for the first time during World War II due to the country's strategic importance to the Allied war effort. The war brought US soldiers, military and other advisers, and experts from a variety of fields into Iran – along with increased American cultural influence.¹ When the war ended, Iran quickly proved to be an important battleground in the emerging Cold War. The Soviet Union's refusal to withdraw its occupying forces from northern Iran in 1946, along with Soviet-supported separatist movements in Iran's northern provinces, ensured that the United States remained involved in Iranian affairs.² As Iran's political situation stabilized after 1946, ongoing US support for Iran combined with the postwar Iranian government's modernizing, developmentalist ambitions created a promising environment for the Rockefeller Foundation's work. The Iranian government was eager to partner with the RF to launch an ambitious rural health program in the late 1940s, and the Rockefeller Foundation officially opened its offices in Tehran in the spring of 1949. Despite the great promise of this moment, however, the timing of the RF's move into Iran ultimately proved inauspicious.

Before the rural health initiative could become fully operational, the Rockefeller Foundation's staff members in Tehran found themselves caught in the middle of one of modern Iran's most defining moments: the oil nationalization crisis that began in 1951. This moment ultimately led to the overthrow of Prime Minister Mohammad Mosaddegh in a CIA- and MI6-backed coup in August 1953 and the end of postwar Iran's brief experiment in democracy – as well as the Rockefeller Foundation's activities in Iran, at least for a time.

The records of the Rockefeller Foundation not only provide insight into the oil nationalization crisis, but they also demonstrate how the Foundation's work was buffeted by unpredictable political and diplomatic winds beyond its control. The example of Iran demonstrates how, even in countries that enthusiastically welcomed the Rockefeller Foundation, larger geopolitical factors could still derail RF's plans. Despite the oil nationalization crisis causing the Foundation to halt its activities in Iran, this period was still important. The Foundation and its personnel contributed to the

spread of American influence in Iran in the early Cold War period, which Iranians saw positively before the 1953 coup. And its public health work – done in collaboration with the Iranian government – contributed to laying the foundation for Iran’s later modernizing public health initiatives under the Shah.

The decade before the Rockefeller Foundation initiated its rural health program in Iran was one of significant upheaval for the country. In August 1941, the Soviet Union and Great Britain invaded and forced the abdication of Iran’s modernizing monarch, Reza Shah Pahlavi. Reza Shah had become increasingly pro-German, and the Allies could not allow such a strategically important country to fall into the enemy’s camp. As a result of the Allied invasion, Reza Shah’s 22-year-old son, Mohammad Reza Pahlavi, ascended the throne. But unlike his father who had ruled as an absolute monarch, the young Mohammad Reza Shah was a constitutional monarch who truly shared power with the revitalized, democratically-elected *Majles*, or parliament.³

Iran’s nascent democracy struggled to navigate the Allied occupation during the war and the 1946 crisis that followed, but the political situation calmed after the Soviet withdrawal in early 1947. One point of continuity between Reza Shah’s autocratic government and the more democratic post-World War II government was Iran’s emphasis on modernization. In 1948, the Iranian government announced its ambitious Seven Year Plan, an economic development program which sought to modernize and industrialize Iran’s economy. With a focus on building modern infrastructure, improving agricultural production, increasing industrial output, and diversifying Iran’s economy, the Seven Year Plan embraced the expansion and improvement of education and healthcare among its goals.⁴ This included an urgent focus on public health by the *Majles*, the cabinet ministries, and the royal family.

Despite public health reforms dating back to the 19th century, Iran faced many public health challenges by World War II, particularly in rural areas. These included high infant and maternal mortality rates, limited access to medical care, infectious diseases such as malaria, and a shortage of trained Iranian medical personnel. Iran had had no government ministry dedicated to public health since 1921; public health fell under the purview of the Ministry of the Interior.⁵ Existing healthcare facilities consisted of hospitals, clinics, and dispensaries founded and run by westerners, such as American

Presbyterian missionaries, as well as some Iranian hospitals and medical schools. Yet healthcare for most Iranians was inadequate, unevenly distributed, or difficult to access.⁶ To address these issues and underscore the importance of public health, Iran's government established the Ministry of Health in 1941.⁷

To overcome the challenges it faced, the Ministry of Health sought foreign expertise and assistance after the war - particularly experts from countries with no history of seeking to dominate or colonize Iran. Americans fit the bill nicely, as did representatives from the newly established World Health Organization (WHO), who assisted Iran with its anti-malaria campaign.⁸ As an American philanthropic organization with a successful track record of global public health work, the Rockefeller Foundation was received with enthusiasm by the Iranian government. Guy Scull Hayes, RF's first Iran country officer, thus opened the Foundation's office in Tehran in March 1949.⁹

The 37-year-old Hayes had earned his medical degree from Harvard Medical School in 1939. He had interned at Boston City Hospital and earned a Master of Public Health degree from Johns Hopkins University. In the summer of 1943 – during World War II – Hayes joined the Rockefeller Foundation's International Health Division, where he served in South America – with a year of study leave at the Johns Hopkins School of Hygiene and Public Health – through late 1948. RF dispatched Hayes to Iran in February 1949, and he arrived in early March.¹⁰ Although Hayes had no apparent prior experience with or expertise regarding Iran, he was an experienced public health expert and seasoned Foundation representative as he inaugurated RF's rural health program in Iran.

With the support of the American embassy in Tehran, over the next few years, Hayes found himself working alongside a wide range of stakeholders. He engaged with Iranian leaders and officials, local authorities, Iranian doctors and hospital administrators, American consultants and advisers to the Iranian government, US diplomatic personnel, and others dedicated to improving the public health situation in Iran.¹¹ Despite the commitment of so many stakeholders, improving the public health situation in Iran was a difficult endeavor. One of the major challenges facing the RF was creating its program from scratch. When Hayes arrived, he was the sole Foundation

representative resident in Iran. He lacked the necessary language skills, and the RF had no existing infrastructure in the country upon which to build. Hayes, therefore, often had to rely on other Americans in Tehran for assistance.

Hayes particularly needed help communicating with Iranians during meetings. The American advisor to the Iranian Ministry of Health, Dr. Bennett Avery, often served this role during Hayes's first months in Tehran, introducing Hayes to important people and interpreting (in French) when Hayes met with Iranian officials, hospital administrators, and others. Avery was a University of Michigan-trained doctor, former anatomy professor, and former Rockefeller fellow who had been in Iran for approximately five years when Hayes arrived.¹² While his assistance proved invaluable, as an advisor who served the Iranian government, Avery's agenda was not necessarily the same as the Rockefeller Foundation's. Hayes found early on, for instance, that Avery resisted advice about the Seven Year Plan and often dismissed the views of other Americans working in Iran.¹³ The necessity of having Avery present and mediating all business with Iranians meant that the Foundation could not act independent of Avery's influence. To remedy this, Hayes began taking language lessons to learn Farsi (also known as Persian) about a month after his arrival in Tehran.¹⁴ His learning progress was slow, so he still relied on Avery or Iranian interpreters and translators.

Hayes also had to balance the priorities of the Rockefeller Foundation with those of the Iranian government. Iran genuinely welcomed RF's assistance; it provided two rooms to serve as the Foundation's office space inside the Ministry of Health, which gave RF status and access to Iranian officials.¹⁵ Hayes also met with Princess Ashraf Pahlavi, the Shah's twin sister, during his first week in Iran.¹⁶ This, too, signaled Iran's enthusiasm about working with the Rockefeller Foundation. Princess Ashraf was influential, the royal family was popular at the time, and the royal seal of approval made the Foundation's work easier when dealing with the Iranian bureaucracy. The princess was keen for the RF to work with the Imperial Organization of Iran to found a nursing school in Tehran that could train public health nurses.¹⁷ In working with the Iranian government, Hayes had to develop and maintain positive working relationships not only with the royal family, but also with the Ministry of Health, the Seven Year Health Program that was part of the Seven Year Plan, and local officials in urban and rural areas. He had to determine which of these entities' operations and goals fit best with

those of the Rockefeller Foundation, clearly explain RF's ideas and plans to them, and then work to ensure buy-in and successful collaboration.

RF's primary goal during this period was to create a rural health demonstration area and training center for public health personnel, which would provide a model the Foundation could scale up to the rest of the country.¹⁸ The long-term goal was to improve Iran's public health in multiple areas: training local healthcare workers, especially nurses and doctors, and creating a public health fellowship program to remedy the shortfall in Iranian medical personnel; establishing and improving rural health centers that could provide basic medical services and increase access to healthcare; improving health education through campaigns to educate the public about disease prevention, hygiene, and other topics; improving maternal and child health; enhancing nationwide infectious disease prevention and control through vaccines, mosquito control, sanitation, etc.; and encouraging community engagement in public health initiatives to ensure long-term success.

The rural health demonstration area, created in collaboration with the Ministry of Health, was the first step toward accomplishing this larger agenda. It would allow the RF to survey the current public health situation in one rural area, analyze the data, and then use the data to implement the multiple prongs of its program to demonstrate their effectiveness.¹⁹ The demonstration area would also allow the RF to identify and address potential flaws in its program or unanticipated challenges at this smaller scale before launching a broader program.

Within a few months of Hayes's arrival in Iran, he worked with the Iranian Ministry of Health to select the province of Rey as the site for the rural health demonstration and training area. Hayes brought on Dr. Mohammad Bagher Mashayekhi to assist with the program.²⁰ Mashayekhi was a graduate of Tehran Medical School and worked as the chief of the infectious disease section within the Iranian Ministry of Health, as well as a former Rockefeller Foundation public health fellow.²¹ Mashayekhi proved to be a committed and efficient partner who helped advance the RF's objectives in Rey once he came on board full-time in late 1949.

Despite Iranian support for the Foundation's work, RF faced many challenges during its nearly three years working in Iran. One longstanding problem in the Iranian political system that negatively impacted the RF's work was that Iranian officials changed positions frequently. For instance, there was a new minister of health within the first month of Hayes's arrival in Tehran, and the entire Iranian cabinet resigned in the spring of 1950.²² This often caused delays as the Foundation had to wait for new officials to take office or had to adjust to new personalities and re-establish working relationships with various government offices when they came under new leadership. Hayes also found it difficult to get an audience with the Shah, despite Iranian officials' repeated promises to arrange such a meeting.²³

In fall 1949, as Dr. Abu Torab Mehra prepared to take over as the leader of the Seven Year Health Program (SYHP), the program's acting director and two members of its board resigned.²⁴ The Seven Year Plan had difficulty getting off the ground during the time that the RF sought to work with it. Budget issues in the Iranian government, especially in the Ministry of Health, also caused uncertainty regarding the feasibility and projected timeline of the RF's and Iran's joint ventures.²⁵ Frequent interpersonal conflicts between Iranian officials (and sometimes between Avery and Iranian officials), as well as rivalry between – or unclear, overlapping jurisdictions of – government agencies (especially the Ministry of Health and the SYHP), also complicated the Foundation's work.²⁶ Hayes also complained of problematic English translations of meeting minutes and other official documents that Iranian officials sent to him for his signature.²⁷ Language barriers and communication remained a problem.

Nevertheless, Hayes and the Foundation made significant progress by early 1951. In conjunction with the Iranian Ministry of Health's Department of Rural Health Development, by the end of 1950, the Foundation conducted a thorough survey of 173 villages in Rey province, its rural demonstration and training area southwest of Tehran.²⁸ The survey – conducted by eight young midwives chosen and trained by the RF - collected data on demographics, pregnancies and fertility, births, and infant mortality. It was the first such survey in the region, which began the important process of data collection to undergird future public health work in that part of Iran.²⁹ It also worked with the Ministry of Health and the medical faculty of the University of Tehran

to establish a rural health agency in the village of Robotkarim, located in the demonstration area, and began training public health workers.³⁰

Political events in the spring of 1951, however, halted the RF's progress. The nationalist faction in the *Majles*, led by Dr. Mohammad Mosaddegh, chafed at Britain's half century of domination of the Iranian oil industry through its control of the Anglo-Iranian Oil Company (AIOC). In April 1951, the nationalists succeeded in convincing the *Majles* unanimously to pass a law nationalizing Iran's oil and forming the National Iranian Oil Company (NIOC) to replace the AIOC. This action precipitated a crisis that lasted for over two years. The ultimate consequences included a diplomatic stand-off with Great Britain, an international boycott of Iranian oil, and a dramatic reshaping of Iran's government system.³¹

Hayes and the Rockefeller Foundation had front row seats to the early days of the crisis, which impeded their public health work. As Hayes noted in his officer's diary in early May 1951, the political situation had shifted rapidly:

On April 26th, at a late night session, Parliament approved the resolution set forth by the Oil Commission and on the following day Mr. [Hossein] Ala resigned the Premiership. On the same day that the oil bill was passed an ammunition dump in Shiraz, which was said to contain over sixteen million dollars worth of equipment and explosives, was blown up....On Saturday April 28th it was announced that Dr. [Mohammad] Mossadegh, leader of the National Front group, had accepted the post of Prime Minister, and by the following Thursday (May 3rd) a Minister of Health was appointed in the person of Dr. Hassan Adham (Hakim ed Dowleh). With the government complete except for two vacancies, the government was presented to the Shah and approved by Parliament. On Friday May 4th, contrary to some people's expectations, the Shah signed the oil bill which by then had been approved by both the House and the Senate. It appears that there are many loopholes in the provisions of the bill – in fact the word “nationalization” has never been adequately defined - but the assumption is that the oil is now “nation-alized” and that the Persian government will take over full control.³²

Although the change in parliamentary leadership and oil nationalization had nothing to do with the Rockefeller Foundation, the political situation nevertheless impacted the RF's work in Iran.

The Rockefeller Foundation had been waiting for the Minister of Health to put forward proposed “decree laws” to the *Majles* to provide funding for the government’s ongoing collaboration with the RF and clarification of the “status of the Rural Health Department and staff.”³³ Without *Majles* passage of these laws, it would be difficult for the RF to continue its work. But Hayes noted that, in the immediate aftermath of the oil nationalization, the “anti-foreign attitude of the present government” and “sensitization of the Persians [Iranians] to foreign aid” would likely hinder the laws’ passage and slow RF’s progress in Iran.³⁴

Hayes’s assessment was correct, but he could not have known then that the oil crisis would cause the end of the Foundation’s work in Iran. He departed Tehran for his scheduled home leave in June 1951. Because of the intensifying crisis, Hayes ultimately did not return. It fell to Eleanor Palamountain, Hayes’s highly capable secretary in Tehran, to lead the final chapter of the Foundation’s public health initiative in Iran.

While the Rockefeller Foundation kept biographical records of its country officers, it does not appear to have maintained similar records on staff, such as secretaries. Scant records found elsewhere indicate that Eleanor Mary Aylward Palamountain was a redheaded, 31-year-old British woman who had accompanied her husband to Tehran.³⁵ Palamountain’s husband, Edgar William Irwin Palamountain, whom she married in 1948, was a British military officer assigned to the Anglo-Iranian Oil Company (AIOC) in Iran from 1948 to 1951.³⁶ It is unclear how unusual it was that Eleanor accompanied Edgar to his Iranian post or when precisely she started working for Hayes, but she had been Hayes’s secretary since at least September 1949.³⁷

Because Palamountain’s husband was attached to the AIOC, she had insight into the Iranian oil industry and political situation that proved useful when she found herself running the RF office in Tehran alone after Hayes’s departure. Palamountain was also committed – she declined to return home with the other British “oil wives” at AIOC’s invitation in early 1951 – and skilled at meeting with Iranian officials and bringing the RF’s work in Iran to a close.³⁸ She did all of this while also raising a 13-month-old daughter.³⁹ Her dispatches from Tehran during the period between Hayes’s departure and her own exit on July 31, 1951 (when she and her husband were finally ordered to

leave Iran) offer much insight into the oil crisis and its impact on the Rockefeller Foundation.

Palamountain proved highly capable during the hectic final weeks of the RF's presence in Iran. Despite the fact that she was British and her husband worked with the hated AOIC, she met with the Iranian Health Minister and Dr. Mehra of the SYHP to inform them of the Foundation's decision not to continue its operations in Iran. Mehra and the Iranian government hoped the RF would continue, since its name brought caché to the rural health programs. From the Foundation's perspective, however, the fact that the necessary rural health legislation was tied up indefinitely in the *Majles*, the Iranian government was running out of funds due to the oil crisis and standoff with Great Britain, and the deeply uncertain outcome of what had become a prolonged crisis indicated that the only sensible decision was to withdraw from Iran.

In addition to interacting with Iranian officials, Palamountain negotiated with American representatives of the Point Four Program – President Harry S. Truman's development and technical assistance program for “underdeveloped” countries – for Point Four to take over the RF's rural health work in Iran. Palamountain also kept the RF up to date with regular reports on the situation, made outstanding payments to Iranian staff and cleared the Foundation's outstanding debts, arranged for disposition of the RF's files and equipment, prepared the transfer of its office space, and closed the offices. Although the Rockefeller Foundation's work in Iran ended with a whimper rather than the successful rural health initiative it had planned, its withdrawal was as orderly as possible thanks to the diligence and skills of Eleanor Palamountain.⁴⁰

Although the oil crisis meant that the Rockefeller Foundation's efforts in Iran halted unexpectedly and it failed to accomplish its rural health goals there, the RF's work in Iran is still historically significant. Beyond its records offering insight into the early days of the oil crisis, the RF's rural health initiative from 1949 through 1951 contributed to Iran's early modernization efforts. The Point Four Program ultimately took on the work that the Rockefeller Foundation had begun, which ensured some continuation of American participation in Iran's rural health programs, and the Shah's ambitious modernization programs in the years to come expanded the country's public and rural health programs. These later programs built upon the work that the Rockefeller

Foundation had done in partnership with the Iranian Ministry of Health and the Seven Year Plan, and the survey the RF had conducted in Rey in 1949-1950 provided invaluable data for later Iranian rural health programs.

Moreover, the Rockefeller Foundation had been welcomed in Iran. Its work was deeply appreciated, and the Iranian government had tried to convince the Foundation not to withdraw in the summer of 1951. The Foundation had done work that was meaningful to Iranians and contributed to a positive view of Americans in Iran at the time. While much scholarship on US-Iran relations produced since the 1979 Iranian revolution has focused on US-Iran hostility and the negative consequences of US involvement in the 1953 coup, there is also a history of positive American-Iranian engagement that is often overlooked. The Rockefeller Foundation's work in Iran from 1949 to 1951 is part of this history of positive relations that merits deeper scholarly analysis.

¹ The Allied invasion and occupation of Iran in 1941 is covered in most books on modern Iranian history. See, for example, Gholam Reza Afkhami, *The Life and Times of the Shah* (Berkeley, CA: University of California Press, 2008). For some publications exclusively on the invasion and occupation, see Nikolay A. Kozhanov, "The Pretexts and Reasons for the Allied Invasion of Iran in 1941," *Iranian Studies* 45 no. 4 (2012): 479-497; and Mohammad Gholi Majd, *August 1941: The Anglo-Russian Occupation of Iran and Change of Shahs* (Lanham, MD: University Press of America, 2012). For American advisers, see, for example, Thomas M. Ricks, "U.S. Military Advisers to Iran, 1943-1978: The Political Economy of Military Assistance," *Iranian Studies* 12, no. 3/4 (Summer-Autumn 1979): 163-193.

² Fakhreddin Azimi, *Iran: The Crisis of Democracy, 1941-1953* (New York: St. Martin's Press, 1989); Louise Fawcett, *Iran and the Cold War: The Azerbaijan Crisis of 1946* (Cambridge, UK: Cambridge University Press, 1992); James F. Goode, *The United States and Iran, 1946-51: The Diplomacy of Neglect* (Houndmills, UK: Macmillan, 1989); David B. Nissman, *The Soviet Union and Iranian Azerbaijan: The Use of Nationalism for Political Penetration* (Boulder, CO: Westview Press, 1987); and Vladislav Zubok, "Stalin, Soviet Intelligence, and the Struggle for Iran, 1945-53," *Diplomatic History* 44, no. 1 (January 2020): 22-46.

³ Afkhami, *Life and Times of the Shah*; Azimi, *Iran: Crisis of Democracy*; Shaul Bakhash, *The Fall of Reza Shah: The Abdication, Exile, and Death of Modern Iran's Founder* (London: I.B. Taurus, 2021); David R. Collier, *Democracy and the Nature of American Influence in Iran, 1941-1979* (Syracuse, NY: Syracuse University Press, 2017); M. Reza Ghods, *Iran in the Twentieth Century: A Political History* (Boulder, CO: Lynne Rienner, 1989); and Abbas Milani, *The Shah* (New York: St. Martin's Press, 2012).

⁴ Overseas Consultants, *Report on Seven Year Development Plan for the Plan Organization of the Imperial Government of Iran* (New York: Overseas Consultants, Inc., 1949); and S. Rezazadeh Shafaq and J. D. Lotz, "The Iranian Seven Year Development Plan," *Middle East Journal* 4, no. 1 (Jan. 1950): 100-105. See also Gregory Brew, *Petroleum and Progress in Iran: Oil, Development, and the Cold War* (Cambridge, UK: Cambridge University Press, 2022).

⁵ Mohammad-Hossein Azizi, "The Historical Backgrounds of the Ministry of Health Foundation in Iran," *Archives of Iranian Medicine* 10, no. 1 (January 2007):119, 122. See also, Willem Floor, *Public Health in Qajar Iran* (Washington, D.C.: Mage Publishers, 2004).

⁶ See, for example, Margaret A. Frame, ed., *Passage to Persia: Writings of an American Doctor During Her Life in Iran, 1929-1957* (London: Summertime Publishers, 2014). The Presbyterian Historical Society in Philadelphia, PA contains the extant records of the American Presbyterian medical missionaries in Iran from the 19th through 20th centuries.

⁷ Azizi, "Historical Backgrounds," 122.

⁸ Guy Scull Hayes diary entry for March 14-20, 1949, RG 12 Officers' Diaries, Box 210, Guy Scull Hayes, 1949-1952 [March 1949-March 1950], Rockefeller Foundation Records, Rockefeller Archive Center, Sleepy Hollow, NY. Hereafter "GSH Diary."

⁹ March 7-13, 1949, GSH Diary.

¹⁰ Guy S. Hayes Curriculum Vitae and biographical materials, Biographical File, Box 4, Folder 134: Hayes, Guy S., Rockefeller Foundation Records.

¹¹ See full GSH Diary, March 1949-May 1951.

¹² Captain Bennett Franklin Avery, September 1901-July 1977, Medical Corps, U.S. Navy, Office of Information, Biographies Branch, September 27, 1960, Naval History Division, Modern Biographical Files in the Navy Department Library, Naval History and Heritage Command, <https://www.history.navy.mil/research/library/research-guides/modern-biographical-files-ndl/modern-bios-a/avery-bennett-franklin.html> (accessed 07/13/23); and March 7-13, 1949, GSH Diary.

¹³ March 7-13, 1949, GSH Diary; and April 11-17, 1949, GSH Diary.

¹⁴ April 18-May 1, 1949, GSH Diary.

¹⁵ March 7-13, 1949, GSH Diary. According to Hayes, despite their proximity to Iranian officials and despite his appreciation to the Ministry of Health for giving him two rooms to serve as the RF office, the situation was not ideal due to the poor condition of the building's facilities. Hayes lamented especially that the bathrooms were practically unusable, which made it difficult for him to hire a suitable woman to work as his secretary.

¹⁶ March 7-13, 1949, GSH Diary.

¹⁷ March 7-13, 1949, GSH Diary.

¹⁸ April 5-7, 1949, GSH Diary; and April 18-May 1, 1949, GSH Diary. See also Mohammad B. Mashayekhi, Pauline A. Mead, and Guy S. Hayes, "Some Demographic Aspects of a Rural Area in Iran," *The Milbank Memorial Fund Quarterly* 31, no. 2 (April 1953): 149-165.

¹⁹ April 18-May 1, 1949, GSH Diary; and June 4-10, 1949, GSH Diary.

²⁰ April 5-17, 1949, GSH Diary; July 2-8, 1949, GSH Diary; July 9-14, 1949, GSH Diary; and August 27-September 2, 1949, GSH Diary.

²¹ Dr. Mohammad Bagher Mashayekhi CV and fellowship application, RG 10.1 Fellowships, Box 448, Folder 6613. 771: Mashayekhi, Mohamed Bagher, 1948, 1948-1949, Rockefeller Foundation Records.

²² March 7-13, 1949, GSH Diary; and March 11-24, 1950, GSH Diary.

²³ See for example October 1-7, 1949, GSH Diary; and October 15-21, 1949, GSH Diary.

²⁴ August 27-September 2, 1949, GSH Diary. Dr. Mehra had been working as the Medical Director of the Iran Foundation, and he was educated in the United States. See Dr. Abu Torab Mehra, Application for Summer Training Grant, May 27, 1943, RG 10.1 Fellowships, Box 449, Folder 6622. 771L: Mehra, Abu Torab, 1943, Rockefeller Foundation Records; and Report of Conference with Dr. Mehra Medical Director of the Iran Foundation, August 22, 1949, RG 2

General Correspondence, Box 467, Folder 3131. 771: Iran, 771A, Rockefeller Foundation Records.

²⁵ See, for example, September 3-9, 1949, GSH Diary.

²⁶ See, for example, July 16-29, 1949, GSH Diary; September 10-16, 1949, GSH Diary; and September 18-October 9, 1950, Guy Scull Hayes, 1949 - 1952 [April - December 1950], GSH Diary.

²⁷ August 6-12, 1949, GSH Diary.

²⁸ Mashayekhi, Mead, and Hayes, "Some Demographic Aspects"; and The Rockefeller Foundation, *Annual Report 1951* (New York: The Rockefeller Foundation, 1951), 192, 195. <https://www.rockefellerfoundation.org/annual-reports/> (accessed 5/05/2022).

²⁹ Mashayekhi, Mead, and Hayes, "Some Demographic Aspects"; RF, *Annual Report 1951*, 195; and March 11-31, 1950, GSH Diary. See also, entire GSH Diary.

³⁰ RF, *Annual Report 1951*, 192, 195.

³¹ For sources on the oil crisis and coup, see, for example, Darioush Bayandor, *Iran and the CIA: The Fall of Mosaddeq Revisited* (New York: Palgrave Macmillan, 2010); Malcolm Byrne and Mark Gasiorowski, eds., *Mohammad Mosaddeq and the 1953 Coup in Iran* (Syracuse, NY: Syracuse University Press, 2004); Farhad Diba, *Mossadegh: A Political Biography* (London: Routledge Kegan & Paul, 1986); Christopher Dietrich, *Oil Revolution: Anticolonial Elites, Sovereign Rights, and the Economic Culture of Decolonization* (Cambridge, UK: Cambridge University Press, 2017); Stephen Kinzer, *All the Shah's Men: An American Coup and the Roots of Middle East Terror* (Hoboken, NJ: John Wiley & Sons, 2008); Princess Ashraf Pahlavi, *Faces in a Mirror: Memoirs from Exile* (Englewood Cliffs, NJ: Prentice-Hall, 1980); and Ali Rahnema, *Behind the 1953 Coup in Iran: Thugs, Turncoats, Soldiers, and Spooks* (New York: Cambridge University Press, 2015).

³² April 26-May 5, 1951, Guy Scull Hayes, 1949-1952 [1951], GSH Diary.

³³ April 26-May 5, 1951, GSH Diary; and May 6-17, 1951, GSH Diary.

³⁴ April 26-May 5, 1951, GSH Diary.

³⁵ U.S. entry document for Eleanor Palamountain, August 4, 1962. New York State, Passenger and Crew Lists, 1917-1967 for Eleanor Mary Aylward Palamountain, Ancestry.com; and "A Wife Returns from Teheran," *The Free Press* (Singapore), 14 August 1951, 3. Palamountain must have remained in touch with Hayes after they both left Iran in 1951 because she listed her mailing address in the United States on her 1962 US entry document as "c/o Guy S. Hayes."

³⁶ Edgar William Irwin Palamountain, British Army Officers, 1939-1945, World War II Unit Histories and Officers, website created by Hans Houterman and Jeroen Koppes, n.d., https://www.unithistories.com/officers/Army_officers_Po1.html.

³⁷ Letter from Eleanor Palamountain for Guy S. Hayes to Dr. D. Bruce Wilson, September 19, 1949, RG 1.1, Box 1, Folder: 771 (Iran) Rural Health Training Area, 1949-1950, Rockefeller Foundation Records.

³⁸ "A Wife Returns from Tehran."

³⁹ "A Wife Returns from Tehran."

⁴⁰ Letter from Eleanor Palamountain to William McIntosh, June 11, 1951, RG 1.1, Box 1, Folder: 771 Rural Health Training Area, 1951, Rockefeller Foundation Records; Letter from Eleanor Palamountain to William McIntosh, June 19, 1951, RG 1.1, Box 1, Folder: 771 Rural Health Training Area, 1941, Rockefeller Foundation Records; Letter from Eleanor Palamountain to William McIntosh, June 23, 1951, RG 1.1, Box 1, Folder: 771 Rural Health Training Area, 1951, Rockefeller Foundation Records; Letter from Eleanor Palamountain to William McIntosh, June 25, 1951, RG 1.1, Box 1, Folder: 771 Rural Health Training Area, 1951, Rockefeller

Foundation Records; Letter from Eleanor Palamountain (“Toni”) to Guy Hayes, June 26, 1951, RG 1.1, Box 1, Folder: 771 Rural Health Training Area, 1951, Rockefeller Foundation Records; Letter from Eleanor Palamountain (“Toni”) to Guy Hayes, June 27, 1951, RG 1.1, Box 1, Folder: 771 Rural Health Training Area, 1951, Rockefeller Foundation Records; Letter from Eleanor Palamountain to William McIntosh, July 3, 1951, RG 1.1, Box 1, Folder: 771 Rural Health Training Area, 1951, Rockefeller Foundation Records; Draft letter from Eleanor Palamountain to Iranian Minister of Health, July 13, 1951, RG 1.1, Box 1, Folder: 771 Rural Health Training Area, 1951, Rockefeller Foundation Records; Letter from Eleanor Palamountain (“Toni”) to Guy Hayes, July 15, 1951, RG 1.1, Box 1, Folder: 771 Rural Health Training Area, 1951, Rockefeller Foundation Records; Cable from Eleanor Palamountain (“Toni”) to Guy Hayes, July 16, 1951, RG 1.1, Box 1, Folder: 771 Rural Health Training Area, 1951, Rockefeller Foundation Records; Transcript of phone call from Eleanor Palamountain to Dr. Morison, July 18, 1951, RG 1.1, Box 1, Folder: 771 Rural Health Training Area, 1951, Rockefeller Foundation Records; Letter from Eleanor Palamountain to the Iranian Minister of Health, July 20, 1951, RG 1.1, Box 1, Folder: 771 Rural Health Training Area, 1951, Rockefeller Foundation Records; Cable from Eleanor Palamountain to Rockefeller Foundation NY, July 20, 1951, RG 1.1, Box 1, Folder: 771 Rural Health Training Area, 1951, Rockefeller Foundation Records; Letter from Eleanor Palamountain to William McIntosh, July 21, 1951, RG 1.1, Box 1, Folder: 771 Rural Health Training Area, 1951, Rockefeller Foundation Records; and Excerpt of letter from Eleanor Palamountain to Robert Morison, July 30, 1951, RG 1.1, Box 1, Folder: 771 Rural Health Training Area, 1951, Rockefeller Foundation Records.