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P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
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PRESIDENT CLINTON ANNOUNCES NEW CANCER INITIATIVES

Over the past 25 years, the nation has made great strides in reducing cancer rates and increasing cancer survival. For example, 25 years ago, only one in 10 children survived childhood cancer and leukemia. Today, seven out of 10 children who get cancer are cured. Still, nearly 1.4 million people will be diagnosed with cancer this year, and over forty percent of Americans will have the disease over their lifetime. And, while the President noted today that death rates from breast cancer have fallen seven years in a row, studies estimate that the disease will be diagnosed in about 1.5 million American women and claim nearly half a million lives in this decade.

Today, in honor of National Breast Cancer Awareness month and the 25th anniversary of the National Cancer Act, President Clinton announced three new initiatives to fight breast cancer and to address the needs of cancer survivors. The President announced $30 million in new funding for research into the hereditary causes of breast cancer, through a collaborative initiative between the Departments of Defense and Health and Human Services. The President also announced that the National Action Plan on Breast Cancer, a public-private partnership created under the Clinton Administration, is taking its informational resources on-line. Finally, President Clinton unveiled the new Office of Cancer Survivorship in the National Cancer Institute, which will research issues relating to the physical, psychological, and economic well-being of the growing number of cancer survivors in this country.

NEW RESOURCES FOR BREAST CANCER GENETIC RESEARCH

Today, President Clinton also announced $30 million in new funding for research into the hereditary causes of breast cancer, through a collaborative effort between the Departments of Defense and Health and Human Services. This represents a 50 percent increase in funding devoted to genetic breast cancer research in the past year.

The Clinton Administration has responded to the significant threat posed by breast cancer with increased efforts in research, prevention and treatment. Since the Administration has taken office, funding for these activities has increased almost 92 percent, from $276 million in FY 1993 to an estimated $531 million in FY 1997 at the Department of Health and Human Services alone. This investment has yielded promising results, including the recent identification of two genes, BRCA1 and BRCA2, which researchers say may account for five to 10 percent of the breast cancers diagnosed each year. Researchers estimate that more than half of the women who inherit these genes will be diagnosed with breast cancer by age 50, and more than 85 percent will have a diagnosis of breast cancer by age 70. This new research initiative, a collaboration between the Department of Defense and the National Institutes of Health, will focus on a broad range of investigations related to the role of genes in the development of breast cancer. The Administration's objective is to move rapidly toward the goal of identifying high-risk women and preventing breast cancer before it strikes.

NATIONAL ACTION PLAN ON BREAST CANCER GOES ON-LINE

The President announced today that the National Action Plan on Breast Cancer (NAPBC) will take its resources on-line. The launch of the web site coincides with the three year anniversary of the creation of the National Action Plan on Breast Cancer, which catalyzes and supports innovative research and outreach projects on breast cancer, with a special emphasis on the development of public-private partnerships. The web site, coordinated by the Department of Health and Human Services in partnership with the private sector, provides answers to frequently asked questions about breast cancer and serves as a gateway to information on breast cancer clinical trials and research, breast cancer organizations and advocacy groups, educational conferences and meetings, publications, and other resources.

These new efforts are part of the Administration's comprehensive strategy to fight breast cancer in this country. For example, on October 1, 1996 the Administration announced the expansion of the National Breast and Cervical Cancer Early Detection program to all 50 states, with $102 million in federal funding for the upcoming year. The program, run by the Centers for Disease Control and Prevention, provides screening services for low income and medically underserved women. In March 1996, the FDA proposed regulations to implement the Mammography Quality Standards Act (MQSA), to ensure that mammography facilities meet high quality standards for equipment and personnel. First Lady Hillary Rodham Clinton also launched a campaign urging older women to get mammograms and promoting Medicare's coverage of mammography. In addition, the Department of Health and Human Services, the Central Intelligence Agency, and the Department of Defense have created a unique partnership to transfer defense and imaging technologies to improve early detection of breast cancer.

LAUNCHING OF THE OFFICE OF CANCER SURVIVORSHIP

President Clinton also unveiled the new Office of Cancer Survivorship at the National Cancer Institute. Recent success of cancer prevention, early detection, and treatment efforts has created a new need: research into the physical, psychological, and economic well-being of the growing number of cancer survivors. The Office of Cancer Survivorship will support research covering the range of issues facing survivors of cancer, including: long term medical and psychological effects; factors that predispose survivors to second malignancies; reproductive problems following cancer treatment; and their unique insurance and employment issues.

Today, more than 10 million Americans are cancer survivors. Seven million of these individuals are long-term survivors who were diagnosed with cancer more than five years ago. About 135,000 of these survivors are under the age of 15, and one in every 1,000 Americans between the ages of 20 and 40 is a survivor of childhood cancer. The number of breast cancer survivors is also growing, largely due to improved mammography screening and more effective treatment. The death rate from breast cancer has gone down seven years in a row. According to provisional statistics released earlier this month by the National Center for Health Statistics, there was a 7.7 percent reduction in age-adjusted breast cancer mortality from 1990 to 1995.

Clinton Administration Cancer-Related Initiatives

Since taking office, the Clinton Administration has devoted increased resources to the prevention, detection, and treatment of cancer. The following are examples of new initiatives launched by the Administration to reduce cancer rates and increase cancer survival in this country:

- **Developed a National Action Plan on Breast Cancer.** The Clinton Administration has established a National Action Plan on Breast Cancer (NAPBC), which supports innovative research and outreach projects on breast cancer, with a special emphasis on the development of public-private partnerships. On October 27, 1996, President Clinton announced the new NAPBC web site, coordinated by the Department of Health and Human Services, in partnership with the private sector. The web site provides answers to frequently asked questions about breast cancer, information on breast cancer clinical trials and research, breast cancer organizations and advocacy groups, educational conferences and meetings, publications, and other resources.

- **Helped identify and funded research on new breast cancer genes.** Breast cancer is the most commonly diagnosed cancer in American women, who face a one-in-eight lifetime risk of developing the disease. The National Institutes of Health (NIH)-funded discovery of two breast cancer genes -- BRCA1 and BRCA2 -- holds great promise for the development of new prevention strategies. On October 27, President Clinton announced new funding for research on these two genes.

- **Created the Office of Cancer Survivorship.** Recognizing the need for research into the physical, psychological, and economic well-being of the growing number of cancer survivors, on October 27, 1996, President Clinton unveiled the new Office of Cancer Survivorship at the National Cancer Institute. The Office of Cancer Survivorship will support research covering the range of issues facing survivors of cancer, including: long term medical and psychological effects; factors that predispose survivors to second malignancies; reproductive problems following cancer treatment; and their unique insurance and employment issues.

- **Increased spending on cancer by $400 million.** In FY 1997, the National Cancer Institute was funded at $2.38 billion, a $400 million increase over FY 1993. Since the Clinton Administration has taken office, funding for breast cancer research, prevention and treatment has increased by 92 percent, from about $276 million in FY 1993 to an estimated $531 million in FY 1997.

- **Accelerated approval of and expanded access to cancer drugs.** The Food and Drug Administration (FDA) has taken several steps to speed approval of cancer drugs and provide patients access to promising therapies not yet approved. For example, the FDA is using tumor shrinkage as a "surrogate marker" for effectiveness, cutting years off drug development time and months off of FDA review. This year the FDA approved *topotecan*, the first member of a promising new class of anti-tumor drugs that provides new hope to ovarian cancer patients and others. The FDA has given patients more of a voice in the drug review process by placing patient representatives on all cancer drug advisory committees. FDA is also working with other countries and manufacturers to make promising drugs approved in other countries available to patients in the United States.

- **Launched the Medicare mammography campaign.** The Clinton Administration has made it priority to educate older women about the importance of detecting breast cancer early and to inform them about Medicare coverage of mammography services. Both the President and the First Lady have appeared in TV public service announcements encouraging older women to get mammography screenings.

- **Worked to ensure quality mammography facilities.** In March 1996, the FDA proposed regulations to implement the Mammography Quality Standards Act (MQSA). The rules will ensure that the roughly 10,000 mammography facilities nationwide accredited by the FDA meet high quality standards for equipment and personnel.

- **Proposed expanding Medicare coverage for ~~prevention of cancer.~~** mammograms. In his balanced budget proposal, President Clinton proposes to expand Medicare coverage to include: annual mammograms for beneficiaries age 50 and over with no copayment or deductible requirement; and procedures for early detection of colorectal screening.

- **Launched National Breast and Cervical Cancer Early Detection Program.** The Centers for Disease Control's (CDC) National Breast and Cervical Cancer Early Detection Program offers free or low-cost mammography screening to uninsured, low-income, elderly, and minority women. The program, which has been operating in an increasing number of states over the past six years, has provided screening tests to almost one million medically underserved women. In October, 1996, the program went nationwide, with funding for all 50 states.

- **Adapted imaging technologies from the defense, space and intelligence communities to detect cancer and other diseases earlier and with greater accuracy.** The Department of Health and Human Services has been working with the Departments of Defense, the CIA, NASA, and other public and private entities to explore ways in which imaging technologies from other fields may be applied to the early detection of breast cancer.

- **Signed the Kassebaum-Kennedy legislation into law, ending pre-existing condition exclusions.** As a result of this legislation, no American will live in fear of losing their coverage just because they have a pre-existing condition. This legislation is particularly helpful for the millions of cancer victims who will no longer face the dilemma of hesitating to go to a new and better job for fear of losing their health insurance.

- **Protected children from tobacco.** President Clinton announced in August 1996, measures to eliminate easy access to tobacco products by children and to restrict advertising that makes tobacco appealing to kids. More Americans die every year from smoking related diseases than from AIDS, car accidents, murders, and suicides combined. Each day, almost 3,000 children start smoking and nearly 1,000 of them die earlier as a result.

Questions and Answers on Breast Cancer

President Clinton's Announcement

Q: What did President Clinton announce today?

A: Today, in honor of National Breast Cancer Awareness month and the 25th anniversary of the National Cancer Act, President Clinton announced three new initiatives to fight breast cancer and to address the needs of cancer survivors. The President announced $30 million in new funding for research into the hereditary causes of breast cancer through a collaborative initiative between the Departments of Defense and Health and Human Services. The President also announced that the National Action Plan on Breast Cancer, a public-private partnership created under the Clinton Administration, is taking its informational resources on-line. Finally, President Clinton unveiled the new Office of Cancer Survivorship in the National Cancer Institute, which will research issues relating to the physical, psychological, and economic well-being of the growing number of cancer survivors in this country.

Breast Cancer

Q: What is the risk of developing breast cancer?

A: The lifetime risk of developing breast cancer today is one in every eight women, up from one in every 20 women just two decades ago. In 1995 alone, approximately 182,000 new cases of breast cancer were diagnosed in women and 46,000 died from the disease. Studies estimate that breast cancer will be diagnosed in 1.5 million American women in this decade and that breast cancer will claim nearly half a million lives.

Q: What is the risk of dying from breast cancer?

A: The chances of surviving breast cancer have improved markedly in recent years. The death rate from breast cancer has gone down seven years in a row. According to figures released earlier this month by the National Center for Health Statistics, from 1989 to 1995, there was a 7.7 percent reduction in age-adjusted breast cancer mortality.

National Action Plan on Breast Cancer

Q: What is the NAPBC?

A: The National Action Plan on Breast Cancer is a key element of the Clinton Administration's strong commitment to fighting breast cancer, serving as a catalyst for national efforts in the battle against breast cancer and coordinating activities of government and non-government organizations, agencies, and individuals. The NAPBC is working to improve access to information about breast cancer for consumers, scientists and practitioners; to expand the scope of research on breast cancer; and to ensure that consumers are involved in the development of national research, education, and service delivery programs. The NAPBC has awarded over $9 million in grants for 99 innovative research and outreach projects with a special emphasis on the development of public-private partnerships.

The NAPBC is co-chaired by Susan J. Blumenthal, M.D., M.P.A., Deputy Assistant Secretary for Health (Women's Health) and Assistant Surgeon General, Department of Health and Human Services, and Fran M. Visco, Esq., President of the National Breast Cancer Coalition.

NAPBC Web Site

Q: What is the purpose of the NAPBC Web site?

A: The NAPBC Web Site provides an exciting forum for learning about the National Action Plan on Breast Cancer and gaining easy access to the most up-to-date sources of breast cancer information on the World Wide Web. The purpose of the Web site is to help educate people about breast cancer and about the national strategy to combat this deadly disease.

Q: What can people find on the Web site?

A: The NAPBC web site provides answers on frequently asked questions about breast cancer, as well as information on the NAPBC, breast cancer clinical trials and research, breast cancer organizations and advocacy groups, educational conferences, publications, and government and private resources.

Q. What are some of the unique features about the Web site?

A: The NAPBC Web site links people to a variety of information sources from all over the world in the areas of breast cancer and breast health. For example, browsers will have access to breast cancer clearinghouses maintained by universities around the country. Browsers will also have access to Mediconsult, which provides access to on-line support groups, conferences and educational materials, and to a home page for men with breast cancer, which includes news and drug information.

National Cancer Institute

Cancer Survivorship Office

Q: Why are you creating this office?

A: Because of advances in cancer research over the past 25 years, more cancer patients are surviving. There are now more than 10 million cancer survivors in this country. The improved treatments for cancers that affect children and young adults have been particularly successful, so that today 1 of every 1,000 Americans between the ages of 20 and 40 (about 100,000 people) is a cancer survivor. In addition, 25 years ago, only one in 10 children survived childhood cancer and leukemia. Today, seven out of 10 children who get cancer are cured. These survivors face long-term medical, psychological, and economic effects that stem from their cancer and its treatment. Some face second cancer years later. Some have reproductive problems stemming from their cancer or cancer treatments. Nearly all have insurance and employment issues that are unique to cancer survivors. None of these issues has been studied adequately, and the need for research on these problems and issues has become increasingly urgent as the number of survivors has increased.

Q: What kind of research will the office support?

A: In general, the kinds of projects to be supported include research on 1) long-term medical and psychosocial effects of cancer treatment; 2) factors that predispose survivors to second cancers; 3) reproductive problems following cancer treatment; and 4) insurance and employment issues unique to cancer survivors. On November 4 and 5, Dr. Anna Meadows, director of the Office of Cancer Survivorship, will hold a meeting of experts and cancer advocates. Participants will recommend a specific research agenda for the office.

Q: Where will this office be located?

A: The Office of Cancer Survivorship will be located within the NCI's Division of Cancer Treatment, Diagnosis, and Centers.

Q: How will the office be staffed?

A: Dr. Anna Meadows will be the Director of the Office of Cancer Survivorship, through an institutional personnel agreement. Support staff will be added as necessary.

Q: What are your anticipated expenditures for the Office of Cancer Survivorship?

A: Research on cancer survivorship is now a high priority for the National Cancer Institute, and the Institute plans to fund all of the outstanding research proposals in this field that it receives this year, using several million dollars of funds that are part of the increased appropriation for NCI in fiscal year 1997.

Q: What are the administrative costs associated with the new office?

A: Following the November 4 and 5 meeting, there will be discussions on the appropriate infrastructure (number and type of staff, administrative costs) that will be necessary to support the research agenda.

Q: Isn't NCI a research agency? Why are you doing outreach to survivors?

A: The National Cancer Institute is a research agency, and the new Office of Cancer Survivorship is a research office. In addition, the NCI has strong and definitive legislative mandates to conduct outreach and communications programs. These mandates originated in the National Cancer Act of 1971 and have been strengthened in subsequent revisions of the Act.

Q: Isn't this just an election year gimmick to get the vote of the 10 million cancer survivors? To appeal to special interests?

A: No. The Office of Cancer Survivorship was created because of the need for research to find answers that will help survivors. There are now more than 10 million cancer survivors in the United States. These survivors face long-term medical, psychological, and economic effects that stem from their cancer and its treatment. None of these issues has been studied adequately, and the need for research on these problems and issues has become increasingly urgent as the number of survivors has increased. Cancer survivors are obviously concerned about these issues and will work with the Office of Cancer Survivorship in developing a specific research agenda.

Breast Cancer Gene Research

Q: Where are these research funds coming from?

A: The National Cancer Institute now spends about $40 million a year on breast cancer genetic research. The new $30 million in funding will come under a collaborative initiative between the Department of Defense to the National Institutes of Health. This represents a 50 percent increase in funding devoted to genetic breast cancer research in the past year.

Q: What type of research are you already doing on the two breast cancer genes?

A: Identifying these genes in 1994 and 1995 was only the beginning. Researchers now have begun to take the next step and answer basic questions such as: What roles do BRCA1 and BRCA2 play in the development of breast and ovarian cancer? How can we best identify cancers in at-risk individuals as early as possible, when the chances for cures are greatest? How can we prevent cancer from occurring in those found to carry cancer susceptibility genes? How do they interact with hormonal and environmental factors to influence which cancers will develop and when?

Finding strategies that successfully prevent cancers in these high-risk individuals should also help prevent breast cancer in women with the standard, lifetime risk for the disease. The new funding for research on these two breast cancer genes will help us make progress towards finding new prevention and treatment strategies.

Q: What is the risk of developing breast cancer if you inherit either of these genes (BRCA1 and BRCA2)? Could you inherit both?

A: About 10 percent of the 184,000 new cases of breast cancer each year are related to alterations in BRCA1 and BRCA2. Alterations in these two genes, BRCA1 and BRCA2, are responsible for up to 90 percent of breast (and ovarian) cancers in high risk families. Women with altered versions of these genes have a 70 to 90 percent risk of developing breast cancer in their lifetimes, and an increased risk of ovarian cancer. In families with BRCA2 alterations, men also have an increased risk of breast cancer.

It is theoretically possible for an individual to inherit alterations in both BRCA1 and BRCA2, although the probability of that happening is quite low.

REVISED

PRESIDENT WILLIAM J. CLINTON
ANNOUNCEMENT OF NEW CANCER INITIATIVES
THE ROSE GARDEN
OCTOBER 27, 1996

96 OCT 28 P12 : 10

I want to thank all of you for joining me on a Sunday afternoon to discuss our efforts to fight cancer. I also want to thank Sec. Shalala and Dr. Susan Blumenthal, my Deputy Assistant Secretary for Women's Health, for their tireless service on behalf of women throughout America. Dr. Richard Klausner, the Director of the National Cancer Institute, and Dr. Steven Joseph, Assistant Sec. of Defense for Health, have both been instrumental in the efforts we are here to talk about today. I especially want to thank Jane Reese-Coulbourne for her courage and her dedication to find a cure for breast cancer. Finally, I want to thank all of the survivors and advocates here today who are fighting the battle against cancer every day, for all of us.

I believe that America is only as strong as our families are healthy. And nothing is more devastating to a family than when someone is diagnosed with a life-threatening disease like cancer. I know this from my personal experience: my step-father died of cancer, and I lost my mother, Virginia, to breast cancer just under three years ago. Vice President Gore's sister died of cancer. And this year alone, nearly 1.4 million American men, women and children will be diagnosed with cancer. I don't think there is a family in America that has not been touched by this disease.

This is the 25th anniversary of the National Cancer Act, and in those 25 years we have come a long way in our fight against cancer. This month is also Breast Cancer Awareness Month, a time to remember the terrible toll breast cancer has taken, to assess our progress and to redouble our efforts to find a cure. That is why I wanted us to come together today: to talk about the new steps we are taking to fight all cancer . . . and breast cancer in particular.

Since I took office, this Administration has mounted a comprehensive campaign to prevent and treat cancer. We are working to get tobacco out of our children's lives forever. We have accelerated FDA approval of cancer drugs and made it easier for patients to obtain promising therapies before they are formally approved. The Department of Health and Human Services, the Department of Defense, NASA and the CIA have joined forces to develop cutting edge imaging technology for the early detection of cancer. Most important of all, we have increased spending on cancer research, treatment and prevention by $400 million.

In the battle against breast cancer, we have increased funding for research and prevention by nearly 80% since 1993. We launched a public awareness campaign to encourage older women to use Medicare to have mammograms. And my balanced budget goes even further -- it will guarantee free annual mammograms to Medicare beneficiaries, removing financial barriers that prevent some women from obtaining this vitally important test.

We are making progress. The survival rate for cancer has gone up -- 7 out of 10 children with cancer survive it -- that's up from 1 out of 10 twenty-five years ago. The death rate for breast cancer has gone down every year in the last seven -- it has dropped by nearly 8% since 1990. Just last week, the NIH announced a milestone in the Human Genome Project, which is identifying the location and function of nearly every human gene. We have now mapped out 20% of all human genes -- and anyone can use that map on the Internet. Soon, we will know the genes that contribute to cancer and our genetic predisposition to inherit it -- and possibly prevent it before it strikes.

But as far as we have come, we still have far to go. We must continue to build on our progress and strengthen our efforts against cancer. Today, I am announcing three new steps that will bring us closer to a cure and improve the lives of those who do survive.

First, ~~we know that early detection can make all the difference in a woman's battle against breast cancer.~~ We must use all the technology at our disposal to give women the information they need -- and unite the forces of the public and private sectors to achieve this goal. That is why I am pleased to announce the launch of the new National Action Plan on Breast Cancer Website on the Internet. This easily accessible website -- the address is right here -- will answer the questions women have about early detection, clinical trials, and much more.

Second, we know that genetic research may be the key to understanding -- and curing -- breast cancer. In the last two years, scientists have discovered two genes that indicate susceptibility to breast cancer. This remarkable discovery is giving hope to women everywhere. Last month I signed a budget that reflects our values and devotes substantial resources to cancer research. Today, I am announcing that we are directing $30 million out of that new budget to support and expand breast cancer genetic research at hospitals, universities and labs across the country. This step -- which represents a major increase in breast cancer genetic research -- will ensure the development of this promising new research and bring us that much closer to a cure.

Finally, there is no greater proof of the progress we have made than the more than 10 million Americans who have survived cancer. Many have special psychological, physical and health care counseling needs that we are only beginning to understand -- some face recurrence of their illness; some can't get health insurance. I am proud to have passed landmark legislation to guarantee that cancer survivors will no longer live in fear of losing their health care coverage because they have a pre-existing condition. And today I am announcing that this Friday, November 1st, the National Cancer Institute will open its new Office of Cancer Survivorship. This office will support much needed research that will help cancer survivors deal with the problems they face even after their cancer is cured.

With these steps we are taking today, we are putting science at the service of our families, and saying that we will do whatever it takes in our fight to find a cure for cancer, and to improve the lives of those who do survive.

Just a few moments ago in the Oval Office, I signed a piece of the Ribbon of Hope. This yellow ribbon, which is already over 750 feet long in its entirety, has been signed by more than 10,000 cancer survivors around the world. My wife Hillary was the first person to sign the Ribbon, and I was honored to place my own signature alongside those of so many courageous people. This ribbon is a symbol of the hope that sustains people in their struggle with cancer . . . but it is also a symbol of the progress we have made, and the progress still to come in our fight against cancer.

And now, I would like to present the piece of the Ribbon of Hope that I signed to Erin Schraibman [shrayb-man].

Thank you and God bless you all.

DRAFT

PRESIDENT CLINTON ANNOUNCES NEW CANCER INITIATIVES

Over the past 25 years, the nation has made great strides in reducing cancer rates and increasing cancer survival. For example, 25 years ago, only one in 10 children survived childhood cancer and leukemia. Today, seven out of 10 children who get cancer are cured. Still, nearly 1.5 million people will be diagnosed with cancer this year, and over forty percent of Americans will have the disease over their lifetime.

Today, in honor of National Breast Cancer Awareness month and the 25th anniversary of the National Cancer Act, President Clinton announced three new initiatives to fight breast cancer and to address the needs of cancer survivors. The President announced $___ million in new funding for research into the hereditary causes of breast cancer, focused on two recently identified breast cancer genes. The President also announced that the National Action Plan on Breast Cancer, a public-private partnership created under the Clinton Administration, is taking its informational resources on-line. Finally, President Clinton unveiled the new Office of Cancer Survivorship in the National Cancer Institute, which will research issues relating to the physical, psychological, and economic well-being of the growing number of cancer survivors in this country.

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LAUNCHING OF THE OFFICE OF CANCER SURVIVORSHIP

President Clinton also announced the new Office of Cancer Survivorship at the National Cancer Institute. Recent success of cancer prevention, early detection, and treatment efforts has created a new need: research into the physical, psychological, and economic well-being of the growing number of cancer survivors.

Today, more than 10 million Americans are cancer survivors. Seven million of these individuals are long-term survivors who were diagnosed with cancer more than five years ago. About 135,000 of these survivors are under the age of 15, and one in every 1,000 Americans between the ages of 20 and 40 is a survivor of childhood cancer. The number of breast cancer survivors is also growing. For the first time, the overall death rate from breast cancer has fallen among American women, largely due to improved mammography screening and more effective treatment. From 1989 to 1993, breast cancer death rates declined 5 percent overall, and 15 percent among women below the age of 50.

The Office of Cancer Survivorship will support research covering the range of issues facing survivors of cancer, including: long term medical and psychological effects; factors that predispose survivors to second malignancies; reproductive problems following cancer treatment; and their unique insurance and employment issues.

NEW RESOURCES FOR BREAST CANCER GENE MAPPING

Today, President Clinton also announced $___ in new funding for research into the hereditary causes of breast cancer, focusing on the recently identified breast cancer susceptibility genes, BRCA1 and BRCA2 discovered in 1994 and ___.

Since taking office, the Clinton Administration has increased breast cancer research funding at the National Institutes Health by 83 percent, from $229 million in FY 1993, to $420 million in FY 1997. This investment has yielded promising results, including the identification of the two breast cancer susceptibility genes, which researchers say may account for five to 10 percent of the breast cancers diagnosed each year. Researchers estimate that more than half of the women who inherit these genes will be diagnosed with breast cancer by age 50, and more than 85 percent will have a diagnosis of breast cancer by age 70. This new research project, sponsored by the Department of Defense and the National Institutes of Health, will help determine the role of BRCA1 and BRCA2 in the development of breast cancer and move rapidly toward the goal of identifying high-risk women and helping them to prevent breast cancer before it strikes.

The Clinton Administration has responded to the significant threat posed by breast cancer with increased efforts in research, prevention and treatment. Since the Administration has taken office, funding for these efforts has increased from about $273 million in FY 1993 to an estimated $531 million in FY 1997. In March 1996, the FDA issued proposed regulations to implement the Mammography Quality Standards Act (MQSA), to ensure that mammography facilities meet high quality standards for equipment and personnel. On Oct. 1, 1996 the Administration announced the expansion of the National Breast and Cervical Cancer Early Detection program to all 50 states, with $102 million in federal funding for the upcoming year. The program, run by the Centers for Disease Control and Prevention, provides screening services for low income and medically underserved women. In addition, the Department of Health and Human Services, the Central Intelligence Agency, and the Department of Defense have created a unique partnership to transfer defense imaging technologies to improve early detection of breast cancer.

QUESTIONS TO BE ANSWERED

Office on Women's Health

1. Why was this web site created?
2. What is the purpose of the web site?
3. Is the web site a government project, funded with government money?

National Cancer Institute

Cancer Survivorship Office

1. Why are you creating this office?
2. Isn't NCI a research agency – why are you doing outreach to survivors?
3. Is this a way to appease survivors who are so politically powerful in this country?

Breast Cancer Genes

1. Where are these research funds coming from?
2. What type of research are you already doing on the two breast cancer genes?
3. When was the BRCA2 discovered?
4. What is the risk of developing breast cancer is you inherit either of these genes? Could you inherit both?

HHS NEWS

DRAFT

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

FOR IMMEDIATE RELEASE
Monday, Oct. 28, 1996

Contact: HHS Press Office
(202) 690-6343
Office on Women's Health
(202) 690-7650

President Clinton Announces National Action Plan on Breast Cancer Internet Web Site

On Sunday, October 27, President Clinton launched the National Action Plan on Breast Cancer (NAPBC) Internet web site. The web site, coordinated by the Department of Health and Human Services Office on Women's Health, is designed to serve as an information clearinghouse on breast cancer treatment, research, and prevention.

The NAPBC web site includes information on the goals, accomplishments, organization, activities, and products of National Action Plan on Breast Cancer. The site also provides answers on frequently asked questions about breast cancer, information on breast cancer clinical trials and research, breast cancer organizations and advocacy groups, educational conferences and meetings, publications, and other resources.

"This web site provides an important avenue to deliver the latest information on breast cancer to a wide audience," said Secretary Shalala. "Now, more Americans will have ready access to information that can help to save lives."

The launch of the web site coincides with the three year anniversary of the creation of the National Action Plan on Breast Cancer. In October 1993, the National Breast Cancer Coalition presented a 2.6 million signature petition to President Clinton calling for a coordinated national strategy to combat breast cancer through public/private partnerships. In response, President Clinton initiated the National Action Plan on Breast Cancer, asking Secretary Shalala to serve as the Administration's lead in coordinating a breast cancer research, treatment and prevention strategy. In December 1993, Secretary Shalala convened a conference to establish the National Action Plan on Breast Cancer.

- More -

Withdrawal/Redaction Marker
Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. paper	Personal (Partial) (3 pages)	10/25/1996	P6/b(6)

COLLECTION:
Clinton Presidential Records
Domestic Policy Council
Jennifer Klein
OA/Box Number: 10856

FOLDER TITLE:
Breast Cancer/Cancer Event

2014-0209-S
ms765

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [a)(5) of the PRA]
P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.
PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).
RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

b(1) National security classified information [(b)(1) of the FOIA]
b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

[001]

EXECUTIVE OFFICE OF THE PRESIDENT

25-Oct-1996 11:26am

TO: Sarah Farnsworth
TO: Jennifer L. Klein
TO: Barbara D. Woolley
TO: Patricia F. Lewis

FROM: Mary A. Dixon
Office of Public Liaison

SUBJECT: All five survivors chosen -- here is the list

Patrick (b)(6)
(b)(6)

Patrick (b)(6), 37, is a a cancer survivor of 16 years. He is a legal assistant with the lawfirm of Shearman & Sterling. He was diagnosed in 1980 with a rare soft tissue tumor (paraganglioma-a tumor on the nerve system) where it was removed successfully. Over the next few years, Patrick found tumors in different areas of his body--the pelvis, cervical vertabra, and throat. All were slow growing tumors. Since 1993, he is in remission and in good health. Patrick is an advocate for a well funded cancer program.

Olda (b)(6)
(b)(6)

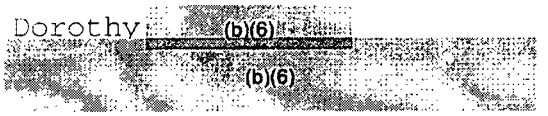
Olda (b)(6), 54, the mother of one daughter, is a breast cancer survivor of three years. She was treated at Johns Hopkins Hospital in Baltimore after a mammography detected a lump in her left breast. She had a mastectomy and has been recovering very well. Ms. (b)(6) said that the cancer changed her life and now she is dedicted to teaching others about cancer. As a member of The Center of the Hispanic Community in (b)(6) Ms. (b)(6) teaches others about the importance of early detection and mammograms.

Jane Reese-Coulbourne
350 Cloude's Mill Drive
Alexandria, VA 22304

Jane Reese-Coulbourne, 42, is a breast cancer survivor of six years. She discovered a lump in her right breast during self-examination. Her cancer was an advance stage and considered inoperable. She joined the FLAC clinical trial at the National Cancer Institute where she has received all of her treatments. She went through eight rounds of chemotherapy, eight weeks of radiation and fo

and a half years of tamoxifen treatments. A chemical engineer, Ms. Reese-Coulbourne is now a full-time breast cancer advocate, serving as executi vice president of the National Breast Cancer Coalition, representing over 350 member organizations involved with breast cancer. She has testified before Congress on such issues as the Department of Defense breast research program a health care reform. She is a member of the streeing committee of the National Action Plan on Breast Cancer.

Dorothy (b)(6)



Dorothy (b)(6) 72, retired U.S. Navy civilian worker and realtor, is a brea cancer survivor for 19 years. A lump was detected in her left breast during a regular checkup. Following the checkup, a biopsy was performed and her

tumor was diagnosed as cancer. Her surgery was performed at the National Institutes of Health. She has been recovering very well through the years and now a part-time student at the University of [redacted] She is the mother of on son and grandmother of four.
Erin Schraibman
2295 Stratton Drive
Rockville, MD 20854

Erin Schraibman, 9, is a seven year cancer survivor. She was diagnosed with acute lymphatic leukemia (known as childhood leukemia) at 2 and a half years o and has been in remission more than six and a half years. Erin is doing well a is very athletic.

E X E C U T I V E O F F I C E O F T H E P R E S I D E

25-Oct-1996 04:56pm

TO: (See Below)

FROM: Sarah Farnsworth
Scheduling and Advance

SUBJECT: sunday sequence

FINAL WHSO LAYOUT
a/o 10/25/96; SFarnsworth

ANNOUNCEMENT OF BREAST CANCER RESEARCH &
CANCER SURVIVORS INITIATIVES
Sunday, October 27, 1996
Rose Garden (Rain Site: East Room) Max. 180/Open Press

12:15 p.m. IN PLACE TIME. East Visitor Gate opens for guest arrival a. Guests proceed to the East Garden to hold. List coordinator: Kim

12:15 p.m. Stage participants, Oval Office participants arrive at the NW Gate and hold in the Roosevelt Room. Contact: Barbara Woolley, Sondra Seba * Refer to separate list.

12:40 p.m. (Approx. time) Guests are seated in the Rose Garden by Social Aides.
* Refer to separate reserved seating list

12:45 p.m.-12:55 p.m. EVENT BRIEFING - Oval Office
Participants: Alexis Herman, Betsy Myers

1:00 p.m.-
1:10 p.m. GREET STAGE PARTICIPANTS & SIGN RIBBON OF HOPE
Oval Office/WH Photo Only
- Approx. 10 participants. * Refer to separate list.
- After greeting the participants, The President will sign the "Ribbon of Hope" and take a group photo.
- After greeting, non-stage participants are escorted to seats.

1:10 p.m. ANNOUNCEMENT
Rose Garden/Open Press

- THE PRESIDENT is announced and proceeds to Colonnade steps.

- Susan Blumenthal delivers remarks and introduces Jane Reese-Coulbourne (Alexandria, VA), breast cancer survivor.

- Ms. Coulbourne delivers brief remarks and

introduces the President.

- THE PRESIDENT makes remarks and presents the "Ribbon of Hope" to Erin Schraibman (Rockville, MD), 9 year old cancer survivor.

NOTE: The WEB site address will be on an easel tbd.
Contact: A. Edwards

- Following remarks, THE PRESIDENT exits stage right and works ropeline.

1:40 p.m. THE PRESIDENT returns to the Oval Office before proceeding to the South Lawn for helicopter departure.

GUEST NOTE: Guests will have the option to watch the helicopter departure from a roped off area near C9 or depart via SW Gate.
USHERS NOTE: roped off area needed.

OVAL OFFICE PARTICIPANTS (** stage participants)
- THE PRESIDENT**
- Susan Blumenthal, Deputy Asst. Sec. for Health**
- Rick Klausner, Director, National Cancer Institute**
- Dr. Varmus, NIH
- tbd rep for Dept of Defense**
- Ellen Stovall, Executive Director, National Coalition for Cancer Survivorship (NCCS)
- Elizabeth Clark, Director of NCCS

Cancer Survivors and Family
- Jane Reese-Coulbourne (Alexandria, VA) **
- Dorothy Bankhead (Ft. Washington, MD)**
- Patrick Garbe, (Fairfield, CT) **
  - Mary Garbe, wife of Patrick
- Erin Schraibman (9yr old)**
  - Schraibman Family (Sandra & Julian are the parents; Jessica, sister)
- Olda Mondragon (Baltimore, MD)**

SET UP NOTES: No stage in front of Colonnade steps. "stage participants" will stand on toe marks on steps; Blue Goose; POTUS

and US flags; easel; stanchions in front of stage; 180 chairs; Colonnade closed to non-manifested guests/staff; roped off area by C9 for helo dept; cutaway on north side; announce from Colonnade.

RESERVED SEATING

- Non-stage participants from Oval Office
- Fran Visco, President/Director, NBCC
- Schraibman Family (3)
- Anna Meadows, Director, Office of Cancer Survivorship
- Sherry Lansing, CEO, Friends of Cancer Research
- Ellen Sigal, Chair, Friends of Cancer Research, and National Cancer Advisory Board
- Bernard Rapoport, Chairman, University of Texas Board of Regents, Friends of CR
- Clara Powell, NBCC (Md)
- Coulbourne Family (3)
- tbd

Distribution:

TO: Betsy Myers
TO: Kim B. Widdess
TO: Barbara D. Woolley
TO: Lisa Jordan Tamagni
TO: Jeremy M. Gaines
TO: Anne M. Edwards
TO: Paul K. Engskov
TO: Kathy McKiernan
TO: Karin J. Abramson
TO: Karin Kullman
TO: Nancy V. Hernreich
TO: Laura A. Graham
TO: Rebecca A. Cameron
TO: Stephanie Streett
TO: Betty Currie
TO: Mary A. Dixon
TO: Jennifer L. Klein
TO: Mary Ellen Glynn
TO: Elizabeth E. Drye
TO: Nancy-Ann E. Min
TO: Ann M. Cattalini
TO: Anne E. McGuire
TO: Tracy B. LaBrecque
TO: Robyn G. Dickey
TO: Kenneth Mills
TO: Jennifer L. Klein
TO: Nicole R. Rabner
TO: Lisa Ross

REMARKS - DR. SUSAN BLUMENTHAL

GOOD AFTERNOON. I'M DR. SUSAN BLUMENTHAL AND I AM HONORED TO WELCOME ALL OF YOU HERE TODAY. WE HAVE AT LEAST ONE THING IN COMMON. CANCER HAS TOUCHED OUR LIVES. 20 YEARS AGO, MY MOTHER DIED OF BREAST CANCER. I WAS A CHILD WHEN SHE WAS FIRST DIAGNOSED AND I REMEMBER THAT WE COULDN'T SAY THE WORD "CANCER" OUT LOUD OR SHARE HER STRUGGLE WITH OTHERS.

MUCH HAS CHANGED SINCE THEN. THE STIGMA HAS BEEN SHATTERED, KNOWLEDGE HAS BEEN EXPANDED, AND WE NOW HAVE AN ENTIRE GENERATION OF CITIZENS WHO CAN CALL THEMSELVES CANCER SURVIVORS.

AND THIS PROGRESS COULDN'T HAVE HAPPENED WITHOUT THE LEADERSHIP OF THE PEOPLE HERE TODAY—THE COURAGEOUS AND DEDICATED AMERICANS WHO HAVE SURVIVED CANCER, WHO ARE RAISING AWARENESS ABOUT THE DISEASE, WORKING AT THE LABORATORY BENCH, AT THE CLINICAL BEDSIDE, IN OUR FEDERAL GOVERNMENT, AND IN OUR COMMUNITIES. AND IT COULDN'T HAVE HAPPENED WITHOUT LEADERS LIKE SECRETARY SHALALA AND PRESIDENT CLINTON.

ON A PERSONAL NOTE, LET ME SAY: AS A WOMAN, AS A PHYSICIAN, AND AS THE COUNTRY'S FIRST DEPUTY ASSISTANT SECRETARY FOR WOMEN'S HEALTH, I AM SO PROUD TO SERVE WITH A PRESIDENT WHO HAS MADE IMPROVING THE HEALTH OF AMERICAN WOMEN A TOP PRIORITY.

UNDER THE LEADERSHIP OF THIS PRESIDENT, WE'RE DRAMATICALLY INCREASING FUNDING FOR WOMEN'S HEALTH, PUTTING REAL FINANCIAL MUSCLE BEHIND OUR COMMITMENT. WE ARE PUTTING WOMEN'S ISSUES ON THE FRONT BURNER WHERE THEY BELONG. FROM INCLUDING WOMEN IN CLINICAL TRIALS TO EMPOWERING WOMEN TO MAKE SMART HEALTH CHOICES, TO ENSURING THAT TODAY'S HEALTH CARE PROFESSIONALS ARE TRAINED TO ADDRESS WOMEN'S HEALTH CARE NEEDS. AND, WE'RE WAGING AN ALL-OUT ASSAULT ON BREAST CANCER WITH THE PRESIDENT'S NATIONAL ACTION PLAN, A PUBLIC/PRIVATE PARTNERSHIP WHICH IS HELPING US FIGHT THE DISEASE ON MANY FRONTS BY INCREASING RESEARCH, IMPROVING SERVICE DELIVERY, AND ENHANCING EDUCATION.

AND, THIS COULDN'T HAVE HAPPENED WITHOUT HEROINES LIKE: - JANE REESE-COULBOURNE. BY THE TIME JANE DISCOVERED HER CANCER, SHE WAS TOLD THAT IT WAS ALREADY INOPERABLE. BUT SHE WOULD NOT, COULD NOT, AND DID NOT GIVE UP. SHE KEPT ON FIGHTING, FIGHTING EVERY DAY. FIGHTING THROUGH CHEMOTHERAPY, THROUGH RADIATION, THROUGH TAMOXIFEN TREATMENTS. AND, ARMED WITH TWO POWERFUL WEAPONS, GREAT SCIENCE AND UNYIELDING PERSONAL COURAGE, SHE'S WINNING THE BATTLE. TODAY, SHE IS INSPIRING OTHERS TO DO THE SAME.

SHE IS THE EXECUTIVE VICE-PRESIDENT OF THE NATIONAL BREAST CANCER COALITION, A MEMBER OF THE STEERING COMMITTEE OF THE NATIONAL ACTION PLAN ON BREAST CANCER, AND A FULL-TIME ACTIVIST AND ADVOCATE, FIGHTING FOR THE DAY WHEN OUR NATION'S CHILDREN WILL HAVE TO TURN TO THE HISTORY BOOKS TO LEARN THAT THERE EVER WAS A DISEASE CALLED BREAST CANCER.

SHE IS AN INSPIRATION TO US ALL.

I'M PROUD TO INTRODUCE -- JANE REESE-COULBOURNE.

ROUTING SLIP

DATE: 10 / 16 / 96

FROM: Stephanie Streett and Anne Hawley
Deputy Assistants to the President and Directors of Scheduling

SUBJECT: Launching the National Women's Health Information Center

Don Baer	✓	Mack McLarty	
Peg Cusack		Leon Panetta	
Rahm Emanuel		Jack Quinn	
Jack Gibbons		Carol Rasco	
Laura Graham	✓	Paige Reffe	
Marcia Hale		Peter Selfridge	✓
Alexis Herman		Patti Solis	✓
Nancy Hernreich		Doug Sosnik	
Kitty Higgins	✓	G. Stephanopoulos	
John Hilley		Todd Stern	
Harold Ickes		Ann Stock	
Ron Klain		Kim Tilley	✓
Anthony Lake		Jodie Torkelson	
Evelyn Lieberman		Laura Tyson	
Bruce Lindsey		Melanne Verveer	
Mike McCurry	✓	Michael Waldman	
Lorrie McHugh		Maggie Williams	
		David Beaubaire	✓
		Susan Blumenthal	✓
		Jennifer Klein	✓

FILE: Regret w/surrogate

COMMENTS:

CC: Anne
Nicole

Scheduling Proposal **September 23, 1996**

___Accept ✓ Regret w/surrogate ___Pending

Ann J Lewis

TO: Stephanie Streett
Anne Walley

FROM: Susan J. Blumenthal, M.D., M.P.A.
Deputy Assistant Secretary for Health (Women's Health)
Assistant Surgeon General
Department of Health and Human Services

Ann Lewis
Deputy Campaign Manager/ Communications Director

REQUEST: To demonstrate the Clinton Administration's commitment to improving women's health by having the President launch the National Women's Health Information Center sometime during the last two weeks of October 1996.

PURPOSE: The National Women's Health Information Center (NWHIC) will be the premiere Federal clearinghouse for women's health information accessible to consumers, health care professionals, researchers and the media through a toll-free telephone number (1-800-994-WOMAN) and the Internet. The NWHIC will function as the single point of entry to women's health information, from more than 100 Federal health clearinghouses and hundreds of private sector resources. It will also have special health information for women in the military. The NWHIC will have interactive functions allowing consumers and health care professionals to ask health questions and register for meetings on women's health. It will have a news clipping service, research abstracts, and other cutting edge information services. We expect the NWHIC to respond to over one million requests during its first year. This center represents a tremendous new resource for America's women and their health care providers. The NWHIC is the result of a collaboration between the U.S. Public Health Service's Office on Women's Health within the Department of Health and Human and the U.S. Department of Defense, highlighting a partnership between two federal agencies to acheive a common goal - improving the health of American women.

BACKGROUND: Until recently, women's health was seriously neglected in research, health care service delivery, and public and health care professional education. The Clinton Administration has made women's health a top national priority. Women previously have had no place to turn for cutting edge information about their health. There is now a vast array of information, research results and service delivery programs focused on women's health, but which currently are difficult to identify and access. The NWHIC will function as a vital tool to organize and to disseminate this crucial information to the general public, health care professionals, researchers, and others interested in women's health.

PREVIOUS PARTICIPATION: None

DATE & TIME: Anytime during the last two weeks of October.

BRIEFING TIME: 5 minutes

LOCATION: The White House or at any location across the country.

PARTICIPANTS: Susan J. Blumenthal, M.D., M.P.A.
Deputy Assistant Secretary for Health (Women's Health)
Assistant Surgeon General

Brigadier General Russ Zajtchuk
Medical Corp Commander
U. S. Army Medical Research and Materiel Command

Women of different age groups

OUTLINE EVENTS: To be announced; potentially could be launched at a site with Internet OF access with the President logging on and demonstrating the wealth of information available.

REMARKS REQUIRED: Speech Writer

MEDIA COVERAGE: Open

CONTACT: Susan J. Blumenthal, M.D., M.P.A.,
Deputy Assistant Secretary for Health (Women's Health)
Assistant Surgeon General
(202) 690-7650

BACKGROUND

U.S. PUBLIC HEALTH SERVICE'S OFFICE ON WOMEN'S HEALTH TO ANNOUNCE THE CREATION OF "NATIONAL CENTERS OF EXCELLENCE IN WOMEN'S HEALTH", INNOVATIVE, MODEL PROGRAMS TO IMPROVE WOMEN'S HEALTH CARE

In a sweeping move that should significantly improve the health of American women, the U.S. Public Health Service's Office on Women's Health, within the Department of Health and Human Services, will announce the establishment of National Centers of Excellence in Women's Health, to serve as national models to improve the health care of American women.

The National Centers of Excellence in Women's Health mark an innovative new approach to meeting women's health needs, by integrating comprehensive research programs, health care services, public education and health care professional training at academic institutions and linking them with health care services in the community.

"The National Centers for Excellence will provide one-stop shopping for women's health care. Women will have all of their health care needs met in one place by having access to comprehensive services and resources, said Susan J. Blumenthal, M.D., M.P.A., Deputy Assistant Secretary for Health (Women's Health) and Assistant Surgeon General.

Additionally, these Centers will develop a multidisciplinary research agenda across medical specialties; will focus medical education on gender differences in the causes, treatment and prevention of disease; and will use new information technologies to bring cutting edge women's health information to the public and health care providers. The Centers will also develop leadership strategies to foster the recruitment, retention and promotion of women in academic medicine.

Until six years ago, women's health was seriously neglected in research, health care service delivery, and public and health care professional education. Since 1990, a new national focus on women's health, reflected in numerous initiatives in the public and private sectors, is brightening the prospects for a healthier future for American women. The purpose of the National Centers for Excellence is to facilitate this progress through increased knowledge, improved treatment and prevention of diseases in women.

The U.S. PHS OWH is providing $1 million dollars to support these national models that will serve as a template for the establishment of other centers nationwide in the future. The National Centers of Excellence in Women's Health represent a public-private partnership between the U.S. PHS Office on Women's Health and academic centers across the country.

The Centers for Excellence will provide the following women's health resources and services:

- An integrated one-stop shopping center for the delivery of clinical health care services to women.

- Emphasis on preventive care.
- Emphasis on psychosocial issues in health.
- A research agenda on women's health issues.
- Strategies to promote women's participation in clinical research trials
- Coordination and linkage between clinical services in academic centers and surrounding communities.
- Educational programs and materials for the general public and health care professionals on women's health, using new cutting edge information technologies and telemedicine approaches.
- The integration of a women's health curriculum into medical school education.
- A leadership plan to foster the recruitment, retention and promotion of women in academic medical careers.
- Networking within the community to form alliances with business groups, consumer groups, scientific organizations and public policy leaders.

The PHS Office on Women's Health is the government's champion and focal point for women's health issues, providing national leadership in advancing women's health in public policy, research and education, and acts as a catalyst for developing new national and regional initiatives to improve women's health.

###

THE NATIONAL WOMEN'S HEALTH INFORMATION CENTER

Recognizing the urgent need for easy access to a broad range of women's health issues, the U.S. Public Health Service's Office on Women's Health within the Department of Health and Human Services has joined in partnership with the Department of Defense, to establish the National Women's Health Information Center (NWHIC). The NWHIC provides a vital resource for the public, health care professionals, policymakers, researchers, and women in the military to enhance their knowledge about women's health issues. With access through both a toll-free telephone line and through the Internet, the NWHIC acts as a Federal "women's health central," reducing to a single point of entry, the vast array of information available through the more than 80 Federal health clearinghouses and hundreds of private sector organization resources.

Serving as a switching house and single point of contact, the NWHIC does not replicate or supplant the important information dissemination functions of existing Federal programs. Rather, it simplifies the identification and ordering of existing women's health information within Federal organizations. Additionally, the NWHIC has an interactive component, permitting consumers and health care professionals to ask health questions, to register for meetings on women's health, and to gain access to interactive services on a broad range of women's health issues.

The NWHIC will offer:

- **Simplicity of access to information by telephone or electronically.** By telephone, callers place a toll-free call to 1-800-99-4-WOMAN and are connected to a knowledgeable person with access to the most up-to-date Federal resources available on women's health. Similarly, dialing through the Internet, callers can access a broad range of Federal and private sector health information by using simple-to-follow, user-friendly screen displays. Whether accessed by phone or by computer modem, the NWHIC allows Internet users or callers to order women's health materials from across the Federal government and learn of private sector sources of information as well through a single call. If further information is needed, callers would be directed to the most appropriate source for accurate information on the particular topic. Researchers and clinicians would be able to gain access to grant announcements, databases, opportunities for collaboration, and direction to appropriate agency staff who can respond to specific questions.

- **How it works.** A call to the 1-800 phone line with a specific request for women's health information will not require additional calls around the Federal government. The NWHIC staff will help guide the caller to a precise explanation of the specific types of information needed, take appropriate mailing information from the caller, and provide referrals to specific agencies or program offices, should the caller so request. The NWHIC will then make the information request for the caller, forwarding the request either electronically or by phone to the appropriate Federal information sources for direct fulfillment and follow-up, if needed.

- **Listing of up-to-date consumer and scientific news, information, and reports.** The NWHIC will maintain a broad range of consumer and health care professional-relevant information on women's health issues and relevant research findings. Consumers will have information on the latest women's health news from the field of research, including an electronic "clipping service" on recent scientific developments in women's health. Users will have the ability to read the information on-line or download the material to their home computer or to other remote locations, including the Regional Women's Health Coordinators' offices.

- **Answers to frequently asked questions (FAQs).** The NWHIC will provide on-line viewable and downloadable answers to questions that women frequently have about their health. The message will be clear that the responses provided are not intended to substitute for medical advice from a woman's health care professional. However, the responses to FAQs will help explain conflicting data or research findings that may be confusing to many women. By reviewing the types of information requests sought both on-line and through the 1-800 telephone system, the NWHIC will regularly update the FAQs to reflect current issues about which women have the greatest number of questions.

The NWHIC will:

Be open for business through both its toll-free telephone service and its Internet home page in summer, 1996. It is a dynamic program, with new additions and changes occurring regularly. We hope that you will take advantage of its services, bringing women, researchers, health care professionals, the media, and policymakers state-of-the-art information that can help in the understanding, diagnosis, treatment, and prevention of illnesses in women. We also hope you will let us know if there are gaps in our resources and provide us with any suggestions for interactive components or improvements in the system. We hope the NWHIC will provide a valuable and comprehensive national resource for women, their families, health care providers, and researchers.

For more information, contact:

U.S. Public Health Service's Office on Women's Health
Department of Health and Human Services
200 Independence Avenue, S.W., Room 712-E
Washington, D.C. 20201
(202) 690-7650 (phone)
(202) 401-4005 (fax)
owh@4women.org (e-mail)

Similarly, a contact through the NWHIC Internet home page will yield information on women's health. In this case, the information is available to anyone with access to a computer with a modem that can link to the Internet -- the "information superhighway." Callers will be able to read and download a wide variety of women's health-related material developed by the Department of Health and Human Services and other Federal agencies. In some cases, longer documents would be summarized; copies could be ordered electronically right from the computer. The electronic capacity will grow over time based on a sophisticated tracking mechanism to help inform us about gaps in information resources available to the public, health care professionals, and researchers. This will enable us to develop new information resources to address these unmet needs by providing the best scientific information available.

The NWHIC's unique on-line service will offer:

- **Referrals to sources of women's health information.** The NWHIC is developing a database of approximately 3,000-5,000 organizations at the National, State and local levels, and electronic Internet sites that provide useful, relevant, and understandable health and medical knowledge. Each site is individually reviewed and evaluated for inclusion in the database. Typical listings will contain the name of the resource, a brief description of information available, and how to make contact. Customized database searches -- where a caller can broaden or limit the types of specific information requested by date, source of information, or topic -- will be available through the Internet home page, or by contacting information specialists at the NWHIC.

  Sites and Organizations Include:

  - Federal health agencies (including the most appropriate information sources at both the national and regional levels for the public and health care professionals)
  - Federal health clearinghouses
  - Internet Web Sites related to women's health in both the public and private sectors
  - Major private sector health organizations at the national, regional, state, and local levels, with increased capacity in this area to be developed over time

- **Calendar of national, regional and local meetings.** The NWHIC will maintain a searchable database of major national health and women's health professional meetings and national health observances. Listings will include meeting name, date and location, sponsor,

point of contact, and a brief description of the meeting and its relevance to women's health issues and topics.

- **Registration for meetings, events and new information.** The NWHIC will also provide a vehicle for organizations to offer information about events, training programs, research opportunities, or resources for inclusion in the database. Items submitted for inclusion will be reviewed for duplication, timeliness, and relevance to women's health.

- **Listing of up-to-date consumer and scientific news, information, and reports.** The NWHIC will maintain a broad range of consumer and health care professional-relevant information on women's health issues and relevant research findings. Consumers will have information on the latest women's health news from the field of research, including an electronic "clipping service" on recent scientific developments in women's health. Users will have the ability to read the information on-line or download the material to their home computer or to other remote locations, including the Regional Women's Health Coordinators' offices.

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For more information, contact:

U.S. Public Health Service's Office on Women's Health
Department of Health and Human Services
200 Independence Avenue, S.W., Room 712-E
Washington, D.C. 20201
(202) 690-7650 (phone)
(202) 401-4005 (fax)
owh@4woman.org (e-mail)

can't deal w/ this from our end because this is an official event (asking people to vote in general) - but it is a good idea

SCHEDULE PROPOSAL **TODAY'S DATE: 10/09/96**

____ACCEPT ____REGRET ____PENDING

TO: Stephanie Streett
Director of Scheduling

FROM: Ann Lewis, C/G'96 Deputy Campaign Manager, Communications Director

THROUGH: Carrie Goux, C/G'96 Director of Scheduling and Advance

PURPOSE: 90 second recorded message to military personnel and other US citizens living overseas for U.S. Department of Defenses Federal Voting Assistance Program

DATE AND TIME: ASAP

BRIEFING TIME:

DURATION:

LOCATION:

PARTICIPANTS:

OUTLINE OF EVENTS:

REMARKS REQUIRED: Yes; 90 second recorded message

MEDIA COVERAGE:

FIRST LADY'S ATTENDANCE: n/a

VICE PRESIDENT'S ATTENDANCE: n/a

RECOMMENDED BY:

CONTACT: J. Scott Wiedmann 703-695-0663

ORIGIN OF PROPOSAL: Department of Defense's Federal Voting Assistance Program

SECOND LADY'S ATTENDANCE: n/a

SOURCE OF PAYMENT: no charge

FEDERAL VOTING ASSISTANCE PROGRAM
OFFICE OF THE SECRETARY OF DEFENSE
WASHINGTON, DC 20301-1155

9/26 9:07

September 16, 1996

President William Jefferson Clinton
Clinton Gore '96
Washington, D.C. 20036-9100

Dear President Clinton:

As a candidate for President in the upcoming 1996 general election you have an unique opportunity to connect with over 6,000,000 voters covered under the *Uniformed and Overseas Citizens Absentee Voting Act (UOCAVA)* -- all military personnel, their family members, and all U.S. citizens residing overseas.

These citizens desire more information on the candidates and issues and the Department of Defense Voting Information Center allows you to address this need by recording a personal audio message which citizens can access by telephone. You may record your personal message and change it as often as you desire up until the general election. There is no charge for this service.

The Center also provides information on state offices and recorded messages from candidates for the U.S. Senate, U.S. House of Representatives and Governor. During the past election cycle over 100,000 citizens covered by the *UOCAVA* used the system to become better informed. The system may be accessed at anytime by calling (703) 693-6500.

Enclosed are the procedures to follow in recording a message. Your access code is **[1996]** and your personal identification number is **[2000]**. Please retain these numbers because you will need them each time you record a message if you use the "Call In" method to record your message. These numbers are not needed if you mail a recorded cassette to us at the above address.

If you have any questions, or if we can be of further assistance, please do not hesitate to contact the Voting Information Center Coordinator, J. Scott Wiedmann, at (703) 695-0663 or 1-800-438-VOTE (8683).

Sincerely,

Phyllis J. Taylor

Phyllis J. Taylor
Director

Enclosure

FEDERAL VOTING ASSISTANCE PROGRAM
OFFICE OF THE SECRETARY OF DEFENSE
WASHINGTON, DC 20301-1155

DoD Voting Information Center

Candidate Recording Procedures

I. Message Length

Candidates should try to keep their messages to one minute. Callers tend to switch to another message after one minute. Candidate messages may not exceed one minute 30 seconds. You may change your message as often as you wish, i.e. weekly, monthly, etc.

II. Message Content

Introduce yourself, mention party affiliation and the office you are seeking. Example: "I'm John Doe, the Democratic candidate for Congress from the 13th district in Texas." Speak on any subject relative to your candidacy, such as why you are running for this office, the issues involved, etc., and why the voter should vote for you. You may also give contact information should the caller want to find out more about your platform. Keep in mind that 90% of the callers are in the military, however, they are as interested in all the issues as local voters are.

III. Recording Your Message

There are two ways to provide your recorded message:

1. Call In: You may call (703) 695-9637 at any time to record your message. Collect calls are not accepted. You must use a touch tone telephone. When you access the system, a short announcement will explain the recording process and you will be asked to enter the access code and you personal ID number. Follow the instructions and a tone will signal you to begin. You may listen to your message at this time and record it again if you desire. Usually within 24 hours your message will be placed in its proper slot and may be heard by those calling the DoD Voting Information Center, (703) 693-6500. This delay is designed to protect the integrity of the system.

2. Recorded Cassette: You may provide your recorded message on a regular audio cassette by mailing it to this office at the above address. Be sure to label the cassette with your name and office sought. Follow the format outlined in II above. Tapes will not be returned.

IV. Questions or Additional Information

To Record a Message	(703) 695-9637
To Hear Messages	(703) 693-6500
For More Information	(703) 695-0663 or (800) 438-8683

Suggested - Not approved -

Federal Voting Assistance Program/max 90 sec.

This is President Bill Clinton.

Thank you for joining me as -- together --

We move into the 21st century, building a bridge to a brighter future

For ourselves, for our families, and for America.

As President, my goals are to help restore the American Dream

For all who are willing to work for it,

To have us come together, and not be divided as a nation,

And for America to remain the strongest force for peace and freedom in the world.

I believe we are on the right track,

The deficit is down 60 percent,

Interest rates are low, and home ownership is high,

Americans have 10 million new jobs,

And twenty-five million people can now take health insurance from job-to-job.

We are strengthening families,

Providing more of the tools they need

To make the most of their daily lives.

continued

We are fighting crime,

With more police, more punishment, more prevention.

Our approach is working --

The crime rate has fallen four years in a row.

My balanced budget proposal will grow the economy even more,

Without slashing America's investment in our citizens,

And in education and the environment.

We are offering opportunity,

We are demanding responsibility,

And we are building a stronger America.

This is a moment of rare promise for our nation.

We can choose to make the most of that promise,

By building a bridge to a better future that is wide enough and strong enough

For every American to walk across--

I believe that -- together -- we can do it,

Without leaving America's most enduring values behind.

God Bless You. And God Bless America.

FIRST LADY HILLARY RODHAM CLINTON
GOOD SAMARITAN HOSPITAL
WEST PALM BEACH, FLORIDA
OCTOBER 1, 1996

[Acknowledgements: TBD]

- It's a pleasure to be here today for this dedication. Your new facility, by providing so many services for women under one roof -- from education to screening to treatment -- is an example of how common sense solutions can be effective in combating breast cancer. With breast cancer now striking one out of eight American women, your facility serves as an example for other medical institutions across the country.

- I have been heartened as I travel around the country to see more and more people coming together in the fight against breast cancer. Just last week at the White House we hosted Princess Diana and representatives of the fashion industry, whose tireless work has not only brought public attention to the disease, but also has been instrumental in raising millions of dollars for much needed research.

- The President has committed his Administration to a leading role in this effort:

- Since 1993, the Department of Health and Human Services' funding for breast cancer has nearly doubled and now stands at $476 million. Total funding for breast cancer research, prevention, and treatment services through the National Cancer Institute, the Department of Defense, and other agencies has increased six-fold since 1990.

- In 1993, the President established the National Action Plan on Breast Cancer, an innovative public-private partnership to develop a national strategy to address issues in research, treatment, and education about the disease. The Plan has awarded nearly 100 grants to worthy research and outreach projects.

- Bringing together patient advocates, physicians, scientists, and government officials, the Plan has shepherded progress on many fronts. It is addressing the complex issues surrounding the identification of breast cancer susceptibility genes, boosting research into the environmental causes of the disease, increasing awareness and participation of women in clinical studies, and educating more Americans about the disease through a website on the Internet.

- For its' part, the FDA has put all cancer drugs on the fast track for the review and approval so that cancer patients will have as many treatment options as possible.

- In the absence of a cure, we must do everything we can to encourage early detection of the disease. As you know, mammograms are the key to early detection. The FDA has developed a certification program to make sure that all mammography facilities

meet the highest possible standards in equipment and personnel.

- To make sure that as many women as possible can take advantage of mammogram technology, the Centers for Disease Control and Prevention currently offers free or low-cost tests to thousands of medically-underserved women.

- Sixty percent of all breast cancers occur in women over 65. That is why the President is supporting efforts to make mammograms, which are currently available to women every other year through Medicare, an annual benefit.

- Last year, I was surprised to find out that fewer than 40 percent of eligible women took advantage of the benefit. So, last Mother's Day we started the Mama-gram campaign to educate older women about the importance of mammograms.

- Innovative partnerships are also making advances in the technological aspects of breast cancer detection. NASA, the Defense Department and the CIA have joined our Public Health Service's Office on Women's Health in the fight against this disease.

- Computer programs used to simulate three-dimensional missile launches are being used to give us clearer, more detailed images to help doctors distinguish between benign and malignant tumors and to determine the size and spread of the tumor.

- Government researchers are now beginning clinical trials with these technologies and with a little luck, they will enhance our ability to detect cancer at its earliest stages.

- This progress gives us hope that breast cancer will soon be conquered. Thank you for your efforts and your commitment to helping the millions of American women and their families who are affected by this disease.

###

Wait to hear

from Melanne.

Mammogram Day

Scheduling Proposal October 10, 1996

_____ Accept _____ Regret _____ Pending

TO: Stephanie Streett
Anne Walley

FROM: Melanne Verveer
Susan Blumenthal, Deputy Assistant Secretary for Women's Health, Department of Health and Human Services

REQUEST: To participate in the launch of the National Action Plan on Breast Cancer (NAPBC) Website.

PURPOSE: To celebrate the three year anniversary of the presentation to the President of a petition from the National Breast Cancer coalition with 2.6 million signatures. In response to the petition, the President directed the establishment of the National Action Plan on Breast Cancer -- a public-private partnership coordinating a national strategy for research, service delivery and education about breast cancer.

Breast Cancer Awareness Month focus on accomplishments

BACKGROUND: The NAPBC has served as a catalyst for national efforts to eradicate breast cancer by coordinating government and non-government organizations, agencies, and individuals. In October, they plan to launch an Internet Web site that will disseminate NAPBC position papers, guidelines for health professionals and educational materials and will provide up-to-date information about breast cancer (including clinical trials and new scientific discoveries).

PREVIOUS PARTICIPATION: ?????????

DATE AND TIME: Anytime during the month of October.

BRIEFING TIME: 5 minutes.

LOCATION: The White House or any location across the country.

PARTICIPANTS: Susan Blumenthal and Fran Visco, Co-chairs of the NAPBC
????????

OUTLINE OF EVENT:	???????
REMARKS:	Brief remarks.
MEDIA:	Open press.
CONTACTS:	Susan Blumenthal and Melanne Verveer

NATIONAL ACTION PLAN ON BREAST CANCER
A Public/Private Partnership

DATE: October 8, 1996

TO: Susan J. Blumenthal, M.D., M.P.A.

FROM: Marianne H. Alciati, Ph.D.

SUBJECT: NAPBC Website Launch

Attached please find a brief overview of the National Action Plan on Breast Cancer (NAPBC) Website. In celebration of the three year anniversary of the presentation to President Clinton of the petition that initiated the National Action Plan on Breast Cancer, an October 18 launch for the Website is planned.

Scheduling request

U.S. Public Health Service's Office on Women's Health • Department of Health and Human Services
Hubert H. Humphrey Building, Room 718-F • 200 Independence Avenue, S.W. • Washington, D.C. 20201

DRAFT - October 8, 1996

NATIONAL ACTION PLAN ON BREAST CANCER
A Public/Private Partnership

National Action Plan on Breast Cancer Website

The ***National Action Plan on Breast Cancer (NAPBC)*** was initiated in response to the National Breast Cancer Coalition's 2.6 million signature petition which was presented to President Clinton in October, 1993. This petition called for a coordinated national strategy to combat breast cancer through public/private partnerships. Since this request, the NAPBC has organized to stimulate rapid progress in eradicating breast cancer by advancing knowledge, research, policy, and services. The Plan has served as a catalyst for national efforts, coordinating activities of government and non-government organizations, agencies, and individuals, and encouraging new ideas and mobilizing partnerships to "jump-start" innovative, long-term efforts that will result in rapid progress in the fight against breast cancer. The NAPBC is co-chaired by Susan J. Blumenthal, M.D., M.P.A., Deputy Assistant Secretary for Health (Women's Health) in the U.S. Department of Health and Human Services, and Fran M. Visco, Esq., President of The National Breast Cancer Coalition.

The NAPBC Internet Web site provides an exciting forum for learning more about the NAPBC and gaining easy access to the most up-to-date, credible sources of breast cancer information on the Internet. The Web site provides information about the many exciting activities and accomplishments of the Plan, its organization and the more than 150 participants of the NAPBC Steering Committee and Working Groups, and provides an opportunity to send messages to the NAPBC.

The Web site presents NAPBC products, such as the position paper on hereditary susceptibility testing for breast cancer, educational curriculum guidelines for health care professionals on genetic testing for breast cancer, and guidelines on the ethical use of biological materials, such as breast tissue, in research. Information about other products, such as the NAPBC educational video on genetic testing will also be available.

The Web site also provides "one-stop shopping" for credible information and answers to frequently asked questions about breast cancer. The site serves as a gateway to information on the Internet about clinical trials, new scientific discoveries, ongoing breast cancer research as well as information about breast cancer advocacy and other organizations and events and online breast cancer newsgroups.

Melanne Verveer

To
Glen Klein -

Glen - can you
ensure that the
1-800 #'s are included
in polls.

Scheduling Proposal September 23, 1996

____Accept ____Regret ____Pending

TO: Stephanie Streett
Anne Walley

FROM: Susan J. Blumenthal, M.D., M.P.A.
Deputy Assistant Secretary for Health (Women's Health)
Assistant Surgeon General
Department of Health and Human Services

REQUEST: To demonstrate the Clinton Administration's commitment to improving women's health by having the President launch the National Women's Health Information Center sometime during the last two weeks of October 1996.

PURPOSE: The National Women's Health Information Center (NWHIC) will be the premiere Federal clearinghouse for women's health information accessible to consumers, health care professionals, researchers and the media through a toll-free telephone number (1-800-994-WOMAN) and the Internet. The NWHIC will function as the single point of entry to women's health information, from more than 100 Federal health clearinghouses and hundreds of private sector resources. It will also have special health information for women in the military. The NWHIC will have interactive functions allowing consumers and health care professionals to ask health questions and register for meetings on women's health. It will have a news clipping service, research abstracts, and other cutting edge information services. We expect the NWHIC to respond to over one million requests during its first year. This center represents a tremendous new resource for America's women and their health care providers. The NWHIC is the result of a collaboration between the U.S. Public Health Service's Office on Women's Health within the Department of Health and Human and the U.S. Department of Defense, highlighting a partnership between two federal agencies to acheive a common goal - improving the health of American women.

BACKGROUND: Until recently, women's health was seriously neglected in research, health care service delivery, and public and health care professional education. The Clinton Administration has made women's health a top national priority. Women previously have had no place to turn for cutting edge information about their health. There is now a vast array of information, research results and service delivery programs focused on women's health, but which currently are difficult to identify and access. The NWHIC will function as a vital tool to organize and to disseminate this crucial information to the general public, health care professionals, researchers, and others interested in women's health.

PREVIOUS PARTICIPATION: None

DATE & TIME: Anytime during the last two weeks of October.

BRIEFING TIME: 5 minutes

LOCATION: The White House or at any location across the country.

PARTICIPANTS: Susan J. Blumenthal, M.D., M.P.A.
Deputy Assistant Secretary for Health (Women's Health)
Assistant Surgeon General

Brigadier General Russ Zajtchok
Medical Corp Commander
U. S. Army Medical Research and Materiel Command

Women of different age groups

OUTLINE EVENTS: To be announced; potentially could be launched at a site with Internet OF access with the President logging on and demonstrating the wealth of information available.

REMARKS REQUIRED: Speech Writer

MEDIA COVERAGE: Open

CONTACT: Susan J. Blumenthal, M.D., M.P.A.,
Deputy Assistant Secretary for Health (Women's Health)
Assistant Surgeon General
(202) 690-7650

BACKGROUND

U.S. PUBLIC HEALTH SERVICE'S OFFICE ON WOMEN'S HEALTH TO ANNOUNCE THE CREATION OF **"NATIONAL CENTERS OF EXCELLENCE IN WOMEN'S HEALTH"**, INNOVATIVE, MODEL PROGRAMS TO IMPROVE WOMEN'S HEALTH CARE

In a sweeping move that should significantly improve the health of American women, the U.S. Public Health Service's Office on Women's Health, within the Department of Health and Human Services, will announce the establishment of National Centers of Excellence in Women's Health, to serve as national models to improve the health care of American women.

The National Centers of Excellence in Women's Health mark an innovative new approach to meeting women's health needs, by integrating comprehensive research programs, health care services, public education and health care professional training at academic institutions and linking them with health care services in the community.

"The National Centers for Excellence will provide one-stop shopping for women's health care. Women will have all of their health care needs met in one place by having access to comprehensive services and resources, said Susan J. Blumenthal, M.D., M.P.A., Deputy Assistant Secretary for Health (Women's Health) and Assistant Surgeon General.

Additionally, these Centers will develop a multidisciplinary research agenda across medical specialties; will focus medical education on gender differences in the causes, treatment and prevention of disease; and will use new information technologies to bring cutting edge women's health information to the public and health care providers. The Centers will also develop leadership strategies to foster the recruitment, retention and promotion of women in academic medicine.

Until six years ago, women's health was seriously neglected in research, health care service delivery, and public and health care professional education. Since 1990, a new national focus on women's health, reflected in numerous initiatives in the public and private sectors, is brightening the prospects for a healthier future for American women. The purpose of the National Centers for Excellence is to facilitate this progress through increased knowledge, improved treatment and prevention of diseases in women.

The U.S. PHS OWH is providing $1 million dollars to support these national models that will serve as a template for the establishment of other centers nationwide in the future. The National Centers of Excellence in Women's Health represent a public-private partnership between the U.S. PHS Office on Women's Health and academic centers across the country.

The Centers for Excellence will provide the following women's health resources and services:

- An integrated one-stop shopping center for the delivery of clinical health care services to women.

- Emphasis on preventive care.
- Emphasis on psychosocial issues in health.
- A research agenda on women's health issues.
- Strategies to promote women's participation in clinical research trials
- Coordination and linkage between clinical services in academic centers and surrounding communities.
- Educational programs and materials for the general public and health care professionals on women's health, using new cutting edge information technologies and telemedicine approaches.
- The integration of a women's health curriculum into medical school education.
- A leadership plan to foster the recruitment, retention and promotion of women in academic medical careers.
- Networking within the community to form alliances with business groups, consumer groups, scientific organizations and public policy leaders.

The PHS Office on Women's Health is the government's champion and focal point for women's health issues, providing national leadership in advancing women's health in public policy, research and education, and acts as a catalyst for developing new national and regional initiatives to improve women's health.

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THE NATIONAL WOMEN'S HEALTH INFORMATION CENTER

Recognizing the urgent need for easy access to a broad range of women's health issues, the U.S. Public Health Service's Office on Women's Health within the Department of Health and Human Services has joined in partnership with the Department of Defense, to establish the National Women's Health Information Center (NWHIC). The NWHIC provides a vital resource for the public, health care professionals, policymakers, researchers, and women in the military to enhance their knowledge about women's health issues. With access through both a toll-free telephone line and through the Internet, the NWHIC acts as a Federal "women's health central," reducing to a single point of entry, the vast array of information available through the more than 80 Federal health clearinghouses and hundreds of private sector organization resources.

Serving as a switching house and single point of contact, the NWHIC does not replicate or supplant the important information dissemination functions of existing Federal programs. Rather, it simplifies the identification and ordering of existing women's health information within Federal organizations. Additionally, the NWHIC has an interactive component, permitting consumers and health care professionals to ask health questions, to register for meetings on women's health, and to gain access to interactive services on a broad range of women's health issues.

The NWHIC will offer:

- **Simplicity of access to information by telephone or electronically.** By telephone, callers place a toll-free call to **1-800-99-4-WOMAN** and are connected to a knowledgeable person with access to the most up-to-date Federal resources available on women's health. Similarly, dialing through the Internet, callers can access a broad range of Federal and private sector health information by using simple-to-follow, user-friendly screen displays. Whether accessed by phone or by computer modem, the NWHIC allows Internet users or callers to order women's health materials from across the Federal government and learn of private sector sources of information as well through a single call. If further information is needed, callers would be directed to the most appropriate source for accurate information on the particular topic. Researchers and clinicians would be able to gain access to grant announcements, databases, opportunities for collaboration, and direction to appropriate agency staff who can respond to specific questions.

- **How it works.** A call to the 1-800 phone line with a specific request for women's health information will not require additional calls around the Federal government. The NWHIC staff will help guide the caller to a precise explanation of the specific types of information needed, take appropriate mailing information from the caller, and provide referrals to specific agencies or program offices, should the caller so request. The NWHIC will then make the information request for the caller, forwarding the request either electronically or by phone to the appropriate Federal information sources for direct fulfillment and follow-up, if needed.

- **Listing of up-to-date consumer and scientific news, information, and reports.** The NWHIC will maintain a broad range of consumer and health care professional-relevant information on women's health issues and relevant research findings. Consumers will have information on the latest women's health news from the field of research, including an electronic "clipping service" on recent scientific developments in women's health. Users will have the ability to read the information on-line or download the material to their home computer or to other remote locations, including the Regional Women's Health Coordinators' offices.

- **Answers to frequently asked questions (FAQs).** The NWHIC will provide on-line viewable and downloadable answers to questions that women frequently have about their health. The message will be clear that the responses provided are not intended to substitute for medical advice from a woman's health care professional. However, the responses to FAQs will help explain conflicting data or research findings that may be confusing to many women. By reviewing the types of information requests sought both on-line and through the 1-800 telephone system, the NWHIC will regularly update the FAQs to reflect current issues about which women have the greatest number of questions.

The NWHIC will:

Be open for business through both its toll-free telephone service and its Internet home page in summer, 1996. It is a dynamic program, with new additions and changes occurring regularly. We hope that you will take advantage of its services, bringing women, researchers, health care professionals, the media, and policymakers state-of-the-art information that can help in the understanding, diagnosis, treatment, and prevention of illnesses in women. We also hope you will let us know if there are gaps in our resources and provide us with any suggestions for interactive components or improvements in the system. We hope the NWHIC will provide a valuable and comprehensive national resource for women, their families, health care providers, and researchers.

For more information, contact:

U.S. Public Health Service's Office on Women's Health
Department of Health and Human Services
200 Independence Avenue, S.W., Room 712-E
Washington, D.C. 20201
(202) 690-7650 (phone)
(202) 401-4005 (fax)
owh@4women.org (e-mail)

Similarly, a contact through the NWHIC Internet home page will yield information on women's health. In this case, the information is available to anyone with access to a computer with a modem that can link to the Internet -- the "information superhighway." Callers will be able to read and download a wide variety of women's health-related material developed by the Department of Health and Human Services and other Federal agencies. In some cases, longer documents would be summarized; copies could be ordered electronically right from the computer. The electronic capacity will grow over time based on a sophisticated tracking mechanism to help inform us about gaps in information resources available to the public, health care professionals, and researchers. This will enable us to develop new information resources to address these unmet needs by providing the best scientific information available.

The NWHIC's unique <u>on-line</u> service will offer:

- **Referrals to sources of women's health information.** The NWHIC is developing a database of approximately 3,000-5,000 organizations at the National, State and local levels, and electronic Internet sites that provide useful, relevant, and understandable health and medical knowledge. Each site is individually reviewed and evaluated for inclusion in the database. Typical listings will contain the name of the resource, a brief description of information available, and how to make contact. Customized database searches -- where a caller can broaden or limit the types of specific information requested by date, source of information, or topic -- will be available through the Internet home page, or by contacting information specialists at the NWHIC.

  <u>Sites and Organizations include</u>:

  - Federal health agencies (including the most appropriate information sources at both the national and regional levels for the public and health care professionals)
  - Federal health clearinghouses
  - Internet Web Sites related to women's health in both the public and private sectors
  - Major private sector health organizations at the national, regional, state, and local levels, with increased capacity in this area to be developed over time

- **Calendar of national, regional and local meetings.** The NWHIC will maintain a searchable database of major national health and women's health professional meetings and national health observances. Listings will include meeting name, date and location, sponsor,

point of contact, and a brief description of the meeting and its relevance to women's health issues and topics.

- **Registration for meetings, events and new information.** The NWHIC will also provide a vehicle for organizations to offer information about events, training programs, research opportunities, or resources for inclusion in the database. Items submitted for inclusion will be reviewed for duplication, timeliness, and relevance to women's health.

- **Listing of up-to-date consumer and scientific news, information, and reports.** The NWHIC will maintain a broad range of consumer and health care professional-relevant information on women's health issues and relevant research findings. Consumers will have information on the latest women's health news from the field of research, including an electronic "clipping service" on recent scientific developments in women's health. Users will have the ability to read the information on-line or download the material to their home computer or to other remote locations, including the Regional Women's Health Coordinators' offices.

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For more information, contact:

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Department of Health and Human Services
200 Independence Avenue, S.W., Room 712-E
Washington, D.C. 20201
(202) 690-7650 (phone)
(202) 401-4005 (fax)
owh@4woman.org (e-mail)

THE NATIONAL WOMEN'S HEALTH INFORMATION CENTER

Recognizing the urgent need for easy access to a broad range of women's health issues, the U.S. Public Health Service's Office on Women's Health within the Department of Health and Human Services has joined in partnership with the Department of Defense, to establish the National Women's Health Information Center (NWHIC). The NWHIC provides a vital resource for the public, health care professionals, policymakers, researchers, and women in the military to enhance their knowledge about women's health issues. With access through both a toll-free telephone line and through the Internet, the NWHIC acts as a Federal "women's health central," reducing to a single point of entry, the vast array of information available through the more than 80 Federal health clearinghouses and hundreds of private sector organization resources.

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- **How it works.** A call to the 1-800 phone line with a specific request for women's health information will not require additional calls around the Federal government. The NWHIC staff will help guide the caller to a precise explanation of the specific types of information needed, take appropriate mailing information from the caller, and provide referrals to specific agencies or program offices, should the caller so request. The NWHIC will then make the information request for the caller, forwarding the request either electronically or by phone to the appropriate Federal information sources for direct fulfillment and follow-up, if needed.

- **Listing of up-to-date consumer and scientific news, information, and reports.** The NWHIC will maintain a broad range of consumer and health care professional-relevant information on women's health issues and relevant research findings. Consumers will have information on the latest women's health news from the field of research, including an electronic "clipping service" on recent scientific developments in women's health. Users will have the ability to read the information on-line or download the material to their home computer or to other remote locations, including the Regional Women's Health Coordinators' offices.

- **Answers to frequently asked questions (FAQs).** The NWHIC will provide on-line viewable and downloadable answers to questions that women frequently have about their health. The message will be clear that the responses provided are not intended to substitute for medical advice from a woman's health care professional. However, the responses to FAQs will help explain conflicting data or research findings that may be confusing to many women. By reviewing the types of information requests sought both on-line and through the 1-800 telephone system, the NWHIC will regularly update the FAQs to reflect current issues about which women have the greatest number of questions.

The NWHIC will:

Be open for business through both its toll-free telephone service and its Internet home page in summer, 1996. It is a dynamic program, with new additions and changes occurring regularly. We hope that you will take advantage of its services, bringing women, researchers, health care professionals, the media, and policymakers state-of-the-art information that can help in the understanding, diagnosis, treatment, and prevention of illnesses in women. We also hope you will let us know if there are gaps in our resources and provide us with any suggestions for interactive components or improvements in the system. We hope the NWHIC will provide a valuable and comprehensive national resource for women, their families, health care providers, and researchers.

For more information, contact:

U.S. Public Health Service's Office on Women's Health
Department of Health and Human Services
200 Independence Avenue, S.W., Room 712-E
Washington, D.C. 20201
(202) 690-7650 (phone)
(202) 401-4005 (fax)
owh@4women.org (e-mail)

Similarly, a contact through the NWHIC Internet home page will yield information on women's health. In this case, the information is available to anyone with access to a computer with a modem that can link to the Internet -- the "information superhighway." Callers will be able to read and download a wide variety of women's health-related material developed by the Department of Health and Human Services and other Federal agencies. In some cases, longer documents would be summarized; copies could be ordered electronically right from the computer. The electronic capacity will grow over time based on a sophisticated tracking mechanism to help inform us about gaps in information resources available to the public, health care professionals, and researchers. This will enable us to develop new information resources to address these unmet needs by providing the best scientific information available.

The NWHIC's unique <u>on-line</u> service will offer:

- **Referrals to sources of women's health information.** The NWHIC is developing a database of approximately 3,000-5,000 organizations at the National, State and local levels, and electronic Internet sites that provide useful, relevant, and understandable health and medical knowledge. Each site is individually reviewed and evaluated for inclusion in the database. Typical listings will contain the name of the resource, a brief description of information available, and how to make contact. Customized database searches -- where a caller can broaden or limit the types of specific information requested by date, source of information, or topic -- will be available through the Internet home page, or by contacting information specialists at the NWHIC.

  <u>Sites and Organizations include</u>:

  - Federal health agencies (including the most appropriate information sources at both the national and regional levels for the public and health care professionals)
  - Federal health clearinghouses
  - Internet Web Sites related to women's health in both the public and private sectors
  - Major private sector health organizations at the national, regional, state, and local levels, with increased capacity in this area to be developed over time

- **Calendar of national, regional and local meetings.** The NWHIC will maintain a searchable database of major national health and women's health professional meetings and national health observances. Listings will include meeting name, date and location, sponsor,

point of contact, and a brief description of the meeting and its relevance to women's health issues and topics.

- **Registration for meetings, events and new information.** The NWHIC will also provide a vehicle for organizations to offer information about events, training programs, research opportunities, or resources for inclusion in the database. Items submitted for inclusion will be reviewed for duplication, timeliness, and relevance to women's health.

- **Listing of up-to-date consumer and scientific news, information, and reports.** The NWHIC will maintain a broad range of consumer and health care professional-relevant information on women's health issues and relevant research findings. Consumers will have information on the latest women's health news from the field of research, including an electronic "clipping service" on recent scientific developments in women's health. Users will have the ability to read the information on-line or download the material to their home computer or to other remote locations, including the Regional Women's Health Coordinators' offices.

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owh@4woman.org (e-mail)

October 9, 1996

MEMORANDUM TO: JENNIFER KLEIN

FROM: BARBARA WOOLLEY

RE: EVENT SUGGESTIONS

Suggested Women's Health Events

- Launch for the National Action Plan on Breast Cancer's Website
  October 18, 1996 Location to be Determined
  Susan J. Blumenthal and the NAPBC plan to celebrate the three year anniversary of the presentation to President Clinton of the petition that initiated the National Action Plan on Breast Cancer by launching their newly developed website.

- Launch for the National Women's Health Information Center (NWHIC)
  Last two weeks of October, 1996 The White House or any Location across the Country
  Susan J. Blumenthal and the Department of Health and Human Services present the NWHIC, the premeire Federal clearinghouse for women's health information through a toll-free telephone number and the Internet. The NWHIC is the result of a collaboration between the U.S. Public Health Service's Office on Women's Health within the Department of Defense, highlighting a partnership between two federal agencies to acheive a common goal- improving the health of American women.

- Mamogram Awareness Day
  October 18, 1996 Any Location Across the Country
  Any event to highlight October 18, 1996 as Mamogram Awareness Day.

- Ribbon of Hope Event
  Post Debate Alberquerque, New Mexico
  A event highlighting the Ribbon of Hope organization and Breast Cancer Survivors. Suggested location would be at one of the balloon launching sites.

- Event honoring the Introduction of the Area Agency on Aging of Broward County's Bosom Buddy Mammovan
  Late October, 1996 Ft. Lauderdale, Florida
  Broward County's Area Agency on Aging has worked closely with the North Broward Hospital District to develop the concept and realization of a Bosom Buddy Mammovan to provide outreach services for isolated, primarily low income, older females.

Other Suggested Health Related Events

- Event Honoring The Cleveland Clinic Foundation
  Date Open *Cleveland, Ohio*
  Event to visit and speak to the staff, patients and their families, and neighborhood residents at the Cleveland Clinic Foundation. The Cleveland Clinic Foundation is a not-for-profit, integrated health care system. It is also the largest single-site private sector employer in Cleveland with over 10,000 employees and 1,000 physicians and residents.

- Event Visiting the College of Physicians of Philadelphia's exhibit "When the President is the Patient"
  Date Open *Philadelphia, Pennsylvania*
  The College of Physicians of Philadelphia has opened a new exhibit "When the President is the Patient" designed to lend historical prespective to the current discussion. This non-for-profit educational and cultural institution is dedicated to promoting a better understanding of medicine and the role of the phyician in society.

- Event Visitng Hutzel Hospital and the Detroit Medical Center's Project P.O.W.E.R., a pregnancy prevention program
  Date Open *Detroit, Michigan*
  The Detroit Medical Center's Project P.O.W.E.R. at Hutzel Hospital helps young people understand more about themselves, their bodies and how to make wise choices. They would like to hold an event to discuss the Clinton's concern and interest inpreventing teen pregnancies.

Miscellaeneous Events

- Event at one of the USDA's Farmers Markets to support the WIC Farmer's Market Nutrition Program
  Location Open *Date Open*
  The USDA has numerous Farmer's Markets open around the Country. Currently 27 states, 3 Native American Tribal Organizations, and the District of Colombia participate in the Farmers' Market Nutrition Plan (FMNP), a program which provides coupons for the purchase of fresh produce at Farmer's Markets to participants in the WIC program. athis program serves 750,000 women and children and 8,000 farmers. Some suggested locations are Cinncinati, OH, Colombus, OH, and Toledo, OH.

- Opening Plenary Session of Technology 2006
  October 29-31, 1996 Anaheim, California
  Technology 2006 is the world's largest annual technology transfer convention and exposition. This series is organized by the non-for-profit Technology Utilization. Participation by over 6,000 scientists and technology professionals are expected. This years theme is "Technology Transfer- Today for Tomorrow."