

THE WHITE HOUSE
WASHINGTON

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PRESERVATION

Dr. Foster Nomination Picking Up Steam



Just in the past 48 hours, I've witnessed a turnaround in the kind of support and strength there is for [the] nomination.

— Senator Minority Leader Tom Daschle
2/15/95

Dr. Foster shows a passion for dealing with some of the tough issues that face America. Maybe some of the people who care about families would do well to reconsider their positions.

— Bishop Frederick James, AME Church
2/15/95

Broad Show of Support for Dr. Foster

Dr. Foster is receiving endorsements from groups representing a broad cross-section of America. Today, the American Medical Women's Association, the National Education Association, the Planned Parenthood Federation of America, the Association of Schools of Public Health and other civic, religious and women's groups will hold a press conference to announce their support for Dr. Foster's nomination. Yesterday at the White House, 30 black religious, education and medical group leaders strongly endorsed him and said they would lobby for his confirmation.

Good Reception on the Hill

Today, Dr. Foster will meet with leading Republican Senators for an open dialogue on his distinguished record and qualifications. Yesterday, he made a round of courtesy calls to Senate Democrats who gave him high marks. Sen. Carol Moseley-Braun (D-IL) said, "The more his reputation is known, the more he speaks, the more people understand that his opponents have extremist views and that his whole career has been about valuing life."

Responsible Republicans Giving Dr. Foster a Fair Hearing

Those Republicans who are interested in having the best qualified Surgeon General are determined to keep an opened mind and give Dr. Foster a fair hearing. Nancy Johnson (R-CT), whose husband is a practicing ob/gyn, told a radio talk show this week that "**Republican Senators...have taken advantage of the situation to launch a very narrowly-minded, mean-spirited campaign of opposition. There isn't an obstetrician in the country that was trained during the time Dr. Foster was trained, that practiced during the years he practiced, that hasn't terminated a pregnancy. There isn't one.**"

Setting the Record Straight

Right-wing extremists will escalate the rhetoric and let the false charges fly. Groups seeking to criminalize a woman's right to choose have tremendous resources at their disposal and will say and do anything to defeat this nomination. We will continue to rebut the misinformation and set Dr. Foster's record straight.

- Dr. Foster is a highly respected obstetrician/gynecologist and one of the leading medical educators in the country.
- In his distinguished 38-year career, Dr. Foster has delivered thousands of babies and instructed hundreds of young physicians.
- His "I Have a Future" program to promote abstinence and fight teen pregnancy is a national model — named one of President Bush's Thousand Points of Light.

ORGANIZATIONS SUPPORTING DR. HENRY FOSTER

Advocates for Youth
African Methodist Episcopal Church
Africare
Alpha Kappa Alpha
American Academy of Pediatrics
American Association of Dental Schools
American College of Obstetricians and
Gynecologists
American College of Physicians
American for Democratic Action
American College of Preventive Medicine
American Medical Association
American Medical Women's Association
American Nurses Association
American Psychiatric Association
American Psychological Association
American Society for Reproductive Choice
Association of Academic Health Centers
Association of American Medical Colleges
Association of Minority Health Professions
Schools
Association of Reproductive Medicine
Association of Schools of Public Health
Association of Teachers of Preventive Medicine
Black Health Association
Black Women's Network
B'nai B'rith Women
Catholics for Free Choice
Center for Black Aged
Center for Reproductive Law and Policy
Clara Bell Duvall Education Fund
Delta Sigma Theta
The Endocrine Society
Feminist Majority
Human Rights Campaign Fund
International Association of Black Fire Fighters
Medical Students for Choice
National Abortion Federation

National Abortion and Reproductive Rights
Action League
National Association for the Advancement of
Colored People
National Association for Equal Opportunities in
Higher Education
National Association of Black Cardiologists
National Association of Public Hospitals
National Association of Social Workers
National Black Chamber of Commerce
National Black Nurses Association
National Black Police Association
National Black Women's Health Project
National Caucus of Black State Legislatures
National Council of Jewish Women
National Council of Negro Women
National Council of Senior Citizens
National Education Association
National Family Planning and Reproductive
Health Association
National Hispanic Medical Association
National Medical Association
National Progressive Baptist Convention
National Organization for Women
National Organization for Women Legal Defense
and Education Fund
National Urban League
National Women's Law Center
People for the American Way
Planned Parenthood Federation of America
Sexuality Information and Education Council of
the United States
Voters for Choice
Zero Population Growth
Zeta Phi Beta

DR. HENRY FOSTER

February 13, 1995

A LONG AND DISTINGUISHED MEDICAL CAREER. Henry W. "Hank" Foster, Jr., M.D. is a practicing physician, a scholar and academic administrator of national stature. Dr. Foster has practiced medicine for 37 years, and for the past 21 years, he helped train hundreds of America's finest medical practitioners at Meharry Medical College, where he has been a professor, a department chairman, dean of medicine and acting president. Dr. Foster is one of the nation's leading experts, and advocates for maternal and child health. He has developed and directed teen pregnancy and drug-abuse prevention programs, that bolster self-esteem, and encourage abstinence and personal responsibility. Former GOP Governor Lamar Alexander appointed Dr. Foster to his Task Force on Healthy Children, where he chaired a committee on infant mortality.

DEVOTED TO PREVENTING TEEN PREGNANCIES. Dr. Foster has been widely recognized for his "I have a Future Program," a pioneering effort to reduce the number of teen pregnancies. "I Have a Future" is devoted to a new approach to preventing teen pregnancy, delaying child-bearing among teens by improving their self-esteem. Previous efforts to control pregnancy had focused largely on contraception. Dr. Foster was convinced that a much broader approach was necessary, one that cultivated a sense of optimism in improvised youngsters about their lives and gave them incentives to delay having a child. That approach has recorded some remarkable successes. In one study, only one pregnancy was recorded among girls who took active part in the program, while 59 were registered in a comparison group. President George Bush named "I Have a Future" as one of America's "Thousand Points of Light" in 1991.

VICTIM OF A SMEAR CAMPAIGN. Anti-choice extremist groups are using diversionary tactics to derail the nomination of a respected doctor. Those groups unalterably opposed to abortion and will never be satisfied with any Surgeon General who supports a woman's right to choose. Like President Clinton, Dr., Foster believes that abstinence is the best way to prevent unwanted pregnancy and that abortion should be safe, legal and rare. He has dedicated much of his professional life to preventing unwanted pregnancies.

ENDORSED BY A WIDE RANGE OF INDIVIDUALS AND MAINSTREAM GROUPS. Dr. Foster has received support from a wide range of individuals and groups. President Bush's Secretary of Health and Human Services, Dr. Louis Sullivan praised Dr. Foster's selection to be the next Surgeon General. The American Medical Association and the American College of Obstetricians and Gynecologists, and his hometown newspaper, The Nashville Tennessean have also voiced their support for Dr. Foster's nomination.

MEHARRY MEDICAL COLLEGE
(FOUNDED 1876)
NASHVILLE, TN 37208

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I HAVE A FUTURE: DR. FOSTER'S BABY

I Have a Future, a program of Meharry Medical College, was instituted in February 1988, to delay childbearing among teens and address other serious problems of youth in America's cities.

Operating out of apartment units in 2 Nashville public housing projects (where 87% of the residents have annual incomes under \$10,000), the experimental program was the "baby" of Dr. Henry W. Foster Jr., then chairman of obstetrics and gynecology at Meharry, today nominee for Surgeon General of the United States.

Previous efforts to control teen pregnancy had focused largely on contraception -- an approach some workers have described as "throwing condoms at the problem." The meager results of most of these efforts had convinced Foster that a much broader approach was needed, one that cultivated a sense of optimism in impoverished youngsters about their lives and gave them incentives to delay childbearing. Thus the program's title: I Have a Future.

Over the years, it has become clear that success would require the widest range of activities, and, modest budget notwithstanding, the program has been able to provide youngsters with learning experiences ranging from racial pride to health counseling, from academics to athletics, from computers to drug abuse, from entrepreneurship to personal relationships.

Seven years and hundreds of participants later, only one pregnancy has been recorded among girls who took an active part in the program, while 59 were registered in a comparison group.

The program has also demonstrated a rare capacity to hold the interest of older adolescents, including African-American males. In 1994, 24 participants graduated from high school of whom 16 (8 males) went on to college and other post-secondary education while 4 others entered the armed forces.

I Have a Future, supported by Bill and Camille Cosby, the State of Tennessee, and foundation grants, has won recognition from the A.M.A. and American College of Nurse-Midwives and was designated a "point of light" by President George Bush. Dr. Foster hopes to work with Meharry and its new president, Dr. John E. Maupin Jr., to replicate the program in other cities. ###

Nominee's School Program Offers Alternatives to Teens

By RICK BRAGG
Special to The New York Times

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THE NEW YORK TIMES
SATURDAY, FEBRUARY 11, 1995

NASHVILLE, Feb. 10 — Ideals that are not propped up with practical solutions do not stand much of a chance in the John Henry Hale housing project here. Young women who live in and around the neighborhood say morality alone has seldom saved anyone from the cycle of teen pregnancy.

Amelia Turner, 18, is a five-year veteran of I Have a Future, an after-school program that teaches teenagers to delay sex and childbearing, allowing them to build careers and lives. The program, started in 1987 by President Clinton's nominee for Surgeon General, Dr. Henry W. Foster Jr., combines job training, tutoring, medical services and family planning.

Ms. Turner, the child of a single parent, plans to attend college this fall. She said Dr. Foster's program saved her and hundreds of young women like her. She said it is misguided for anti-abortion groups to oppose his nomination over how many abortions he performed.

"No matter how many he did, he could have done many, many more," she said. "They don't realize what goes on in the real world. People, wake up."

Ms. Turner, others in the program, and doctors who have worked with Dr. Foster through the years credit his program with using common sense and incentives, not just speeches about abstinence, to keep teen-agers from being held back by the weight of newborn children.

Dr. Lorraine Williams Greene, the project's director, stressed that the program does not work with pregnant girls or offer abortion counseling. Rather, she said, counselors teach the young people about abstinence, responsibility and self control. As a last resort, she said, teen-agers who insist on having sex are sent to the program's medical personnel, who dispense condoms or birth-control pills if deemed appropriate for their age. She would not say what percentage of the teen-

Teens Offered Alternatives to Pregnancy

Continued From Page 1

agers were given birth control.

Dr. Greene said the program is so successful that there have been only a few pregnancies among the 800 to 1,000 young women who took an active part in the program. About three-quarters of teen-agers in the city housing projects have sex by age 15.

Financed by foundations and private donors with some state money, the program is administered by the Department of Obstetrics and Gynecology at Meharry Medical College. A Meharry nurse practitioner supervises the program's medical staff.

Last Thursday night, some 30 members of I Have a Future crowded into the meeting room in the John Henry Hale project and one by one compared life now with what might have been. In three years, Nakeeta Hunter, 16, went from "not caring about my grades to being on the honor roll." Now she plans to go to college.

Tasaundra Dooley, 16, said, "They taught us that we don't have to be pregnant." Although birth control and abstinence are part of this plan, what the program really does is give her a reason not to join the ranks of unwed mothers, she said.

It makes some of these young people angry to hear a heated debate on abortion from wealthy and powerful people whose children have relatively little to worry about.

"Most of us live in troubled neighborhoods," said 15-year-old Melissa Hunter. "We have children in middle school having babies."

The Surgeon General is in many ways a symbolic position, but the young women and men in I Have a Future, along with several colleagues, say he would bring on practical, workable solutions to the nation's health problems — the same way he brought solutions to the young women at John Henry Hale.

The abortion debate in this case "is a shortsighted issue," said Dr. Richard Smith, director of the Adolescent Gynecology Clinic at Henry Ford Hospital in Detroit, the city where Dr. Foster did his internship. "I think when you look on balance at the work this man has done throughout his career, we really should be applauding the efforts that he has made," he said.

Dr. Foster, a 61-year-old obstetrician, was nominated last week to succeed the outspoken Dr. Joycelyn Elders, whom Mr. Clinton dismissed in December. The choice was supposed to be conciliatory, but conservatives in the past week have rallied against Dr. Foster, because he performed abortions, and because he performed more than either he or the White House originally claimed.

"I don't think doing abortions characterizes Hank Foster," said Dr. David E. Satcher, director of the Centers for Disease Control and Prevention, the former president at Meharry.

Conservatives have also attacked I Have a Future for dispensing birth control items.

In an interview on the ABC News program "Nightline" on Wednesday, Dr. Foster said "no" when asked whether he favored the widespread distribution of condoms. He called abstinence "our first route," without elaborating on further action.

Dr. Foster had been on the faculty at Meharry since 1973 and served as acting president for six months after the departure of Dr. Satcher in 1993. He played a central role in negotiating with Nashville officials over the merger of the city-owned Metropolitan General Hospital with Meharry Hubbard Hospital. That merger is crucial to the medical college, which has lost its accreditation because of declining business at its own, historically black teaching hospital.

It is for his work in poor neighborhoods that Dr. Foster has drawn most of his accolades. I Have a Future is not his first such program.

In the 1970's, when he was elected to the prestigious Institute of Medicine, he fought infant mortality and teen pregnancy in rural Alabama, said Dr. Satcher. Throughout his 37-year career, Dr. Foster worked to prevent pregnancies among poorer young people and to head off the health threats to mother and child caused by too-young pregnancies, Dr. Satcher said.

The I Have a Future program reaches only a fraction of the young people in Nashville, but friends of Dr. Foster, including the teen-agers involved, believe it could be a pilot program for the nation.

It addresses much more than sex, said Dr. Satcher and teen-agers involved in the program. It is based on

common sense and self-esteem, and slowly, steadily — through informal classes almost every day after school — teaches them how a baby can forever limit their lives, and how to value their own lives.

Dr. Satcher explained how Dr. Foster and others envisioned the program. "They told me that teen-age pregnancy is really not the problem," he said. "It is a symptom, like violence, like drug abuse. The real problem is the attitudes of these young people toward the future. And so they called the program I Have a Future, and they dealt comprehensively with creating a better attitude in these teen-agers about themselves and about the future."

"They felt that if they could do that, the teen-age pregnancy problem would be taken care of, too, because the young people would have a reason for delaying sexual behavior. You weren't just saying, 'Say no to sex.' You were saying, 'You have a reason to value yourself.'"

Tutors help with studies. Volunteers show teen-agers how to get and keep a job, or even start their own business. But most important, there is always a place to go and someone to talk to, even if it is just with each other.

Melissa Hunter has never met Dr. Foster, but she said his brainchild gives her and her friends a choice they seldom had before. A few make it out of the projects and their teen-age years without a baby and the limitations that one brings, purely on strength of character alone, she said. But it is hard.

"Here they keep you too busy to get into trouble," she said.

Jason Gordon, an 18-year-old whose mother died last year, lives with a sister. He has had every chance to fail, but seven years in the program kept him working, thinking, planning.

Now, every morning, he walks several blocks from his project to Fisk University, where he is studying business. "He's a role model for the others," Dr. Greene said.

Mr. Gordon said: "I would have never gone to college. I needed something to be part of."

The program taught him one thing most of all, he said.

"I know I'm not ready to have a child."

Continued on Page 8, Column 1

Teens say Foster's vision brightens future

By TAMMIE SMITH

Staff Writer

"I Have A Future," the Meharry Medical College teen-age pregnancy prevention program, is generating national attention — and controversy — because it was founded by U.S. surgeon general nominee Dr. Henry Foster.

Yes, the program counsels teens about birth control. Yes, it does give contraceptives to teens.

But that's only part of the picture.

Snapshots of the young people whose lives are changed by the program help fill out the frame.

They are of teens like Tonika East, 17, and Jason Gordon, 18. They live in public housing, a challenging place to grow up. But these young people — outgoing and

"A bonus of the program has been the neighborhood effects."

DR. LORRAINE WILLIAMS GREENE

Director, I Have a Future

articulate with goals — give a lot of the credit to "I Have A Future" for improving their chances of success.

"I [joined] because everyone else was doing it," Tonika, a high school senior, said smiling, recalling her motives for becoming a "Future" kid in the sixth grade.

These days, others want to be like her.

Through the program, she's become well-traveled, with trips to Atlanta, Washington, Gaffinburg, Cincinnati, New Orleans and Florida. Some were rewards; others were to visit colleges she may choose to attend.

Tonika is the leader now, student body president at Pearl Cohn High School and top dog in IHAF's entrepreneurship program that teaches business ownership.

Jason's motive for getting involved in IHAF six years ago was strictly financial. He wanted the \$10 "reward" for filling out the survey to get into the program. That \$10 was a lot of candy for a 12-year-old.

The \$10 reward is no longer offered, but some program activities have a waiting list of people who want to get involved. Maybe it's because other youngsters see where Jason is headed. He entered Fisk Universi-

ty as a freshman last fall and has gone from being a "Future" kid to an employee, working 10 hours a week as a peer counselor. His goal is to one day own his own business.

"This program gives a lot of people a chance," he said. "Some of us would have made it to college anyway. This program helped ensure that."

In the spotlight

Thursday, President Clinton nominated Foster, former acting president of Meharry, to be surgeon general and offered some marching orders:

"I want Dr. Foster to use what he's learned to help America attack the epidem-

♦ Turn to PAGE 2A, Column 1

Teen-age Pregnancy

Tonika East, 17, now Pearl Cohn Comprehensive High School's student body president and head of its I Have a Future's entrepreneurship program:

"I [joined] because everyone else was doing it."



Jason Gordon, 18, a freshman at Fisk University and peer counselor, got involved in I Have a Future six years ago.

"This program gives a lot of people a chance. Some of us would have made it to college anyway. This program helped ensure that."



Dr. Lorraine Williams Greene, I Have a Future director and a clinical psychologist:

"We deal with issues such as how to be in relationships, how to be intimate with someone and not necessarily have sexual intercourse."



Charmaine Harris, 18, a participant in I Have a Future:

"Let's say you are on a date, dancing, and things start getting hot. Are you going to be passive, or stand up for what you believe?"



Calvin Peters oversees one of I Have a Future's entrepreneurship programs: "We have some kids who have never been out of Nashville. Their eyes light up when they see that bus," that comes to take them to IHAF meetings.



Teens thank Foster for brighter future

FROM PAGE 1A

of teen pregnancies."

With speculation that Foster's "I Have a Future" program will be a model for a national teen pregnancy prevention initiative, it is being scrutinized from all angles, especially by Clinton's conservative critics, who claim it is simply a program to dispense contraceptives.

The attention has put Dr. Lorraine Williams Greene, director of the program, and participants such as Tonika and Jason in the media spotlight.

Greene, a clinical psychologist, said the program's agenda does include talk about birth control. And contraceptives are given out.

"If a young person requests it, we give it to them. We talk about responsible sexuality. It is available."

But people who would reduce "I Have a Future" to a program that simply hands out condoms completely miss the mark, she says.

The discussion about birth control is part of a 15-week family life education process that focuses primarily on family dynamics and relationships.

"We deal with issues such as how to be in relationships, how to be intimate with someone and not necessarily have sexual intercourse," Greene explained.

"How do you deal with social situations where you find yourself needing to refuse things?"

Or as Charmaine Harris, 18, said: "Let's say you are on a date, dancing, and things start getting hot. Are you going to be passive, or stand up for what you believe?"

Greene said their message to the young people is simple: Sex just doesn't fit into their lives right now.

But it's not just talk, Greene added. Counselors give teens reasons to want to delay sex and parenthood. Youths are kept busy with field trips, afterschool activities such as dance and karate classes, support groups, tutoring sessions and jobs.

But there are critics. The Family Institute, a Nashville conservative research group focusing on family issues, said "I Have a Future" comes up short.

The institute, a year-old project of Mark Tolf and Jeff Whitesides, was created, Tolf said, to strengthen families. They have reviewed a fact sheet about the Meharry program.

"While the IHAF program seeks to delay the outcomes of 'early pregnancy and childbearing [among others]' there is no mention in the entire document of abstinence or delaying sexual activity," they said in a press release.

Nationally, anti-abortion groups and conservatives have attacked Foster's nomination. The 61-year-old medical educator has long ties to the Planned Parenthood Federation of America. He also has acknowledged he performed a limited number of abortions in his long medical career.

His "I Have a Future" program stresses abstinence. It does not perform abortions.

Touching communities

At John Henry Hale public housing, where some "Future" gatherings are held, you walk down streets where all the homes look alike — brick buildings with house numbers stenciled on doors and small yards that are more dirt than grass.

When a school bus stops at a corner, among the students who tromp off is a young girl holding a baby in one arm, books in the other. Another girl gets off the bus holding a teddy bear and school books.

Despite all the rap songs romancing about the 'hood, the forlorn physical environment is nothing to sing about.

It is in this setting that Meharry social workers and psychologists dispense options. With the field trips, the money-making endeavors, the program exposes kids to life beyond their neighborhoods.

"We have some kids who have never been out of Nashville," Calvin Peters, who oversees the entrepreneurship program, explained. "Their eyes light up when they see that bus."

The program's impact extends beyond the children enrolled, Greene said, pointing to the difference in community attitudes in John Henry Hale and Preston Taylor homes compared to other housing projects that don't have IHAF.

At John Henry Hale and Preston Taylor, you hear more talk about higher education,

even among students not in IHAF, she said.

In one measure, students at the intervention sites scored higher on self-esteem. The program emphasizes the seven principles of Kwanzaa, an African-American cultural holiday celebrated right after Christmas. The principles include self-determination, unity, collective work and responsibility, cooperative economics, purpose, creativity and faith.

"A bonus of the program has been the neighborhood effects," Greene said. "The kids at the intervention site just had a stronger sense of community, sense of responsibility for self and family."

Are there fewer pregnancies?

Greene said the best way to measure their success is to do long-range tracking of participants. That takes money they don't have. To run the program takes about \$400,000 annually. Each site has a director and four case managers.

The most extensive evaluation effort so far of the 6-year-old program was funded by a grant and lasted 30 months. In it, data was gathered from young people in two public housing projects without the program, comparing it with data from young people at John Henry Hale and Preston Taylor — some in IHAF, some not.

Information was compiled on 398 kids, Greene said.

"We do know there was one known preg-

nancy among those in the intervention group during this 30 months, and 59 known pregnancies among those at the comparison sites."

Still, she cautions against generalizing the data because there was about a year's age difference in the groups compared.

But, if you let the youngsters tell it, there is less sexual activity among those in the program.

Part of it is knowing they are not the only one deciding on abstinence. Part of it is having adults they can talk to openly. Part of it is realizing the possible repercussions of early sexual activity.

"When I first came to Nashville, I used to follow the crowd," said Amelia Turner, 18, a Home-Page honor student who does not live in public housing but has made it a point to be involved in IHAF for five years.

"It got to the point where I would see how people were living. There has to be a better way."

Turner has applied to five colleges, but favors Howard University. She said she wants a dual degree in medicine and biomedical engineering.

"This would be a nice program to have in other cities. In the little town I come from, there is nothing to do, so you may go over to your boyfriend's house. This takes you away from that. You don't have time to do crazy things."

THE TENNESSEAN — Tuesday, February 7, 1995

A GANNETT NEWSPAPER

Foster shares goals of many of his critics

MEMBERS of Congress who might be reluctant about Dr. Henry Foster's nomination as surgeon general should recognize that their goals and his are the same.

Foster was an inspired choice of President Clinton to replace the controversial Joycelyn Elders as the nation's most visible health advocate. Foster's record of service strikes at the very heart of what many members of the new Congress, including conservative Republicans, have been advocating.

His "I Have a Future" program, aimed at curbing teen pregnancy, has targeted at-risk young people, instilling in them a sense of responsibility. The program was hailed by the Bush administration as one of its 1,000 Points of Light.

Meanwhile, Foster established a highly respected reputation as an administrator, serving at one time as acting president of Meharry Medical College.

As an obstetrician/gynecologist, Foster's profession is helping to give life. He estimates he has delivered about 10,000 babies.

Soon after he was nominated by Mr. Clinton, however, some critics focused on the fact that Foster has performed a dozen or so abortions in his career. According to the White House, the pregnancies in most of those cases had been caused by rape or incest, or has threatened the life of the woman.

Some strong anti-abortion activists seem to want to use those dozen abortions to portray Foster as an abortionist. He is not.

His anti-pregnancy program for teens teaches self-esteem. It also happens to offer contraceptives to young people who are determined to be sexually active. But to hear his detractors, one would think the program is nothing but a condom-distribution agency. It isn't.

Foster has a long-standing association with the Planned Parenthood program, serving as a board member. But to hear his opponents, one would think Planned Parenthood is nothing but an abortion factory. It isn't. It is a health service agency.

Doctor's efforts fight teen pregnancy, welfare

Abortion opponents are expected to lobby Congress about Foster's nomination, which is certainly their right. But before lawmakers make up their minds about Foster, they need to examine all of the doctor's lengthy resume — in context — not just the footnotes.

After they do, they will find that this nation has few physicians who have waged the kind of successful war against teen pregnancy that Foster has waged.

Lawmakers, no doubt, will be bombarded with information from Foster's supporters as well as his critics. But if they want to learn about Foster's impact, they should simply ask the kids who have benefited from Foster's program.

Plenty of those young people can be found here in Nashville.

A great deal of the conservative pitch in the past several months has been to get families off public assistance. Here's a man who has been active in trying to realize that very goal. One of the surest, shortest roads to welfare dependency today is through a teen pregnancy.

Prevent the pregnancy — and at the same time, underscore the need for responsible choices — and welfare can be avoided.

The White House could have given its nominee more backing by being more precise with the information about the abortions that Foster had performed. Surely White House officials realized that by nominating an ob/gyn, the issue of abortion would arise. No one should hide from the facts.

But to oppose Foster without taking a close look at what he has done, and what he stands for, would be a disservice. If he is rejected, it would not only be a loss for Foster and the White House. It would be a loss for a nation that could use the talent, energy and the personal skills of such a devoted man. ■

HHS NEWS

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

February 2, 1995

HENRY W. FOSTER, JR., M.D. - Biography

Henry W. Foster Jr., 61 years old, is a practicing gynecologist and medical educator who is widely recognized as one of the nation's leading authorities on reducing infant mortality and preventing teen pregnancy and drug abuse.

Currently on a one-year sabbatical from Meharry Medical College, where he has served as dean of the school of medicine and acting president, Dr. Foster has been scholar-in-residence at the Association of Academic Health Centers in Washington, D.C., since July, 1994.

The position as scholar-in-residence is the latest in a string of awards and honors to Dr. Foster that include induction into the Institute of Medicine of the National Academy of Sciences; the Appreciation Award for Research and Teaching in Sickle Cell Anemia from Tuskegee University; and the Faculty Award for Excellence in Science and Technology from the White House Initiative on Historically Black Colleges and Universities.

The "I Have a Future Program," developed and directed by Dr. Foster at Meharry, was recognized as one of this nation's "Thousand Points of Light" in 1991 by President George Bush. The program stresses abstinence and steers at-risk teens toward positive life choices through community-based partnerships and interventions.

A skilled communicator, Dr. Foster has lectured extensively at medical conferences and seminars around the world, and colleagues expect him to put the Surgeon General's "bully pulpit" to excellent use in promoting health and preventing disease.

Dr. Foster, a proven consensus builder, has served on numerous boards, committees and councils, most of them concerned with improving perinatal outcomes. They include the March of Dimes Birth Defects Foundation and the American College of Obstetricians and Gynecologists.

He has also served as an examiner for the American Board of Obstetrics and Gynecology and has been a member of the editorial board of Academia, formerly known as the Journal of Medical Education of the American Association of Medical Colleges.

Dr. Foster earned a bachelor of science degree from Morehouse College in 1954 and was awarded his doctor of medicine degree by the University of Arkansas in 1958.

He conducted an internship at the Detroit Receiving Hospital, served two years as a medical officer in the U.S. Air Force, and conducted one year of residency training in general surgery at Malden Hospital in Malden, MA. He completed a three-year residency in obstetrics and gynecology at Meharry Medical College in Nashville, TN.

Dr. Foster is married to the former St. Clair Anderson, a retired critical-care nurse. They have two children: Myrna, a middle school science teacher in McLean, Va.; and Wendell, research director of a Walt Disney Co. television unit in Burbank, Ca.

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American Medical Association

Physicians dedicated to the health of America



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February 2, 1995

The Honorable William J. Clinton
President of the United States
The White House
Washington, D.C. 20500

Dear Mr. President:

The American Medical Association enthusiastically supports the nomination of Henry W. Foster, Jr., MD for the position of Surgeon General of the U.S. Public Health Service.

Dr. Foster is a leading expert in the field of reproductive health. As Chief of the Department of Obstetrics and Gynecology at the John A. Andrew Memorial Hospital of Tuskegee University, Dr. Foster developed a program which is a nationally recognized model for regionalized perinatal health care systems. During his tenure at McHarry Medical College, Dr. Foster founded the innovative "I Have A Future" program to address teen pregnancy which brought to focus one of the nation's most pressing public health issues. The "I Have A Future" program provides strategies for at-risk youth to develop positive decision-making in the areas of personal health and responsibility, while enhancing their self-image. With so many of our nation's youth in crisis, we need creative programs like this one to dramatically reduce the alarming rate of teen pregnancy and we applaud Dr. Foster's commitment to this issue. Adolescent health has long been a public health priority for the AMA and we look forward to working with Dr. Foster on this and other critical public health issues.

Dr. Foster is a dedicated teacher, a dependable leader, and a concerned advocate for improving access to quality health care for women and underserved populations. Dr. Foster has been a longstanding member of the AMA and he brings the requisite experience, knowledge, and commitment to provide effective leadership as the Surgeon General. We firmly believe that Dr. Foster will serve in the position of Surgeon General with distinction and make many positive contributions to the nation's public health.

Sincerely,

A handwritten signature in dark ink that reads "James S. Todd, MD". The signature is fluid and cursive, with the first name "James" and last name "Todd" being the most prominent parts.

James S. Todd, MD



News Release

CONTACT: Marjorie Tharp
800/336-5475
202/347-8600

FOR RELEASE: February 16, 1995

PEDIATRICIANS SUPPORT SURGEON GENERAL NOMINEE

Washington, D.C. -- The American Academy of Pediatrics, an organization of 49,000 pediatricians, supports the nomination of Henry J. Foster, Jr., M.D., as U.S. Surgeon General.

"Dr. Foster is a capable and caring physician," AAP President George Comerchi, M.D., said.

"As an advocate for children, he will bring hands-on experience in battling some of our most important health problems, like infant mortality and teen pregnancy.

"The Academy has long been concerned about the often forgotten adolescent population. Dr. Foster's preventive education programs, along with his enthusiasm, would be a tremendous asset to meeting their health care needs."

###

The American Academy of Pediatrics is an organization of 49,000 pediatricians dedicated to the health, safety, and well-being of infants, children, adolescents and young adults.

FOR IMMEDIATE RELEASE
February 16, 1995

Contact: Robin Hatziyannis or
Michele Booth Cole
(202) 347-5700

ADVOCATES FOR YOUTH SUPPORTS DR. HENRY W. FOSTER
NOMINEE-DESIGNATE FOR U.S. SURGEON GENERAL

Advocates for Youth strongly and enthusiastically supports Henry W. Foster, M.D., as nominee-designate for the position of United States Surgeon General and commends President Clinton for his selection of Dr. Foster.

As a leading national organization dedicated exclusively to providing information, advocacy and education on issues of adolescent reproductive and sexual health, Advocates for Youth recognizes a champion for youth when it sees one -- and our nation's youth certainly would have such a champion in Dr. Foster as Surgeon General.

Dr. Foster brings with him nearly four decades of committed service as an obstetrician-gynecologist, extensive experience as a scholar-teacher and university administrator, and proven success in combatting the problems of teenage pregnancy and too-early childbearing through his "I Have a Future" program at Meharry Medical College. This remarkable combination of qualities makes him eminently qualified to serve as the nation's chief spokesperson on public health issues.

According to Advocates for Youth President, Margaret Pruitt Clark, Ph.D.,

The "I Have a Future" program demonstrates that Dr. Foster understands and cares deeply about adolescents. Specifically, "I Have a Future" addresses the complex interplay of problems involved in teenage pregnancy and childbearing, including low self-esteem, substance abuse, poor educational resources, lack of access to health care, lack of knowledge about reproductive health, lack of skills-building opportunities, and lack of economic opportunity. Dr. Foster's work to solve these problems at the community-level and to help young people become responsible, productive adults in a culturally-sensitive and comprehensive way serves as a model for the nation.

Advocates for Youth is pleased to join with a host of distinguished and diverse organizations today to lift our voices in a harmonious chorus of support for Dr. Foster. His compassion, his intellect, and his vision will serve ably the public health needs of our country and the demands of the office of Surgeon General. Dr. Henry W. Foster as Surgeon General is what America's youth need, and therefore he is what our entire nation needs.

#



American Association
of Dental Schools

1625
Massachusetts
Avenue, NW
Washington, DC
20036-2212

202.667.9433

February 15, 1995

President William Jefferson Clinton
The White House
1600 Pennsylvania Avenue, NW
Washington, DC 20500

Dear Mr. President:

The American Association of Dental Schools (AADS) writes in full support of the nomination of Dr. Henry Foster for Surgeon General. AADS represents all of the dental schools in the United States, as well as advanced education, hospital, and allied dental education institutions. It is within these institutions that future practitioners, educators, and researchers are trained; significant dental care provided; and the majority of dental research conducted. The AADS is the one national organization that speaks exclusively for dental education.

As a professor, department chair, dean of medicine and acting president of a major health sciences center comprised of schools of medicine, dentistry, allied health and graduate studies, Dr. Foster has learned the challenges faced today by the nation's health education institutions. These institutions not only train the health care workforce of tomorrow but also increasingly serve as a safety net providing treatment to populations that otherwise lack access to care.

The Surgeon General promotes good health activities for all Americans. Dr. Foster understands and supports the fact that oral health is essential to general health. As a member of the Institute of Medicine of the National Academy of Sciences and its governing council, Dr. Foster has been involved in identifying pressing health care problems and fashioning solutions for their resolution. He supports the IOM's recently completed study, *Dental Education at the Crossroads: Challenges and Change*, which recognizes that, "Oral health is an integral part of total health, and oral health care is an integral part of comprehensive health care, including primary care." Dr. Foster's support for this and other IOM studies has prepared him to address a broad array of issues critically important to health education and the nation's health. His position as Surgeon General will allow him to skillfully advance the oral health objectives outlined in *Healthy People 2000*, thereby positively impacting the health status of all Americans.

Dr. Foster's knowledge, experience, and achievements in public health, as well as his personal integrity and commitment to service make him an ideal candidate for Surgeon General. The AADS strongly urges his confirmation.

Sincerely,

A handwritten signature in black ink, reading "Arthur A. Dugoni". The signature is written in a cursive, flowing style.

Arthur A. Dugoni, D.D.S., M.S.D.
President

The American College of Obstetricians and Gynecologists

STATEMENT OF THE AMERICAN COLLEGE OF OBSTETRICIANS AND GYNECOLOGISTS

PRESS CONFERENCE: "MEDICAL COMMUNITY SUPPORT OF HENRY W. FOSTER, M.D.,
NOMINEE FOR SURGEON GENERAL"

NATIONAL PRESS CLUB -- WASHINGTON, D.C.

FEBRUARY 10, 1995 -- 9 A.M.

RALPH W. HALE, M.D., F.A.C.O.G.
ACOG EXECUTIVE DIRECTOR

The American College of Obstetricians and Gynecologists (ACOG), representing over 35,000 physicians specializing in women's health care, is here today to wholeheartedly and unequivocally support the nomination of Dr. Henry W. Foster as Surgeon General. And we are joined by other organizations representing thousands of doctors across this country.

We are here today to applaud Dr. Foster's accomplishments, not to apologize for them.

His career should be celebrated, not defended.

His knowledge should be shared with the nation, not silenced.

Dr. Henry Foster's career achievements are well-known. He has been on the faculty of Nashville's Meharry Medical College since 1973, where he has served as Dean of the School of Medicine and as Acting President, and as Vice President for Health Affairs. He is a Professor and past Chairman in the Department of Obstetrics and Gynecology at Meharry. He is currently on sabbatical as a health policy fellow at the Association of Academic Health Centers in Washington, D.C. He has served as Chief of Ob-Gyn at Larson Air Force Base. He has been President of the Association of Professors of Gynecology and Obstetrics, an examiner for the American Board of Obstetrics and Gynecology, and he is a member of the prestigious Institute of Medicine.

Dr. Foster is a widely-known, popular, and respected member of the College, which represents over 90 percent of all the board-certified ob-gyns in this country. He has served with distinction on numerous College committees, dealing with issues ranging from education in family life to ambulatory care, maternal health, and resident education.

I personally know Hank Foster. Let me tell you what makes him special. He is the kind of compassionate, caring, and committed doctor that we all want as our personal physician, and that America will value as the nation's physician.

-- more --

Dr. Foster has chosen for his life's mission to work with people who need help the most, those who might not otherwise have access to health care. He is exceptionally qualified to take on the health challenges that face our nation -- from infant mortality, to sexually transmissible diseases, drug and alcohol abuse, violence in our cities' streets, and teen-age pregnancy.

Dr. Foster's widely-acclaimed "I Have a Future" program encourages young people to delay sexual activity and to develop job skills and self-esteem. Reducing teen-age pregnancy has been a stated goal of Congress and the President for some time now. It is a major public health issue. Who better to lead the nation's dialogue on this question than someone who has worked on this problem successfully on a day-to-day basis for many years?

Dr. Foster has dedicated his life to caring for women and their babies -- delivering over 10,000 of them -- and to promoting the health of their families.

In spite of Dr. Foster's illustrious record, there are some who would deny him a hearing before the nomination process has even begun. The key word here is "process," that is, a full-fledged discussion of his qualifications before the United States Senate.

A hearing does not mean one editorial, or a thirty-second sound bite. A hearing means a deliberative process before the duly-elected representatives of the American people.

What's right about this process is the choice of Dr. Foster for Surgeon General; what's wrong is how we set our public servants up to fail before they are allowed to speak for themselves.

There are some who would use the abortion issue as a litmus test for judging a doctor's capacity for public service. Those of us here today -- even with our differences in personal views -- do not share that belief. We represent different types of doctors, treating different types of patients, in a variety of settings -- from public health clinics and pediatric offices to emergency rooms. We judge Dr. Foster on the totality of his career.

Within our own specialty of ob-gyn, for example, about 13 percent of our members oppose abortion. Many of them have called me this week, to say that Dr. Foster is a fine man who deserves a fair hearing. One of them, Dr. James Youngblood of Kansas City, whose statement we hand out today, says clearly, "He should be the Surgeon General -- we need him!"

That is the point. We do need Dr. Henry Foster. His gift to this country is his life's work, and he will serve us well.

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EXCERPTS OF MEDICAL COMMUNITY SUPPORT FOR THE FOSTER NOMINATION

Press Conference with The American College of Obstetricians and Gynecologists
Feb. 10, 1995

"Dr. Foster's commitment to public health, his dedication to the challenges of teen pregnancy, drug and alcohol abuse, violence and infant mortality demonstrate his qualifications to be the health guardian of the American people."
American Medical Association

"American academic medicine knows Dr. Foster extremely well and has benefitted over many years and in many ways from his enormous talents. He richly deserves the reputation he has earned as a nationally renowned medical educator and clinician."
Association of American Medical Colleges

"He enjoys widespread respect among his peers, who to a person perceive him as a physician with the integrity, personal and professional characteristics that make him an exemplary candidate to be the chief doctor in the land for all the people."
Association of Academic Health Centers

"As an advocate for children, he will bring hands-on experience in battling some of our most important health problems, like infant mortality and teen pregnancy."
American Academy of Pediatrics

"The nomination of Henry W. Foster, M.D., an outstanding member of the Tennessee Medical Association, for the position of U.S. Surgeon General came as no surprise to physicians in Tennessee."
Tennessee Medical Association

"Private decisions made by physicians and their patients should not and cannot serve as political fodder for any viewpoint -- liberal or conservative.(...) Dr. Foster's nomination should be considered on his record as a distinguished physician and educator."
American College of Physicians

Other organizations supporting the Foster nomination: American College of Preventive Medicine, American Medical Women's Association, American Psychiatric Association, American Society for Reproductive Medicine, Association of Minority Health Professions Schools, Association of Professors of Obstetrics and Gynecology, Association of Teachers of Preventive Medicine, Council on Resident Education in Obstetrics and Gynecology, Council of University Chairs of Obstetrics and Gynecology, National Medical Association.

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February 16, 1995

STATEMENT BY THE AMERICAN COLLEGE OF PHYSICIANS ON THE NOMINATION OF DR. HENRY FOSTER FOR U.S. SURGEON GENERAL

The American College of Physicians expresses disappointment that the nomination process for Surgeon General has politicized the physician-patient relationship.

Private decisions made by physicians and their patients should not and cannot serve as political fodder for any viewpoint -- liberal or conservative. Medical decisions made in the context of the physician-patient relationship are personal, not political. The integrity and security of this relationship is critical to health maintenance and healing. Attempts to dredge up private medical encounters and hurl them into a political debate, as in the case of Dr. Foster's nomination, can only harm the sacred institution of physician-patient trust upon which medicine rests.

Dr. Foster's nomination should go forward, and Congress should consider it based on his record as a distinguished physician and educator.

- 30 -

Contact: Kathleen Haddad, MS, Department of Public Policy, (202) 393-1650.

American College of Preventive Medicine

PROVIDING
LEADERSHIP IN
DISEASE PREVENTION
AND HEALTH
PROMOTION

February 2, 1995

William J. Clinton
President of the United States
The White House
Washington, DC 20500

1015 15TH STREET NW
SUITE 403
WASHINGTON, DC 20005
(202) 789-0003
FAX: (202) 289-8274

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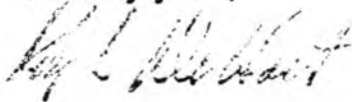
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Region 5
RICHARD M. BIERY, MD
Region 6
MARK B. JOHNSON, MD
Region 7
ELLEN S. B. ALKON, MD
Region 8

Dear President Clinton:

The American College of Preventive Medicine is pleased to support the nomination of Henry Foster, MD, for the position of Surgeon General of the United States. Dr. Foster will bring to the position a record of leadership and an understanding of the medical training and health care delivery needs of this nation.

The American College of Preventive Medicine, the national professional society for physicians committed to disease prevention and health promotion, looks forward to working with Dr. Foster on common goals to improve the health of the public.

Sincerely yours,



Roy L. DeHart, MD
President



AFSCME®

American Federation of State, County and Municipal Employees, AFL-CIO

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STATEMENT
of
AMERICAN FEDERATION OF STATE, COUNTY AND MUNICIPAL EMPLOYEES
(AFSCME)
on the
NOMINATION OF DR. HENRY FOSTER
as
SURGEON GENERAL OF THE UNITED STATES

The American Federation of State, County and Municipal Employees (AFSCME) strongly supports the nomination of Dr. Henry Foster as Surgeon General of the United States.

Dr. Foster is a superbly qualified candidate who has long advocated responsible reproductive health policies that protect women's health, strengthen families and combat teenage pregnancy.

Dr. Foster is being condemned by anti-choice factions for performing a perfectly legal medical procedure in the context of providing women with the full range of health care services they need. This is the right wing's first attack in their campaign to demonize doctors who perform a legal medical service. Their campaign would return us to the time when abortion was illegal and unsafe.

AFSCME urges the Senate to consider Dr. Foster's entire lifetime of extraordinary work. The United States Senate should not allow the nomination of Dr. Henry Foster to become a litmus test for the radical right.

AFSCME urges the Senate to confirm the nomination of Dr. Henry Foster as Surgeon General of the United States.

February 15, 1995

in the public service



1400 K Street, N.W.
Washington, D.C. 20005
Telephone: 202.682.6000
Fax: 202.682.6114

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February 15, 1995

The Honorable William J. Clinton
The White House
1600 Pennsylvania Avenue, NW
Washington, DC 20500

Dear President Clinton:

The American Psychiatric Association supports your selection of Henry Foster, M.D. as nominee to be Surgeon General of the United States. Dr. Foster's long and distinguished medical career and his dedication to matters of public health make him an excellent selection for this position.

Sincerely,

Melvin Sabshin, M.D.
Medical Director





AMERICAN
PSYCHOLOGICAL
ASSOCIATION

February 14, 1995

Honorable William Jefferson Clinton
President of the United States
The White House
Washington, D.C. 20500

Dear President Clinton,

We are writing on behalf of the American Psychological Association to express our strong support for Henry Foster, Jr., M.D. for Surgeon General.

Dr. Foster's accomplishments are numerous. He is widely recognized as one of our nation's authorities on preventing adolescent pregnancy and reducing infant mortality. His highly successful pregnancy prevention program, the "I Have a Future Program", encourages adolescents to abstain from sexual activity and guides those adolescents who are at-risk for pregnancy toward positive life choices through the use of community-based partnerships and interventions. In addition, Dr. Foster has served as an examiner for the American Board of Obstetrics and Gynecology, has lectured extensively at conferences and seminars worldwide, has served on the editorial board of Academia, and has served on many boards, committees, and councils where he has proven his ability as a consensus builder.

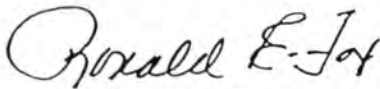
Moreover, Dr. Foster has often been recognized by the medical community for his contributions to medicine and to science. Such recognitions include induction into the Institute of Medicine of the National Academy of Sciences; the Faculty Award for Excellence in Science and Technology from the White House Initiative on Historically Black Colleges and Universities; and the Appreciation Award for Research and Teaching in Sickle Cell Anemia from Tuskegee University.

Dr. Foster is also a practicing physician and medical educator, currently serving as scholar-in-residence at the Association of Academic Health Centers in Washington, D.C. (Dr. Foster's most recent honor) while on sabbatical from Meharry Medical College in Nashville, Tennessee. At Meharry, he has served as the dean of the school of medicine and also as acting president.

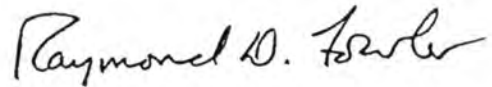
Dr. Foster will bring to the Office of the Surgeon General not only a wealth of knowledge and experience, but also a strong commitment to improving the health of all Americans, particularly infants, children, and adolescents. His colleagues have indicated they expect Dr. Foster to be a vocal advocate for promoting health and preventing disease.

Dr. Foster's distinguished record demonstrates that he would be an exceptional Surgeon General, committed to improving the physical and mental health of all Americans. On behalf of the 124,000 members of the American Psychological Association, we strongly encourage you to support his nomination.

Sincerely,

A handwritten signature in cursive script that reads "Ronald E. Fox".

Ronald E. Fox, Ph.D.
President

A handwritten signature in cursive script that reads "Raymond D. Fowler".

Raymond D. Fowler, Ph.D.
Chief Executive Officer



AMERICAN SOCIETY FOR REPRODUCTIVE MEDICINE

Formerly The American Fertility Society

1209 MONTGOMERY HIGHWAY • BIRMINGHAM, ALABAMA 35216-2809

TEL 205/978-5000 • FAX 205/978-5005

FOR IMMEDIATE RELEASE

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202/863-2439

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STATEMENT OF SUPPORT FOR HENRY W. FOSTER, M.D. FOR U.S. SURGEON GENERAL

Robert D. Visscher, M.D., Executive Director of the American Society for Reproductive Medicine (ASRM), formerly The American Fertility Society, released the following statement in support of President Clinton's nomination of Henry W. Foster, Jr., M.D., for U.S. Surgeon General:

We fully endorse President Clinton's choice for Surgeon General as he is an accomplished physician who has made great strides in the field of reproductive medicine and in developing community service programs. Dr. Foster will bring the highest level of talent, knowledge and leadership to the position of Surgeon General. He has won national recognition and awards for his campaigns to reduce infant mortality and to curb teenage pregnancies and drug abuse. In 1991, his program to combat teen pregnancy was chosen as one of President Bush's "Thousand Points of Light." He created the "I Have a Future" program which encourages young people to practice abstinence, develop job skills and improve self-esteem. ASRM enthusiastically supports the candidacy of Dr. Henry W. Foster, Jr. as the next United States Surgeon General.

The American Society for Reproductive Medicine, founded in 1944, has more than 11,000 members who are devoted to advancing knowledge and expertise in reproductive medicine and biology, including obstetrician-gynecologists, urologists, research scientists, medical technologists and allied health professionals. ASRM-affiliate societies include the Society of Reproductive Endocrinologists (SRE), the Society of Reproductive Surgeons (SRS), and the Society for Assisted Reproductive Technology (SART).

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of Veterinary Medicine
Tuskegee, Alabama 36088
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Dean

Howard University
Colleges of Medicine, Dentistry and Pharmacy
Washington, D.C. 20059
Charles H. Epps Jr., M.D.
Vice President for Health Affairs

Washington Representative
Health and Medicine Council
of Washington
Dale P. Dirks

February 2, 1995

The Association of Minority Health Professions Schools (AMHPS) today expressed its support for the nomination of Henry Foster, MD as the Surgeon General of the United States.

AMHPS President, Dr. Henry Lewis stated, "Dr. Foster is a national leader in medicine and research. His efforts to develop programs for the education and academic enrichment of young people, particularly minorities, have been commendable. Dr. Foster's "I Have a Future" program at Nashville's Meharry Medical College is truly a national model."

Dr. Foster is a former acting president of Meharry Medical College. Meharry is an institutional member of AMHPS, which represents the nation's Historically Black medical, dental, pharmacy and veterinary schools.

**For more information
contact: Dale Dirks
(202) 544-7499**



ATPM

ASSOCIATION OF
TEACHERS OF
PREVENTIVE
MEDICINE

February 13, 1995

President William J. Clinton
The White House
1600 Pennsylvania Avenue, NW
Washington, D.C. 20500

Dear President Clinton:

The Association of Teachers of Preventive Medicine is pleased to support the nomination of Henry W. Foster, Jr., MD for United States Surgeon General. Dr. Foster has a record of outstanding accomplishment and leadership in public health and medical education. His confirmation will help ensure that improving the health status of Americans through disease prevention and health promotion remains a national priority.

The Association of Teachers of Preventive Medicine is a professional organization comprising medical school departments of preventive medicine, teachers, researchers, administrators and students. Our mission is to ensure the primacy and excellence of individual and community health promotion and disease prevention in the education of physicians and other health professionals.

We thank you for your continuing leadership in health care issues and for your consistent recognition that prevention should be a focal point of federal activities in health.

Sincerely,

S. Edwards Dismuke, MD, MSPH
President

Barbara J. Calkins, MA
Executive Director

The Center for Reproductive Law & Policy

120 Wall Street
New York, New York 10005 USA
212-514-5534 • 212-514-5538 fax

February 14, 1995

The Honorable William J. Clinton
President
The White House
1600 Pennsylvania Avenue, N.W.
Washington, DC 20500

Dear Mr. President,

We are deeply disturbed by recent reports that the nomination of Dr. Henry Foster to be the next Surgeon General of the United States is in jeopardy because he has performed a number of abortions in his medical practice.

In this nation, women have a guaranteed constitutional right to make and implement informed choices about childbearing. Abortion is a necessary component of women's health care. Abortion is, in fact, medically indicated in a wide variety of circumstances, and the procedure itself is significantly safer for the woman than a full term pregnancy and delivery. The point at which the medical risks of pregnancy become unacceptable will differ depending on the circumstances and the individual woman. Ethical standards -- and U.S. law -- require that women be allowed to weigh these risks for themselves. While individual physicians, who, for reasons of conscience or religious belief, may decline to perform or assist in the procedure, it is irresponsible and unethical for physicians to withhold or deny abortion services to women who need them.

Since 1973, millions of women in this country have undergone abortions, and millions more have benefited from the option to make a personal choice. That physicians who attend to their medical needs should be made targets for discrimination, intimidation, hatred, and even murder is an outrage.

Because of the urgent need to address issues of importance to women's health, it is particularly praiseworthy that you have appointed a distinguished obstetrician/gynecologist to the position of Surgeon General. We urge you to resist those who would fan the flames of hysteria and vilify Dr. Foster for fulfilling his medical

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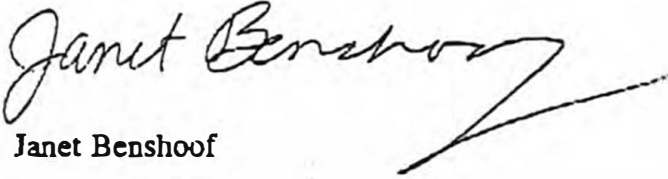
|| Member Calif. bar only

¶ Member N.Y. and Mass. bars

page 2
February 14, 1995

obligation to this patients. For him to do less would violate the standards of medical practice. We hope that Senators will consider this nomination solely on the basis of Dr. Foster's qualifications and experience. If they do so, we are confident they will vote to confirm him as the next Surgeon General of the United States.

Sincerely,


Janet Benshoof



CONTACT: Carol Petraitis 215-629-0111
610-544-0138 (home)

February 16, 1995
National Press Club

In 1929 Clara Bell Duvall a 34-year-old mother of five found herself pregnant for the eighth time. In a desperate attempt to end the pregnancy she performed an abortion with a knitting needle. Tragically, she developed peritonitis and died.

Left behind were five motherless children and a husband unable to care for a large family while working to support them. The children were scattered among various family members. Along with their mother, a family died.

So, when anti-choice forces work to subvert the nomination of Dr. Henry Foster as U.S. Surgeon General because they abhor the abortions he has performed, I wish they would think about Clara Bell Duvall and her five motherless children. What I abhor is the tragedy that befell the Duvall family.

As one of Clara Bell Duvall's daughters, Linn Duvall Harwell said, "When abortion was illegal, women died. My mother was one of them." When she learned the cause of her mother's death, Linn Harwell vowed to change the root causes of her mother's desperate act--the lack of birth control and unsafe, illegal abortion. Now 71 years old and the mother of four, Linn Duvall Harwell, like Dr. Henry Foster, has worked tirelessly to improve women's lives.

Access to birth control and safe, legal abortion save women's lives. Dr. Henry Foster has saved women's lives and kept families together.

News Release

FOR IMMEDIATE RELEASE

**CONTACT: Catherine Bryan
301-941-0252**

ENDOCRINE SOCIETY ANNOUNCES SUPPORT OF FOSTER NOMINATION

Bethesda, MD February 16, 1995 . . . The Endocrine Society today announces its support for the nomination of Henry W. Foster, Jr., M.D. for Surgeon General of the United States. The Society believes that Dr. Foster is well qualified and will bring dedication, expertise and leadership to the position.

"Dr. Foster is a well respected member of the medical community. As a clinician, a scientist, an educator and administrator, his reputation is sterling. The programs he has organized in Nashville to prevent unplanned teenage pregnancies are among the best in the country," said M. Susan Smith, Ph.D., president of The Endocrine Society and director of the Oregon Regional Primate Research Center.

"We recognize excellent leadership in the areas of medicine that relate to endocrinology as well as dedication to public health. Dr. Foster, an obstetrician/gynecologist, deserves our full support for his nomination," commented C. Wayne Bardin, M.D. past president of the Society and vice president of The Population Council.

Based in Bethesda, MD, The Endocrine Society is comprised of nearly 8,000 scientists and physicians in 65 countries dedicated to the research and treatment of the endocrine system.

#



MSFC

MEDICAL STUDENTS FOR CHOICE

February 16, 1995
FOR IMMEDIATE RELEASE

Contact: Patricia Anderson
202-667-7281

MEDICAL STUDENTS FOR CHOICE RALLIES BEHIND DR. FOSTER'S NOMINATION FOR SURGEON GENERAL

Medical Students for Choice (MSFC), the organization of pro-choice medical students, urged the President's continued support of Henry Foster, MD, for Surgeon General today. "It is crucial that Dr. Foster be commended and not condemned for his work as a physician. His example is inspiring to medical students - he has led by caring for the needs of his patients - women and their families," said Jody Steinauer, President of Medical Students for Choice.

Medical students were outraged when controversy arose surrounding Dr. Foster's provision of legal abortions. "His practice teaches the importance of providing health services according to the needs of patients and not the dictates of political beliefs," said Steinauer. "MSFC applauds the nomination of a Surgeon General who recognizes the importance of women's access to abortion."

The medical community, along with MSFC, has overwhelming confidence in Dr. Foster. "We cannot allow anti-abortion extremists to redefine Dr. Foster according to their own narrow agenda," said Steinauer. "Dr. Foster's record speaks for itself. His career exemplifies commitment to our nation's health, from preventing teen pregnancy to providing total reproductive health care."

MSFC represents hundreds of medical students nation-wide dedicated to the reproductive well being of our nation. MSFC was founded in 1993 to advocate for a more complete medical education, one that includes abortion training, to be better prepared to serve the real needs of our communities in the future.

MOREHOUSE SCHOOL OF MEDICINE

Office of the President

MSM PRESIDENT ENDORSES SURGEON GENERAL NOMINEE

Louis W. Sullivan, M.D., President of Morehouse School of Medicine today released the following statement supporting the appointment of Dr. Henry Foster, Jr., as Surgeon General:

"Dr. Foster is a highly qualified physician and administrator who would be an outstanding Surgeon General. He has had a distinguished academic career and has directed numerous successful community outreach ventures, including Meharry's teen initiative, "I Have A Future Program," focusing on sexual responsibility, self-esteem and job skills.

Dr. Foster is a nationally-known, well-respected physician and a great human being who brings a broad perspective and experience to a variety of health and social issues - knowledge, skills and experience that are essential for America's Surgeon General. I am absolutely confident that he would serve with distinction.

I have known him personally since we were classmates at Morehouse College. I treasure him as a friend and respect him as a colleague."

Louis W. Sullivan, M.D.
President
Morehouse School of Medicine
January 31, 1995



NEWS RELEASE

FOR IMMEDIATE RELEASE
FEBRUARY 16, 1995

CONTACT: GINA SHAW
202/667-5881

ABORTION PROVIDERS SUPPORT FOSTER NOMINATION; JOIN PUBLIC FORUM AT NATIONAL PRESS CLUB

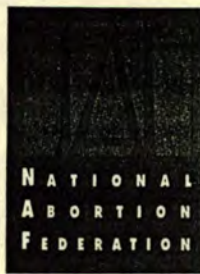
The National Abortion Federation, the national professional association of abortion providers, today reaffirmed its support for Dr. Henry Foster, President Clinton's nominee for Surgeon General of the United States, joining the President and Dr. Foster at a public forum. "Dr. Foster's record speaks for itself," said Donna Singletary, NAF's Government Relations Director. "He has devoted his life to the service of the public health, most particularly reproductive health services."

NAF is reassured by the pro-active stance taken by the White House and Dr. Foster in recent days to counter the misrepresentation and public attacks mounted by the extreme right wing. "It is important that the public know that this Surgeon General nominee supports and respects both the women who seek abortion services and his colleagues who provide those services," said Singletary. "We were initially concerned that the invective of an extremist minority was being allowed to shape the discussion. Abortion is one of the most commonly performed surgical procedures in this country. When you attack abortion care, you attack the women of America."

--More--

The providers NAF represents are outraged at the witch hunt being pursued by extreme right-wing groups against Dr. Foster for providing abortion services. "Fanatics, out of touch with the needs and beliefs of most Americans, have tried to back President Clinton and Dr. Foster into a corner," said Singletary. "We urge Dr. Foster and the President to continue to stand firm in their support of a women's right to complete reproductive health care. It should not matter how many abortions any physician has performed, for what reasons, or in what setting. Dr. Henry Foster should be applauded, not attacked, for providing abortion services to women who need them."

The National Abortion Federation has tracked the growing incidence of anti-choice violence across the United States since 1977. The marginalization of abortion providers has played a key role in the growth of this violence, according to NAF. "In the attacks on Dr. Foster, we see the same kind of demonization that we see at clinics across the country every day," Singletary noted. "This principled physician must not and will not permit himself to be forced to apologize for providing a vital public health service."



February 14, 1995

The Honorable Bill Clinton
The White House
Washington, DC 2050

Dear President Clinton:

On behalf of over 300 institutional members of the National Abortion Federation (NAF), we urge your continuing support for Henry Foster, MD for Surgeon General.

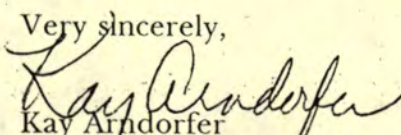
As the professional membership association of abortion providers, our organization speaks for hundreds of caring medical personnel -- many of whom have to don bullet-proof vests when they go to work and many of whom find no safe refuge from harassment even in their homes with their families. NAF supports the nomination of a Surgeon General who acknowledges the importance of women's access to and the availability of abortion care.

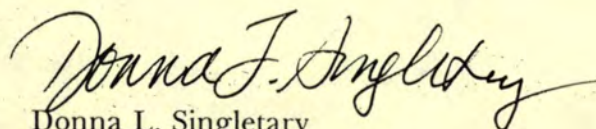
Dr. Foster's career exemplifies this thorough commitment to women's health, from preventing teen pregnancy to rendering a full range of reproductive care. However, Dr. Foster's achievements throughout his career are being overlooked. Anti-abortion militants are attempting to defeat this nomination merely because he performed legal abortion procedures as a part of his practice. Without your leadership and the positive action of the Senate Labor and Human Resources Committee, a good nominee may well be sacrificed in this latest anti-abortion battle.

Blind hostility from anti-choice forces to any nominee who performed an abortion is unfair to Dr. Foster's nomination and is indicative of what abortion providers face every day. Our members do not apologize for 12, 1200, or 12,000 procedures, because our physicians know they make a positive difference in women's lives. Quite simply, the ability to obtain a safe, legal abortion helps women and their families. Abortion is a positive recourse in what can be a difficult situation.

Dr. Foster's prescription to make abortion "safe, legal and rare" represents a growing consensus for a strong educational effort stressing sexual responsibility and delaying parenthood. It is a banner under which all who care about women's and children's health care can rally. We stand with you against the unfair smear tactics which threaten this nomination.

Very sincerely,


Kay Arndorfer
Acting Executive Director


Donna L. Singletary
Director, Government Relations

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1436 U Street, NW Suite 103 Washington, DC 20009 Telephone: 202.667.5881 Fax: 202.667.5890



WASHINGTON BUREAU

NATIONAL ASSOCIATION FOR THE ADVANCEMENT OF COLORED PEOPLE

1025 VERMONT AVENUE, N.W. • SUITE 1120 • WASHINGTON, D.C. 20005
(202) 638-2269 FAX (202) 638-5936

PRESS RELEASE

February 9, 1995

Contact: Wade Henderson, Director
(202) 638-2269
or

Edward A. Hailes, Counsel
(202) 638-2269

NAACP ANNOUNCES SUPPORT FOR THE CONFIRMATION OF DR. HENRY FOSTER AS UNITED STATES SURGEON GENERAL

The NAACP today announced its strong support for the confirmation of Dr. Henry W. Foster, Jr., President Clinton's choice to serve as the United States Surgeon General. Dr. Foster is the acting president of Meharry Medical College. He has a distinguished career in medicine accentuated by significant scholarly achievements and outstanding community service.

Dr. Foster has already earned a national reputation and has gained widespread respect within the medical profession for the remarkable leadership he has demonstrated on issues of importance to the African American community, including his work in such areas as teenage pregnancy prevention programs.

"The NAACP believes the nation needs Dr. Foster as its Surgeon General. His medical experience and willingness to confront some of the most distressing health problems of our time make him especially well-suited for the job," said Dr. William F. Gibson, Chairman, National Board of Directors.

The NAACP has launched a "grassroots" campaign urging Members of the United States Senate to honestly evaluate and swiftly confirm Dr. Foster as the nation's Surgeon General.



National Association For Equal Opportunity In Higher Education
NAFEO • Black Higher Education Center • Lovejoy Building • 400 12th Street, N.E.
Washington, D.C. 20002 • Telephone (202) 543-9111 • Fax No. (202) 543-9113

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Washington, DC

February 1, 1995

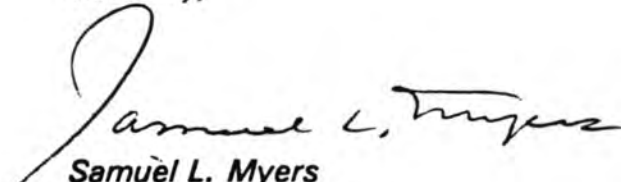
TO WHOM IT MAY CONCERN

On behalf of the National Association for Equal Opportunity in Higher Education (NAFEO), the membership association of 117 historically and predominantly Black colleges and universities (HBCUs), we are pleased to know that Dr. Henry W. Foster, Jr. has been recommended to become the Surgeon General of the United States of America.

I have known Dr. Foster for many years and have long been impressed by his commitment to the health and well-being of all Americans. He has served in a variety of administrative and professional capacities in the Higher Education community including that of Acting President of Meharry Medical College. In addition, his involvement with several organizations and foundations attests to his being able to keep abreast of issues in the medical areas. These accomplishments should serve him well in his new role as Surgeon General.

On behalf of NAFEO, we wholeheartedly endorse and support the appointment of Dr. Henry W. Foster, Jr. as Surgeon General of the United States.

Cordially,


Samuel L. Myers
President

20th National Conference on Blacks in Higher Education
"Equalizing Opportunities"
March 15-19, 1995
Washington Hilton Hotel, Washington, D.C.



National Association of Social Workers

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Carolyn I. Polowy, JD

February 15, 1995

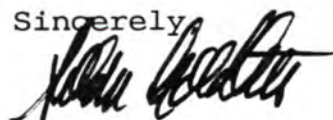
Dear Senator:

On behalf of the 155,000 members of the National Association of Social Workers (NASW), I urge you to support the nomination of Dr. Henry W. Foster as Surgeon General of the United States.

NASW is well aware of our nation's need to address such pressing issues as infant mortality, teenage pregnancy, HIV infection, and alcohol and other drug dependencies. Social workers are on the front lines of health and human service delivery and know the importance of health promotion, education, and behavioral change in confronting the root causes of the many public health challenges that we face today and in the future.

As "doctor to the nation," the Surgeon General has a unique opportunity to bring increased visibility to these critical issues. Dr. Foster has demonstrated his commitment to prevention in these very areas throughout his career as a gynecologist and medical educator and is well qualified to assume this role.

NASW believes that the consideration of Dr. Foster's nomination for Surgeon General should remain focused on his demonstrated competence, credentials, and pursuit of sound public health policy. We look forward to your leadership to insure that the framework and scope of the debate on the nomination of Dr. Foster remains focused on the position of Surgeon General, rather than a political challenge to reproductive rights in the United States.

Sincerely,


Sheldon R. Goldstein, ACSW, LISW
Executive Director

NATIONAL BLACK CHAMBER OF COMMERCE, INC.

N

February 15, 1995

B

Honorable William Jefferson Clinton
President of the United States
The White House
Washington, D.C. 20500

C

C

re: Surgeon General Nomination

Dear Mr. President:

FOUNDED
FROM A
VISION IN
1993

On behalf of our 89 affiliate chapters and over 10,000 Black owned businesses the National Black Chamber of Commerce, Inc. lends total support to your nomination of Dr. Henry Foster, Jr. as Surgeon General.

PROVIDING:

PROGRAMMING

The NBCC is a nonpartisan organization which gives public support of individuals on a very rare basis. In light of the attempted character assassinations directed to an individual holding the excellent credentials of Dr. Foster we feel that our opinion must be added to the public record. Dr. Foster has had an impeccable career filled with compassion and commitment to the improvement of the human race.

ADVOCACY

MONITORING

COMPLIANCE

LEADERSHIP

TECHNICAL
SUPPORT

There is much similarity in the agenda of Dr. Foster and the NBCC. We both feel that the best approach to improving the environment is by dealing "face to face" with those affected by it. His past initiatives in public housing units and with at risk teenagers are indications that his vision is progressive and on target.

INFO SHARING

RESEARCH &
DEVELOPMENT

Improved public health care is the goal of Dr. Foster. All Americans can certainly agree with that agenda and should support such a nominee. The credentials, respect of the health care community and current programs engineered by Dr. Foster speak for themselves. Dr. Foster is qualified, bona fide, worthy and deserving of the post of Surgeon General.

SOURCING

Your resolve to continue your support of Dr. Foster is well appreciated. We look forward to his congressional approval and future accomplishments.

Sincerely,

Harry C. Alford

HARRY C. ALFORD
Chairman & CEO



NATIONAL BLACK WOMEN'S HEALTH PROJECT

Public Education/Policy Office • 1211 Connecticut Avenue N.W. • Suite 310 • Washington, D.C. 20036
Phone 202/835-0117 Fax 202/833-8790

February 8, 1995

The Honorable William Clinton
The White House
1600 Pennsylvania Avenue, N.W.
Washington, DC 20500

Dear President Clinton:

The National Black Women's Health Project (NBWHP), a self-help and advocacy organization committed to improving the overall health status of Black women, would like to state our unequivocal support of your decision to nominate Dr. Henry W. Foster, Jr., as U.S. Surgeon General.

NBWHP praised your decision to name Dr. Joycelyn Elders as Surgeon General because of her work in Arkansas against teen pregnancy, AIDS and ensuring access to family planning services for the poor. Dr. Foster's commitment to reproductive choice, and his work on teen pregnancy prevention equal Dr. Elder's uncompromising dedication. We believe that Dr. Foster is an excellent choice for Surgeon General.

Dr. Elders' treatment at the hands of media and conservatives during her confirmation hearing and throughout her tenure as Surgeon General was grossly unfair and unjustified. Conservatives, led by the anti-choice movement, have waged a similar attack against Dr. Foster.

As an obstetrician-gynecologist, Dr. Foster has delivered hundreds of children and performed a number of legal abortions. Dr. Foster provided abortion services to women who chose to have abortions. These services were performed in accordance with the law and with the consent of his patients. With the declining number of physicians who are willing to perform legal abortions, we think that Dr. Foster should be praised for performing abortions and availing women the option to have this legal choice.

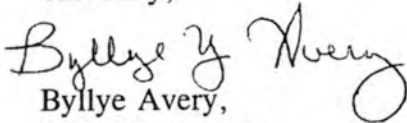
This assault on the pro-choice movement and particularly pro-choice physicians cannot be tolerated by your Administration. As a pro-choice President, we are certain that you will not waiver on your decision to nominate Dr. Foster as Surgeon General.

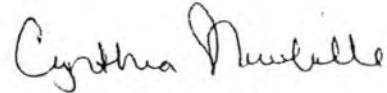
We would ask that you publicly reaffirm your commitment to Dr. Foster and to the pro-choice movement by denouncing any attempts to block his nomination as Surgeon General. While

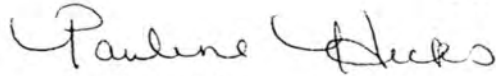
Dr. Foster may not receive an easy confirmation, we would urge that you continue to support him.

NBWHF is a pro-choice organization with membership in 42 states. We have requested that our members contact you to also demonstrate their support for Dr. Foster.

Sincerely,


Byllye Avery,
NBWHF Founder


Cynthia I. Newbille,
Executive Director


Pauline Hicks
NBWHF Board Chair

cc: Dr. Henry Foster, Jr.

National Black Nurses' Association, Inc.



1511 K Street N.W.
Suite 415
Washington, D.C. 20005
Phone: 202-393-6870
Fax: 202-347-3808

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Los Angeles, California

Executive Director
Washington, D.C.

February 15, 1995

Dear Colleague:

The National Black Nurses' Association, Inc. is pleased to enthusiastically endorse the nomination of Dr. Henry Foster as the Nation's next Surgeon General.

NBNA fully recognizes the unique qualifications of Dr. Foster as a physician and a learned, competent individual who has devoted his life to the health and well-being of a variety of communities and age groups.

NBNA particularly supports this distinguished nominee because of his professional and personal focus on health promotion and disease prevention. We commend President Clinton on this important nomination and pledge our full support.

Sincerely,


Linda Burnes Bolton, Dr. PH, RN, FAAN
President



NATIONAL COUNCIL OF NEGRO WOMEN, INC.

NATIONAL HEADQUARTERS:

1001 G STREET, N.W., SUITE 800, WASHINGTON, D.C. 20001

TELEPHONE: (202) 628-0015

FAX: (202) 628-0233

February 15, 1995

The Honorable William Clinton
President of the United States
The White House
Washington, D.C.

Dear Mr. President:

The National Council of Negro Women, Inc. wholeheartedly supports the nomination of Dr. Henry Foster for Surgeon General of the United States.

The National Council of Negro Women is a community based national organization comprised of 34 affiliated national membership organizations and 260 community based sections with an outreach to 4 million women in all walks of life. Since its founding in 1935 by Mary McLeod Bethune, NCNW has been a major positive force working to improve the quality of life for women and their families. We know first hand the value of the professional contribution Dr. Foster has made to the national community and in the lives of families.

Dr. Foster has had a distinguished career as a physician. He is an effective advocate for maternal and child health. His life's work has been devoted not only to the practice of medicine, but he has been a crusader in the fight to reduce teen pregnancy and to improve the quality of life among at risk youth. The "I Have A Future Program" is the direct result of his belief that young people can be inspired to stop dangerous and destructive behavior. Dr. Foster has given hundreds of children a dream of hope and unlimited achievement. He is indeed a professional with a concern to serve the public interest.

Dr. Foster's wide ranging experiences as a practicing physician, scholar, academic administrator and community activist, make him eminently qualified to serve as Surgeon General of the United States. We trust that Dr. Foster will have the opportunity to speak for himself and will be confirmed on the merits of his experience, vision, ability and commitment.

Sincerely,

Dorothy I. Height
President & CEO

NATIONAL FAMILY PLANNING & REPRODUCTIVE HEALTH ASSOCIATION

February 14, 1995

The Honorable William J. Clinton
The White House
1600 Pennsylvania Ave., N.W.
Washington, D.C. 20500

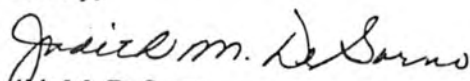
Dear President Clinton:

On behalf of the National Family Planning and Reproductive Health Association, (NFPRHA), representing more than 4,000 publicly funded family planning clinics serving more than four million women and adolescents annually, I write to express our sincere hope and strong belief that Henry Foster, M.D. should be confirmed as Surgeon General of the United States.

First and foremost, Dr. Foster has an impressive record as a practitioner, an administrator, an academician, and has demonstrated a lifetime commitment to public health. During his 38 years of practice, Dr. Foster has delivered thousands of babies and taught more than 1,000 medical students. But the sum total of his life's work goes far beyond these numbers. He has confronted America's "crisis of values" by founding the "I Have A Future" Program, a program which recognizes that teen pregnancy is far more than just a medical issue. The program allows teens to develop a sense of personal responsibility by offering adolescents a range of learning experiences from academics to athletics and is designed to cultivate the self-esteem needed to delay childbearing. Although information on contraception is provided, there is an explicit recognition that this is only one component of an effective response. The "I Have A Future" program stands out as the kind of creative, locally-based approach to preventing unintended pregnancy that we should applaud.

At a time when teen pregnancy has moved to the top of the Administration's agenda as well as the legislative agenda in Congress, it is critical that the nation's Surgeon General be an effective and knowledgeable spokesperson on this topic. The nation needs Dr. Foster's skills as a community leader, a consensus builder, and a spokesperson for the public's health. We cannot afford to let extremists, who would bar any pro-choice candidate from office, claim to speak for America and to represent our values. Now is the time to make clear that mainstream America supports both family planning and reproductive choice and, along with Dr. Foster, wants to keep abortion safe, legal and rare.

Sincerely,


Judith M. DeSarno
President and CEO

The National Family Planning and Reproductive Health Association (NFPRHA) is a non-profit membership organization established to improve and expand the delivery of voluntary, comprehensive, culturally sensitive family planning and reproductive health care services throughout the United States. As the only national organization representing the entire family planning community, NFPRHA's members include 90% of the health care providers funded by the federal Title X program including: state-county-local health departments; hospital based clinics; Planned Parenthood of America affiliates; family planning councils; independent freestanding clinics; and individual providers, researchers and consumers. NFPRHA members provide reproductive health care at over four thousand clinics nationwide to four million low income and poor women and adolescents yearly.

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Sr. Policy Analyst, TIC Office

Organizational affiliation for
purposes of information only.



25 Years Defining and Defending Women's Rights

February 15, 1995

99 HUDSON STREET

NEW YORK, NY 10013-2871

(212) 925-6635

FAX (212) 226-1066

President Bill Clinton
The White House
1600 Pennsylvania Avenue
Washington, DC 20050

Dear President Clinton:

We write to express the strong support of the NOW Legal Defense and Education Fund for Dr. Henry Foster to be Surgeon General of the United States.

Dr. Foster is eminently qualified as a physician. His experience in working with teenagers to build their self-esteem and to give them the confidence to make responsible choices regarding their own futures, their families and their communities, will be invaluable in addressing important social issues.

Dr. Foster's pro-choice position is consistent with the views of the majority of Americans, including Americans of virtually every religious and political persuasion. NOW LDEF strongly endorses his stand for reproductive freedom. It is imperative that we do not allow a minority of extremists to derail the confirmation process. If they do, it will reinforce the message that every doctor's right to provide a legal medical procedure is in peril. Further, it will serve to erode a woman's right to choose, which we know you strongly support.

We urge you to continue your support for Dr. Foster and to press strongly for his confirmation.

Sincerely,


Kathryn J. Rodgers
Executive Director



National Medical Association

1012 Tenth Street, Northwest • Washington, D.C. 20001
(202) 347-1895 • FAX: (202) 842-3293

TRACY M. WALTON, JR., M.D.
PRESIDENT

February 2, 1995

The President
The White House
Washington, D.C. 20500

Dear Mr President:

The National Medical Association (NMA) strongly supports the nomination of Henry Foster, M.D. as United States Surgeon General. As an active NMA member, Dr. Foster's service has been exemplary and his work has served as a national model that is being replicated in various segments of health care.

The NMA believes that Dr. Foster's presence as U.S. Surgeon General will greatly enhance the Administration's ability and capacity to protect the health and welfare of our nation and applauds your excellent selection.

Sincerely,

Tracy M. Walton, Jr., M.D.
President



News RELEASE

FOR IMMEDIATE RELEASE
February 10, 1995

CONTACT: Linda Cooper
(202) 328-5176/5160

STATEMENT OF MARCIA GREENBERGER
CO-PRESIDENT OF THE NATIONAL WOMAN'S LAW CENTER
ON THE NOMINATION OF DR. HENRY FOSTER AS SURGEON GENERAL

WASHINGTON, D.C., -- "We are outraged that some would condemn Dr. Foster and consider him unacceptable for public service as our nation's Surgeon General solely on grounds that he is an OB/Gyn whose long and distinguished career has included the performance of abortions.

This effort to discredit Dr. Foster is nothing more than another guerilla tactic in the litany of intimidation, coercion, and violence being used by extremists to isolate and stigmatize abortion services. Abortion is a legal procedure, and a standard part of OB/Gyn practice. In the past, and during Dr. Foster's years of practice when abortion services were more accessible than they are today, the procedure was considered a responsibility and obligation of OB/Gyn's to their patients, with deference to the provider's religious or moral beliefs. Efforts to further marginalize the availability of abortion services will make women and the limited number of health care providers who currently perform abortion services even more vulnerable to the brutal, senseless, and escalating acts of violence witnessed at clinics in Massachusetts and Florida, and across the country.

OB/Gyn care is fundamental to women's health and healthy babies. In nominating an OB/Gyn to be Surgeon General the Administration clearly recognizes that the health of women and their families is a critically important public health issue, central to the well being of future generations. Dr. Foster's dedication to the health care needs of at-risk communities and issues such as reducing teen pregnancy place him on the front lines of some of the most critical health care concerns we as nation face today.

Dr. Foster's long career reflects a full range of expertise as an academic, health care provider, advocate, and counselor. He brings a unique perspective to the role of the Surgeon General through his commitment in his medical practice to ensuring the health and wellness of countless women and their babies."

#

The National Women's Law Center is a non-profit organization that has been working since 1972 to advance and protect women's legal rights. The Center focuses on major policy areas of importance to women and their families including employment, education, reproductive rights and health, family support and income security, with special attention given to the concerns of low-income women.

NATIONAL WOMEN'S LAW CENTER

1616 P Street, NW • Suite 100 • Washington, DC 20036 • (202) 328-5160 • FAX (202) 328-5137

PRESS RELEASE

ADA

Americans for Democratic Action, Inc.

1625 K Street, N.W. • Suite 210 • Washington, DC 20006 • (202) 785-5980 • FAX (202) 785-5969

For Immediate Release:
February 16, 1995

For Further Information Contact:
Amy Isaacs, (202) 785-5980

AMERICANS FOR DEMOCRATIC ACTION SUPPORTS THE NOMINATION OF DR. HENRY FOSTER FOR SURGEON GENERAL

Americans for Democratic Action (ADA) today reiterated its support for Dr. Henry Foster to become Surgeon General of the United States.

"President Clinton's nomination of Dr. Henry Foster, a practicing gynecologist and educator, is a superb choice to fill the position of U.S. Surgeon General," said Amy Isaacs, ADA's National Director. "In that capacity, Dr. Foster will be able to continue and expand his work of advocating positive life choices for teenagers. His significant contributions to the welfare of youths from disadvantaged backgrounds to prevent teenage pregnancy, reduce infant mortality, and reduce substance abuse are truly noteworthy." Foster's "I Have a Future Program" which was lauded by President George Bush, stands as a shining example of precisely the type of positive alternative all of us need to encourage. The program encourages community-based partnerships and helps young people help each other through the difficulties of the teen years.

"Anti-choice zealots who are condemning Dr. Foster because he performed legal abortions should be ashamed," Isaacs said. "Women are entitled to choose to have an abortion, and it is imperative that their rights not be abridged in any way. Those who oppose Foster must understand that a distinguished gynecologist who has been medically responsible in performing abortions should not be penalized for obeying the law and ensuring that a full range of reproductive health choices are available to all women and their families."

#

Contact: Stephen Steiner
Director of Public Relations
212-360-1540

February 3, 1995
For Immediate Release

*Statement of the American Jewish Congress
Commission for Women's Equality
on the
Nomination of Henry Wendell Foster, Jr.
as Surgeon General*

The American Jewish Congress Commission for Women's Equality is delighted that President Clinton has nominated Henry Wendell Foster, Jr. to the post of Surgeon General and hopes that the Congress speedily approves the nomination.

Dr. Foster's experience on the staff of Meharry Medical College and as its Director amply prepares him to serve as Surgeon General. AJCongress is particularly pleased that the President has selected a physician concerned with the issue of women's health needs, an area long neglected by the medical establishment. Dr. Foster's leadership of Nashville's "I Have A Future" programs, a successful effort to teach teenagers to delay sex and childbearing, augurs well for his leadership of President Clinton's campaign to attack the high rate of teenage pregnancy in the United States. Teenage pregnancy creates serious health, social and economic difficulties for adolescent mothers and their children. By his appointment of Dr. Foster, President Clinton has recognized that the solution to this and other health problems lies in increased knowledge, improved communication and the courage of public officials to risk offending some in the service of improving the lives and health of many.

Lois C. Waldman
Acting Director,
Commission for Women's Equality

The American Jewish Congress, founded in 1918 by Rabbi Stephen Wise, Justice Louis Brandeis and other distinguished Jews, specializes in combatting all forms of bigotry through law and legislation. Considered the legal voice of the American Jewish community, it works to safeguard Jewish interests, protect basic freedoms enshrined in the American Bill of Rights and to advance the security of Israel.



TERRY E. BRANSTAD, GOVERNOR

DEPARTMENT OF PUBLIC HEALTH
CHRISTOPHER G. ATCHISON, DIRECTOR

February 2, 1995

Honorable Donna Shalala, Secretary
United States Department of Health
and Human Services

Dear Secretary Shalala:

It has come to our attention that Dr. Henry W. Foster may become our nation's next Surgeon General. On behalf of the Association of State and Territorial Health Officials, I would like to indicate our support for this choice and offer any assistance we can in assuring Dr. Foster's success.

The office of Surgeon General has the conscience of our nation's health system. Surgeon Generals have advanced public awareness of the dangers of smoking, unprotected sex and teen pregnancy. No simple issues with forgone conclusions. Today, with health system changes abroad, the need for the public conscience has never been greater, and the need for public health to support this articulation never more imperative.

Dr. Foster's life experience in both urban and rural settings equip him well to understand the diversity of our nation. Moreover, his clinical, academic and administrative responsibilities have prepared him well to ensure that our nation's response to the issues, particularly, of teen pregnancy and primary care, are appropriate, workable and effective.

As we see a renewed emphasis on state based planning and community delivery of human services, the state health officers and ASTHO recognize the need for a clear articulation of national interests, strategies and objectives. We believe that Dr. Foster can be a positive force in ensuring that this outcome is achieved.

Respectfully,

Christopher G. Atchison, Director
Iowa Department of Public Health
President,
Association of State and Territorial Health Officials

February 2, 1995

The Honorable William Clinton
President
The White House
Washington, DC 20500

Dear Mr. President:

On behalf of the deans of the 27 graduate schools of public health in the nation, I wish to go on record in support of Dr. Henry Foster as U.S. Surgeon General. Dr. Foster is well known and respected by the academic public health community for his work with the underserved and for his keen understanding the role prevention plays in reducing morbidity and delaying mortality. He is a recognized leader in the health professions education field and will, no doubt, contribute greatly to fulfilling the administration's primary care and public health workforce goals.

The Association of Schools of Public Health (ASPH) is the only national organization representing the deans, faculty, and students of this nation's 27 accredited schools of public health in the United States and Puerto Rico. These schools have a combined faculty of over 2,000 and educate more than 13,000 students annually from every state in the U.S. and most countries throughout the world. The 27 schools graduate approximately 4,000 public health professionals each year.

ASPH's principal purpose is to improve the public's health by advancing professional and graduate education, research and service in public health.

Sincerely,



Harvey V. Fineberg, M.D., Ph.D.
President

ASPH

ASSOCIATION OF SCHOOLS OF PUBLIC HEALTH

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Michel A. Ibrahim, M.D., Ph.D.
Dean, School of Public Health
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1015 FIFTEENTH ST., N.W.
SUITE 404
WASHINGTON, D.C. 20005
(202) 842-4668
FAX (202) 289-8274

PACKET GIVEN OUT
AT MURRAY GROUP
MEETING

4/6/95

—

**PERSONAL STORIES OF DR. HENRY W. FOSTER JR.
AS TOLD BY FRIENDS AND COLLEAGUES
AND REPORTED IN THE PRESS**

The Charlotte Observer: *"Foster Treatment Angers Charlotte Woman"* [2/14/95]

Jeannette Hight was 3-1/2 months pregnant when she began bleeding in the middle of the night. Frantic, she called her obstetrician at home. *"He met us in the hospital in his bedroom slippers,"* Hight recalls. With her doctor's careful help, Hight averted a miscarriage. That was more than 25 years ago. The boy who was born that December 1969 is now grown and married. The place was Tuskegee, Ala. And the doctor was Henry Foster, President Clinton's nominee for surgeon general.

Hight, 57, who has lived in Charlotte for 19 years, wants the nation to know that the man who saved the life of her only child is no 'abortion doctor.' She remembers Foster as a compassionate man committed to ushering in new life. *"What I've heard is a one-sided story,"* says Hight, director of Charlotte's Plaza Presbyterian Church day care center. *"I haven't heard anything about all the lives that come into this world because of him. He is a man of great integrity."*

U.S. News and World Report: *"The Measure of a Man – In All the Controversy, the Real Dr. Henry Foster Has Been Lost"* [3/6/95]

The yardstick many people in Nashville use [to judge Dr. Foster] is the man they know, a longtime resident, a distinguished physician and a family man who attends the First Baptist Church, Capitol Hill. He is active in the community, but not in politics, flies an airplane--and he delivers babies.

The words people in Nashville use to describe him are remarkably similar: unassuming, focused, compassionate, a consensus builder, a fine physician. They talk about his ready smile, his ability to put people at ease, his talent for making a point with being confrontational.

Years later, at J.A. Andrew Memorial Hospital in Tuskegee, Ala., Foster taught Roaf [Sterling Roaf, a Pine Bluff gynecologist] that every patient deserves to be treated *"like your wife or your mother or your grandmother."* Following the lesson drilled into him from childhood -- if you do well, you give something back -- Foster went to Tuskegee to offer obstetrical services in an area of rural poverty. . . In Tuskegee, that sometimes meant delivering three babies a day, caring for hundreds of patients who often could not pay.

St. Paul Pioneer Express: "Surgeon General Nominee Not About To Give Up Now: From Alabama to Tennessee, Foster's Skills Have Survived The Tests of Time"

[3/28/95]

"He was the only ob-gyn that was seeing black mammas and babies," says [Thelma] Walker-Brown [Dr. Foster's nurse from Tuskegee, Alabama]. And there were thousands of them, many of them penniless country women. The doctor put together a team of nurses, social workers and other specialists and they went out to where the patients were, setting up rural clinics. And back at the hospital, they delivered babies. Hundreds. Thousands of babies. "Mothers came from all over to Tuskegee if there were complications...There was every kind of complication you could think of," says Walker-Brown. . .

Sterling Roaf, a medical student from Foster's home town, went to work with Foster at Tuskegee. He recalls asking the older doctor why he had chosen this place, this job with impossible demands. Foster told him: *"This is how you prove how good you are. When everything is against you."* Then, Roaf says, Foster offered him a challenge: *"let's see if we can bring some positive people into the world."*

Los Angeles Times: "Tuskegee Still Holds Dr. Foster in Its Heart" [2/19/95]

Dr. Henry W. Foster Jr. saved the life of the mayor's infant son. He talked a scared and confused Joyce German out of an abortion. He ran a network of prenatal clinics that persuaded young, poor women to abandon their midwives. And he delivered babies. *"Oh, the babies,"* recalled his nurse, Thelma Walker-Brown. *"Lots of babies. Babies, babies, babies."* He is remembered in Tuskegee as the town *"baby doctor"*. . .

He was just out of medical school when he came to Tuskegee. Young, ambitious, trained in modern medicine. Among the poor, the uneducated and the sick living on the red clay soil of east-central Alabama, among the women who didn't know or couldn't afford to call a doctor, Foster was the best they had.

In her own way, Joyce German credits Foster with saving her child as well. She was 20, a student at Tuskegee, unmarried and pregnant with her second child. She knew Foster from services at the Missionary Baptist Church here. One day she knocked on his door at the hospital. *"I didn't want to have another child,"* she said. *"I asked for an abortion, but he refused. He said this child was a blessing to me. He said to have the child and it would turn out all right. Today I have a beautiful daughter who went on to become the valedictorian at her high school."*

USA Today: "Teen-Agers Have a Future Thanks to Foster Program" [2/9/95]

At 17, Tonya Rutledge sees two futures: what might have been and what instead will be. Her 16-year-old sister cares for a new baby, whose father was killed before the child was born. She struggles along on welfare, often missing school. Tonya will graduate this spring and attend college in the fall. ...Teens like Tonya are testimony to the work of Henry Foster, the doctor President Clinton has tapped as his next surgeon general. Foster's teen pregnancy prevention program, called I Have A Future, has helped keep her going in the right direction.

Terrell Carter, 18, credits the program for teaching him that fathering a child is *"nothing to be proud of."* He now has *"more respect for girls. They're not just sex objects."*

"It [IHAF] turns young people's lives around," says Louis Sullivan, Secretary of Health and Human Services under Bush. It's *"the kind of program that the country needs."*

New York Times: "Nominee's School Program Offers Alternatives to Teens"

[2/11/95]

Amelia Turner, 18, is a five-year veteran of I Have A Future, an after-school program that teaches teenagers to delay sex and childbearing, allowing them to build careers and lives. Ms. Turner, the child of a single parent, plans to attend college this fall. She said Dr. Foster's program saved her and hundreds of young women like her. Nakeeta Hunter, 16, went from *"not caring about my grades to being on the honor roll."* Now she plans to go to college.

Jason Gordon, an 18-year-old whose mother died last year, lives with a sister. He has had every chance to fail, but seven years in the program kept him working, thinking, planning. Now, every morning, he walks several blocks from his project to Fisk University, where he is studying business. *"He's a role model for others,"* Dr. Greene [IHAF Program Director] said. Mr. Gordon said: *"I would never have gone to college. I needed something to be a part of."* The program taught him one thing most of all, he said. *"I know I'm not ready to have a child."*

PEOPLE Magazine: "Hanging Tough—Surgeon General Nominee Henry Foster Fights Back" [3/13/95]

For most of his career, Foster has dedicated himself to helping the less fortunate, working mainly at John Andrew Memorial Hospital in Tuskegee, Ala., and Nashville's Meharry Medical College -- and piloting his own Cessna, a passion, to see patients at both medical centers. In 1987, Foster developed his highly praised I Have a Future initiative, which has taught hundreds of Nashville's disadvantaged teens the value of sexual abstinence and education. That work was recognized by George Bush in 1991 as one of his *"Thousand Points of Light."*

The Tennessean: *"Teens Say Foster's Vision Brightens Future"* [2/5/95]

"I [joined] because everyone else was doing it," Tonika, a high school senior, said smiling, recalling her motives for becoming a "Future" kid in the sixth grade. These days, others want to be like her. Through the program, she's become well-traveled, with trips to Atlanta, Washington, Gatlinburg, Cincinnati, New Orleans and Florida. Some were rewards; others were to visit colleges she may choose to attend. Tonika is the leader now, student body president at Pearl Cohn High School and top dog in IHAF's entrepreneurship program that teaches business ownership.

Washington Post: *"In Nashville, A Portrait of Compassion—Critics Missing Total Picture"* [2/12/95]

By most accounts, Foster's most important contribution at Meharry was the creation of the *"I Have a Future"* program. By the 1980s, Foster had decided that treating people for illness was not enough, that the problems of the poor were woven together too tightly to fix one piece at a time. So in 1987, he visited Nashville's tough housing projects, dining with residents and asking them what kind of social program they thought they needed for their children. Again and again he heard the same story: Just as much as good health, the kids of the projects needed hope, a commodity in short supply in the drug-ridden, violent neighborhoods.

Based in the housing projects it serves, the program preaches sexual abstinence and a strong anti-drug message, and stresses such values as cooperation, personal responsibility and self-esteem.

Medical education is renowned for its rigor, not compassion. But Foster made it a central tenet of his teaching, according to Johnny Jones, a Fayetteville, N.C., obstetrician who studied under Foster in the 1970s. If a resident was curt with a patient or nurse, *"He [Foster] would forcefully set you straight"* on the spot, Jones recalled, and might follow up with a closed-door conference. *"It wasn't a habit they [residents] would continually repeat,"* Jones added.

Linda Williams, Foster's assistant from 1973 until 1990, said that Foster would scrutinize the weekly stack of patient surveys, looking for complaints about his staff, and follow up personally. *"It was very important that the patients were treated with dignity,"* Williams said.

USA Today: "The Nominee, In His Own Words" [3/28/95]

President Clinton's Surgeon General nominee, an obstetrician and gynecologist, wears a pink metal lapel pin in the shape of a ribbon, a symbol of breast cancer awareness. He warns visitors that lung cancer is now the No. 1 killer of American women. On Why He Wants The Job: *"It [the surgeon general's position] gives me a platform to multiply what I can do for mothers and babies and particularly adolescent health care, since the President has stated that teen pregnancy is one of our nation's major health problems. It's epidemic."*

National Public Radio, All Things Considered: "Dr. Foster's Work in Nashville Praised" [2/17/95]

Joanne Silberner: *"Twenty-five teens are sitting, boy-girl-boy-girl, in a classroom in a Nashville high school. It's an after school program Foster started eight years ago for teenagers from two city housing projects. Every day Joe Jenkins starts the class the same way."*

Joe Jenkins: *"OK. Everybody understand this a teen pregnant prevention program?"*
(IHAF Teacher) *Everybody understand the best way to prevent pregnancy is-"*

Students in class: *"Abstinence."*

Joe Jenkins: *"Abstinence. Once again, always understand, no matter what you hear from everybody else, there are more people not having sex than there are having sex."*

LOCAL

SECTION C

The Charlotte Observer

2/14/95

Classified advertising/5

Foster treatment angers Charlotte woman

Profile of her former doctor 'one-sided,' she says

By RICKI MORELL
Staff Writer

Jeannette Hight was 3½ months pregnant when she began bleeding in the middle of the night. Frantic, she called her obstetrician at home.

"He met us in the hospital in his bedroom slippers," Hight recalls.

With her doctor's careful help, Hight averted a miscarriage. That was more than 25 years ago. The boy who was born that December 1969 is now grown and married.

The place was Tuskegee, Ala., and the doctor was Henry Foster, resident Clinton's nominee for surgeon general.

Hight, 57, who has lived in Charlotte for 19 years, wants the nation to know that the man who saved the life of her only child is no "abortion doctor."

She remembers Foster as a compassionate man committed to ushering in new life.

"What I've heard is a one-sided story," says Hight, director of Charlotte's Plaza Presbyterian Church day care center. "I haven't heard anything about all the lives that came into this world because of him. He is a man of great integrity."

Foster, 61, former acting president at Meharry Medical College in

Nashville, worked at John A. Andrew Hospital in Tuskegee from 1965 to 1973.

Jeannette Hight and her husband moved to Tuskegee in 1965 from Baltimore. Charles Hight had been asked to start the architecture school at Tuskegee Institute. He is now dean of UNC Charlotte's school of architecture.

"My husband and I have both been very angry about what has been happening to Dr. Foster," Hight says. "My husband has con-

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T. ORTEGA GAINES/Staff

Jeannette Hight remembers surgeon general nominee Henry Foster as committed to ushering in life. He was her doctor in Alabama 25 years ago and saved her from a miscarriage.

CRITICS OF FOSTER AREN'T EASING UP/PAGE 2A

Treatment of surgeon general nominee angers Charlottean

Foster

Continued from page 1C

tacted all of our legislators. I've told everybody I know."

Clinton administration officials chose Foster because of his moderate views and impeccable medical reputation. But soon after they announced his nomination Feb. 2, anti-abortion activists attacked Foster because he had performed abortions. Clinton promises to stand by his nominee despite growing opposition.

Foster has defended a woman's right to an abortion and stressed that most of the abortions he performed were in cases of rape, incest or medical necessity.

Hight hadn't thought about Foster in years until she saw his picture in the paper 10 days ago. "I was just so excited for him," she says.

As the days passed, Hight says she watched the image of her doctor turn into a caricature of an "abortion doctor."

"That wasn't the doctor that I knew," Hight says. "I knew him as a doctor who would work as hard as he could to save a life. He was always available. He was easy to talk to. He didn't rush you in and out of your appointment. He was reassuring. And very calm."

Hight isn't a Clinton supporter — she's a registered independent who voted for Ross Perot. She supports Roe vs. Wade and a woman's right to choose an abortion. But she says, "I'm a pro-life person myself. For me, I could not have an abortion. For me I believe it is taking a life."

Hight is a member of St. Peter Catholic Church and worries she might be condemned for supporting abortion rights because the church opposes abortion.

"But I feel like it's the right thing to do," she says. "I don't care. I just feel like somebody had to say something for Dr. Foster."

Hight cared for Foster's children when she ran Tuskegee's pre-school program. Her husband designed Foster's house in Tuskegee. When the Hights found out they were going to have a child, they asked Foster to be their doctor.

It was a difficult pregnancy. At six months, Hight went into early labor and Foster ordered bed rest.



T. ORTEGA GAINES/Staff

Jeannette Hight of Charlotte says surgeon general nominee Henry Foster is "a man of great integrity." He was her doctor in Alabama 25 years ago and saved her from a miscarriage.

On Dec. 27, 1969, Hight went to see him for her regular checkup. After he examined her, he said, "Woman, don't you know you're in labor?"

Her husband was home working. "Call Charlie," Foster told her. "You're not going home."

Three hours later, Christopher was born.

"He was a healthy boy. I was so excited we had a child," Hight says. "Dr. Foster had given us so much joy."

Until the abortion controversy, Foster was known for his efforts fighting teenage pregnancy. He founded a national program — "I Have a Future" — that was recognized by the American Medical Association and by President George Bush as one of his "thousand points of light."

On Friday, Foster noted to a group at George Washington University that his nomination fell on Groundhog Day and that he feels "a little bit like that groundhog."

"Ever since Feb. 2 ... the descriptions of myself and my work that I have read in the papers and seen on TV have cast an unrecognizable shadow of the man I really am. Yes, I see a shadow, but it's not my shadow."

Jeannette Hight agrees.

"A nomination like this should be above politics," she says. "I hope Dr. Foster will stick with it. I hope he will actually be our surgeon general. But I wouldn't hold it against him if he didn't want to be it anymore."

The measure of a man

In all the controversy, the real Dr. Henry Foster has been lost

Avon Williams III is a commercial banker, a Presbyterian, a conservative Republican who passionately opposes abortion. Yet when it comes to Henry Foster Jr., President Clinton's embattled nominee for surgeon general, Williams is hard pressed to find a word strong enough to capture his outrage. He knows Foster as a family friend, as the obstetrician who delivered his daughter Caroline, as the jovial man who, when Williams was growing up in Nashville, offered to take him for airplane rides. Williams cannot recognize the man he knows in the two-sentence newspaper quotes, the 30-second television spots and the shouts of "liar," "ghoul" and "abortionist." "I'm disgusted by the way Hank Foster's being treated," he says. "Nobody is given the benefit of the doubt for an instant. There's no humanity in it anymore."

Foster may or may not ever become surgeon general; if the abortion issue fails to derail his nomination some new controversy may arise. But among people who know him, among blacks and whites, in small towns and large cities, the viciousness of the past month, the sense that an honorable man has been treated dishonorably, has already added to the growing disgust with the political system and the national press.

"You've got to watch what you say in Washington these days, I guess," says Wayne Summerall, a retired postal worker in Pine Bluff, Ark., where Foster grew up. "By the time they get through with him, he'll look like Satan incarnate—I guess anybody would." Says Nelson Andrews, a Nashville businessman and Foster friend: "It's one more chink that destroys your faith in the armor."

Washington politics has never been polite. But the bungling, distortion and



Speaking out. The nominee addresses students in Washington.

witch-hunt mentality of past weeks have been startling, even in Washington. There is plenty of blame to go around:

■ **The Clinton administration.** The White House appeared totally unprepared for the possibility that an obstetrician-gynecologist might be asked tough questions about abortions, or might even, in the course of a long career, have performed some. Caught by surprise, the administration left its nominee dangling perilously, then was slow to back him up.

■ **The opposition.** Antiabortion groups, armed with computers and fax machines, fed 20-year-old documents to the press and to lawmakers eager to tag Foster with hot-button words such as "abortion-

ist" and "sterilization." Last week, anti-abortion activists generated accusations that Foster approved of the notorious Tuskegee experiments, in which Public Health Service researchers infected black men with syphilis in the 1930s, then left them untreated. They offered no evidence that Foster knew about, much less approved of, the experiments. But the charge found its way onto the network news, leaving Foster once again guilty until proved innocent.

■ **The media.** Anxious not to be beaten on a breaking story, news organizations publicized statements attributed to Foster, sometimes without putting them in context or determining their relevance; they worked harder to chase rumors and dig up tidbits that might make news than they did to assemble a complete, fair and accurate portrait of the man and his work. *U.S. News* shares the blame.

■ **The nominee.** Foster himself seemed dazed by his sudden bath in the limelight. Asked how many abortions he had performed, he offered a number from memory, then revised it after consulting hospital records—a moment

of uncertainty opponents instantly turned into a "credibility" issue.

Lost in this process was any real picture of who Foster is or how well his abilities fit the job description of surgeon general. The public has been left to pick its way through a thicket of innuendos, accusations and selective evidence—Foster performed questionable hysterectomies on retarded women; he supports groups that promote masturbation and pornography—with no yardstick by which to judge them.

The yardstick many people in Nashville use is the man they know, a longtime resident, a distinguished physician and a family man who attends the First Baptist

Church, Capitol Hill. He is active in the community, but not in politics. flies an airplane—and he delivers babies.

The words people in Nashville use to describe him are remarkably similar: unassuming, focused, compassionate, a consensus builder, a fine physician. They talk about his ready smile, his ability to put people at ease, his talent for making a point without being confrontational. Says businessman Andrews: "He's not off in the wild blue yonder. . . . He doesn't get distracted by things that are so idealistic they might not happen."

Foster's legacy to Nashville is the now famous "I Have a Future" program designed to help teenagers learn skills needed to start a business or get an education, and to point out the consequences of teenage pregnancy. But he is also remembered for his role in forging a merger between Meharry Medical College, where he was dean and later acting president, and Nashville General Hospital. The negotiations, say participants, were racially charged. It was often Foster's humor that defused tense meetings. "He is a great mediator. . . . the kind of person who sees beyond race to broader issues," says Dr. David Satcher, former Meharry president, now director of the Centers for Disease Control and Prevention in Atlanta.

Foster has his faults. Associates say he sometimes tries to do too much too fast, and his reviews as a Meharry administrator are mixed. But even some who oppose his nomination are loath to attack him personally. "The issue is not whether he is a good doctor or a good administrator or even a fine individual," says William Baumgartner Jr., president of the Christian Action Council of Middle Tennessee. "The issue is that the man is in favor of murdering children."

In Pine Bluff, many people find this a strange characterization. Relatives and family friends remember him as a plump, friendly, gifted little boy they affectionately called "brother," a kid who always had work to do before he could go out in the evenings. Even as a small boy, says his 92-year-old aunt, Mary Foster Cheatham, Foster had big plans: At 3, he pointed to an airplane in the sky and said, "Auntie, see that thing up in the air? I'm going to fly one of those someday." He kept his word, filling his room in the neatly kept white, wood-frame house on Ohio Street with model airplanes, and at 19, he took flying lessons.

Pine Bluff, 40 miles from Little Rock, resembles other small towns squeezed by 1990s realities: Drugs and guns have become familiar problems. But Foster grew up in a different world. "Getting in trouble in those days meant talking in class or chewing gum," says Lawrence Davis, chancellor of the University of Arkansas at Pine Bluff, who was a



At work. Checking on a newborn, 1986

Those who know him best say he tries to save every baby he can.

few years behind Foster in high school.

Like many parents then, Foster's father was a strict disciplinarian. He was also a positive thinker who taught his children to work hard, go to church and get an education. Education could take you out of Pine Bluff, away from the cotton fields where a 16-hour day yielded \$2 in pay, beyond life as a black person in the segregated South, where you rode in the back of the bus, sat in the balcony at the movie theater and waited in line behind whites at the department store. Henry Foster Sr. was a respected man in town, the football coach who led Merrill High to two national championships—a feat still talked about in town.

Foster did well at Corbin High School on the University of Arkansas at Pine Bluff campus, where students benefited from small classes, individual attention and the examples of black doctors, lawyers and professors. Says Dr. Emory Mazique, a Houston internist and Foster's best friend in high school: "We never questioned that we would go to college, only where we would go."

Foster followed in his father's footsteps, graduating from Atlanta's Morehouse College in 1954 and later from the University of Arkansas at Little Rock medical school. His choice of a career, Foster's friends say, may have been influenced by his childhood physician, Cleon Flowers, then one of Pine Bluff's few black doctors. But soon Foster was a role model himself. Sterling Roaf, a Pine Bluff gynecologist, remembers watching Foster lug his books to the bus stop. "We saw he could do it and that meant we could do it, too," says Roaf.

Years later, at J. A. Andrew Memorial Hospital in Tuskegee, Ala., Foster taught Roaf that every patient deserves to be treated "like your wife or your mother or your grandmother." Following the lesson drilled into him from childhood—if you do well, you give something back—Foster went to Tuskegee to offer obstetrical services in an area of rural poverty.

In Tuskegee, that sometimes meant delivering three babies a day, caring for hundreds of patients who often could not pay. Joyce Carter German was a college junior, married and pregnant for the second time. She wanted an abortion. Foster refused. "This is not the right choice," he told her. The baby "is a blessing to you." German is now a medical technician; her daughter is in graduate school. She is glad Foster said no, and like others, she is puzzled that his fate may hang on how many abortions he has performed.

Those who know him say Foster saves every baby he can. He is, in fact, the kind of man many who oppose his nomination might want their children to become. Says a Pine Bluff doctor: "Everybody's so concerned with symbols that they miss the nucleus of the evaluation: What is the measure of this man?" If the frenzy dies down, the nation may yet learn the answer. ■

BY ERICA GOODE IN NASHVILLE AND PINE BLUFF WITH KATIA HETTER AND BETSY WAGNER

Surgeon general nominee not about to give up now

■ From Alabama to Tennessee, Foster's
skills have survived the tests of time

MARY OTTO WASHINGTON BUREAU

Dr. Henry Foster Jr. has long, tapered, very fine hands that have drawn thousands of babies into this world.

He wants to be judged in this context. His conservative critics have other ideas. He is determined to be the next surgeon general; confirmation hearings begin May 2. He may be, but first there is certain to be a huge battle over the moral issues his career in medicine has confronted.

Over his 37 years as a doctor, he's been a healer to people without bus fare, or even roads. Half the battle has been just reaching them, not just getting to their rural shacks and urban ghettos, but reaching their hearts and minds.

"These were people who were dispossessed," he said. He sought to educate them, to give them power over their lives.

WASHINGTON

OUTLOOK

"We have shown
them new values.

... This is a
great world and
they need to see
it."

—Dr. Foster

FOSTER CONTINUED ON 10A ▶

▼ CONTINUED FROM 1A

He's tried to teach hundreds of younger doctors to take the same approach.

As surgeon general, he says, he would continue to seek out the neglected. He would give a special emphasis to women's health, which he says has been ignored. And he would continue his crusades against infant mortality and teen pregnancy.

Foster, 61, sits in a cramped office in the Old Executive Office Building for a rare interview, a break between courtesy calls to members of Congress. His face is round and smooth, chestnut colored, and he wears small, square spectacles. He wears a pinstriped suit with a pink breast cancer prevention ribbon on his lapel.

He speaks in talking points and statistics, drawn from deep experience but washed of emotion. These days there is a sense of self-protection and some indignation about having to defend his life.

He recalls how he was raised in a home with a copy of the Constitution on the wall.

His father would point to the document and say, "Your freedom is here." Then he'd point to his brow and say "The key to unlock it is here."

But what is freedom, Foster wonders, without health?

Commitment to the poor

Foster was born during the Great Depression in Pine Bluff, Ark., where life centered on the river and the cotton fields and a black college. Both his parents were teachers.

"We lived a sheltered life," recalls Emory Mazique, a lifelong friend, now also a doctor. "We never considered if we were going to college," says Mazique. "Our problem was which college were we going to."

Foster went to Morehouse College and to the University of Arkansas, where he was the only African-American in his medical school class.

After a stint as a medical officer in the Air Force, he went to Alabama.

Foster arrived at the Tuskegee Institute's John A. Andrew Memorial Hospital in 1965 and took charge of obstetrics and gynecology.

"Bright and smart. He looked like he was about 16," recalls Thelma Walker-Brown, a nurse, sitting in her rural home



Dr. Henry Foster Jr. believes there is no freedom without health.

one evening a few miles from the campus. Foster got to work, she says, and never stopped.

It was the year of the Bloody Sunday and the Selma March and the passage of the Voting Rights Act. Black women were not allowed in white hospitals then. Women and their babies were dying.

"He was the only ob-gyn that was seeing black mammas and babies," says Walker-Brown.

And there were thousands of them, many of them penniless country women.

The doctor put together a team of nurses, social workers and other specialists and they went out to where the patients were, setting up rural clinics.

In the dry language of clinical papers, Foster described the primitive conditions, the deprivation, the sense of fatalism he found.

He understood the urge to give birth, in the midst of grinding poverty.

"Every human being has the need to feel creative," he wrote. "It is a drive not easily relinquished. The challenge is to make available other avenues of expression for this creative need."

The team's approach to coping with high-risk pregnancies gained national attention. Foster, working with the Robert Wood Johnson Foundation, helped replicate the methods on a national scale.

And back at the hospital, they delivered babies. Hundreds. Thousands of babies.

"Mothers came from all over to Tuskegee if there were complications. ... There was every kind of complication you could think of," says Walker-Brown.

Infections and abdominal pregnancies and ruptured wombs and seizures. Some of the women had never seen a doctor before.

Sterling Roaf, a medical student from Foster's home town, went to work with Foster at Tuskegee. He recalls asking the older doctor why he had chosen this place, this job with impossible demands.

Foster told him: "This is how you prove how good you are. When everything is against you."

Then, Roaf says, Foster offered him a challenge: "Let's see if we can bring some positive people into the world."

Battling teen-pregnancy

On another soft evening, this one in Nashville, a pale moon is rising over drab blocks of public housing.

"Reality is what works," says Joe Jenkins, a case manager for I Have a Future, which Foster established to discourage teen pregnancy. It's hard to convince the kids at Preston Taylor Homes that there are roads out of here. Most families live on \$10,000 or less. Most people are jobless. Young men hang out on the corner of the known world, 40th and Clifton.

"Basically this community says, 'You are supposed to fail,'" says Jenkins. Girl-mothers sit on doorsteps. Babies are ev-

erywhere. It's hard to believe that there are routes to love besides sex, things to create besides babies.

"It's giving them the facts," says Jenkins. And a sense of pride, Foster says.

He came to Nashville's Meharry Medical College, like Tuskegee a century-old mecca of black thought, in 1973 and tackled the problems of another group that was, in some ways, just as isolated and desperate as the poor rural women of Alabama: the teen-agers of the inner city.

For the Robert Wood Johnson Foundation, he headed an effort to expand health services to poor young people at risk from violence and disease and train doctors and nurses to care for them. The program reached 300,000 young people in 18 cities.

Working with Nashville community leaders and parents, Foster developed the I Have A Future program to provide poor teens with tutoring, sports and field trips, and training in job preparedness and etiquette, family life and computer skills.

"You have to have a tremendous heart to care about some kids who come from the housing projects," explains LeRyan Nicholson, 15.

"He has brought many people into the world, and prepared a great future for us," says Charmaine Harris, 18. She, like the others, has watched Foster's travails in Washington with dismay. But she believes he will prevail.

She whispers, "The truth will set you free."

Conservative resistance

When Foster was tapped for the job of surgeon general early in February, President Clinton hailed him as the man who could lead a national campaign to fight teen-age pregnancy.

But conservatives have lashed out at him almost ceaselessly since then, incensed because he has conceded performing 39 abortions and has headed testing on a suppository used to terminate pregnancies.

Since he has been a longtime board member of the Planned Parenthood Federation of America and since the I Have a Future program makes contraceptives available to teen-agers not practicing abstinence, he has drawn further fury.

"His past work in supporting abortion-on-demand, flawed sex education programs and school-based birth control clinics should worry all American parents," said Beverly LaHaye, president of Concerned Women for America, an anti-abortion group.

Foster says he hates abortion and has spent his career trying to make it unnecessary.

But the questions that make him angriest have to do with the notorious Tuskegee experiment.

During the 40-year experiment, begun in 1932, more than 400 black men were denied treatment for syphilis by federal scientists.

The Family Research Council claims that in 1969, Foster may have attended a meeting where government officials disclosed the nature of the experiment to the local medical society, seeking the doctors' compliance for continuing the secret study.

The allegation has been resoundingly rejected by the White House and by Foster. He denied he knew of the study until 1972, when it was revealed and outrage brought it to a halt.

"Why would I have turned my back on the very people I had come to serve?" asked Foster.

"How dare these groups accuse me? I was serving the people of Tuskegee. What were they doing? Who were they helping?"

Ready for a fight

When his day before the Senate comes, Foster swears he will fight like he always has fought.

"Our president, I think correctly, has said teen pregnancy is an epidemic. The United States teen pregnancy rate is more than double that of the next closest western nation," he says.

"We have over a million pregnancies a year among our teen-agers. Over 400,000 of them get abortions. What I want to do is to have these young people not be in a position where they have to subject themselves to this."

Tuskegee Still Holds Dr. Foster in Its Heart

By RICHARD A. SERRANO
TIMES STAFF WRITER

TUSKEGEE, Ala.—Dr. Henry W. Foster Jr. saved the life of the mayor's infant son. He talked a scared and confused Joyce German out of an abortion. He ran a network of prenatal clinics that persuaded young, poor women to abandon their midwives. And he delivered babies.

"Oh, the babies," recalled his nurse, Thelma Walker-Brown. "Lots of babies. Babies, babies, babies."

He was just out of medical school when he came to Tuskegee. Young, ambitious, trained in modern medicine. Among the poor, the uneducated and the sick living on the red clay soil of east-central Alabama, among the women who didn't know or couldn't afford to call a doctor, Foster was the best they had.

This was Alabama in the 1960s, a time and a place unlike the world today, long before the President of the United States would summon Foster to become the nation's surgeon general.

So great is the contrast between the political maelstrom of Washington and this community—and what Foster meant to it—that people in Tuskegee find it hard to grasp how the life of the "Dr. Hank" they grew to respect could be reduced to a question of how many abortions he may have performed in three decades of medical practice.

Indeed, the portrait of the young doctor that emerges in the recollections of old colleagues and others here serves as a sharp example of just how tortured the nation's struggle over abortion has become.

He is remembered in Tuskegee

Please see FOSTER, A14



JAMIE STURTEVANT / For The Times

Nominee's uncle and aunt, William and Sadie Hill of Tuskegee, Ala.

FOSTER: 'Baby Doctor'

Continued from A1

as the town "baby doctor" who, before Roe vs. Wade, performed abortions only in the rarest emergency of having to save a mother's life. As former colleague Dr. Thomas Calhoun said, he was not "an abortionist who works in an abortion clinic and all he does is abortions."

In the politics of this issue today, such distinctions tend to lose any meaning. Since Foster first acknowledged doing a small number of abortions, and later revised his estimate to 39, his chances of winning Senate confirmation next month have been in grave doubt.

Opponents do not argue that Foster did nothing good; those for whom abortion is an issue of uncompromisable morality believe that he was part of one thing so bad that nothing else matters. And some contend that the Clinton White House's bungling—particularly its failure to give an accurate, forthright account of Foster's record at the outset—has contaminated the nomination process beyond repair.

Those arguments may be the ones that determine Foster's fate

as a candidate for surgeon general.

But they seem remote to those who remember how he labored to open the rural poor to the advantages of preventive medicine. How, through his satellite clinics and other outreach programs, Alabama women learned to take better care of themselves and their unborn children.

When Foster was back in Tuskegee last year to address a conference on rural health care, he reflected on the work he and his staff had done.

"I spent nine years of my life here in this most unique community," he said. "We were ahead of our time."

The native of Pine Bluff, Ark., who served in the Air Force as a medical officer, came here in 1964 as the lone obstetrician-gynecologist at the John A. Andrew Memorial Hospital—a 180-bed, three-story brick facility on the campus of the famed Tuskegee University.

He was an African American doctor serving a black population. Tuskegee was about 87% black, as it remains today, and so were the vast majority of cottonseed farmers and loggers in the surrounding

Please see FOSTER, A15

Continued from A14

Tuskegee National Forest east of Montgomery, Ala.

The median income when Foster arrived here was less than \$2,500 a year. In the five-county rural area, families went without electricity, telephones and, in some cases, running water. Without jobs or education, how could you tell them modern health care was more important?

Foster took over for Dr. Joseph Mitchell, whom townspeople remember as overworked and stressed and who one day died of a heart attack.

"So Dr. Foster came in and he had all these pressures and he said he wanted to do it all," Walker-Brown said. "He said he was young and he could do it all."

His average caseload ran into the hundreds. He sometimes delivered three babies a day. In truth, the number of infants delivered under Foster's care simply cannot be counted.

Louis Rabb, administrator of the hospital before it closed in 1987, when too many charity cases drained its resources, remembered: "It was a tremendous number of babies. Probably thousands of them."

Taking in patients from Macon, Bullock, Russell, Lee and Elmore counties, Foster expanded Mitchell's program of women's clinics in the rural areas. Friends say he spent afternoons in his Chevrolet Corvair, driving out into the countryside and teaching young women how to care for themselves properly.

The task was often daunting, his colleagues say. Women would wait the full nine months before they called a doctor, if they called one at all. For generations they had gone to a network of midwives operating throughout the region.

Foster sometimes found himself performing emergency surgery to repair a crudely done abortion. Or trying to save women with advanced eclampsia—a disorder that may occur late in pregnancy—who were rushed to his hospital in convulsions or already in a coma.

"It's hard to even visualize now," Walker-Brown said. "Women didn't have running water. They didn't have indoor toilets. They didn't have any stable income."

"They were the poorest of the poor. Women who didn't have anything. Women who didn't come to the hospital until the last minute."

"And they were brought here sometimes by lay midwives. They would physically bring them here. Or they'd bring them here with

their premature babies. I mean, they'd put those babies in boxes with hot water bottles and bring them to us and ask us to save their lives."

Against this backdrop was the matter of race. The local hospital served only whites, except for a few black emergency patients that it took in and assigned to rooms normally used as closets. So the John A. Andrew Hospital became a mecca for Alabama blacks.

During Foster's time here, Tuskegee, like much of the South, underwent a metamorphosis.

There were civil rights demonstrations on the Tuskegee University campus. A young black man named Sammy Young was shot to death by a white assailant at the town bus depot in an incident that sparked protest marches. Voter-registration gerrymandering that shut blacks out of the polls was overturned by the Supreme Court.

Then the year before Foster left, Johnny Ford became the first black mayor of Tuskegee—an office he still holds. In front of the Confederate statue that graced the town square, he placed a red-white-and-blue sign proclaiming: "Welcome to Tuskegee, Pride of the Growing South."

Ford said he also feels deeply indebted to Foster. The doctor saved his son's life.

Before he became mayor, Ford worked in New Orleans. His wife, Frances, who was pregnant with their first child, developed complications. They quickly returned to Tuskegee and Foster's care.

"She was bedridden for a while because she was carrying the child low and if she stood up it would cause her to go into labor. It was a very delicate situation," Ford said.

"It turned out he had to deliver the child early, and it took his skill to know when to take the child at exactly the right time."

Later, when Ford became mayor, Jet magazine put him on the cover with his wife and son. Foster liked to point to John Jr.'s picture and tell everyone: "That's my boy." Ford says to this day: "I owe my son's life to Dr. Hank."

In her own way, Joyce German credits Foster with saving her child as well.

She was 20, a student at Tuskegee, unmarried and pregnant with

her second child. She knew Foster from services at the Missionary Baptist Church here. One day she knocked on his door at the hospital.

"I didn't want to have another child," she said. "I asked for an abortion, but he refused. He said this child was a blessing to me. He said to have the child and it would turn out all right. Today I have a beautiful daughter who went on to become the valedictorian at her high school."

But also while in Tuskegee, Foster did come under criticism for his efforts to spread the use of birth control. At that time in the rural South, many suspected that the white power structure was pushing birth control as a way to curb the

number of black births, and maybe to kill off the black race altogether.

"There has been an outcry by various groups that the intent of family planning is black genocide, and that the ultimate effect will be black genocide," Foster said in a speech while still in Tuskegee.

But he argued that acceptance of more birth control measures would only enhance the black population in Tuskegee, and bring it in line with modern life in the rest of the nation.

It was a delicate line for Foster, but one his colleagues said he balanced well.

"He was well-educated, but when he was with the people down here, he didn't set himself up in an ivory tower," said Dr. Calvin R. Dowe, who worked with Foster at the John A. Andrew Hospital.

Added Dr. Calhoun: "With Hank, we got a whole new dimension."

So when people in Tuskegee remember the good that Foster tried to accomplish, it becomes all the more troubling when they see the furor over his selection as surgeon general.

His uncle, William B. Hill, a 90-year-old retired farm extension service agent, saw his nephew come to Tuskegee and move on, and said he cannot understand what people would want in a surgeon general if not someone like Foster. Nor can his wife, 92-year-old Sadie Hill.

"We were all real poor people when Hank was here," Sadie said. "We were just people who needed help. He helped us."

White House stands by surgeon general pick

Teen-agers have a future, thanks to Foster program

By Andrea Stone
USA TODAY

2A

NASHVILLE — At 17, Tonya Rutledge sees two futures: what might have been and what instead will be.

Her 16-year-old sister cares for a new baby, whose father was killed before the child was born. She struggles along on welfare, often missing school.

Tonya will graduate this spring and attend college in the fall. As her elaborate hairdo attests, she is on her way to a career as a cosmetologist.

"The big difference is I know how to listen," she says.

Teens like Tonya are testimony to the work of Henry Foster, the doctor President Clinton has tapped as his next surgeon general. Foster's teen pregnancy prevention program, called I Have A Future, has helped keep her going in the right direction. It was supposed to do the same for the Foster nomination, appealing to conservatives and liberals.

But that was before questions arose about Foster and abortion. Now, I Have A Future is being wielded like a sword by conservatives.

A takeoff on Martin Luther King Jr.'s "I Have a Dream," the program was founded in 1988 to stress abstinence and responsibility to adolescents.

President Bush chose it as his 404th Point of Light. A letter from him lauds staffers for their "shining example."

Run by Meharry Medical College, where Foster once headed obstetrics and gynecology, IHAF is based at two mostly black public housing projects on this city's north side. It offers tutoring and counseling to 150 adolescents. In after-school sessions, they learn job skills, self-esteem, self-control and black history.

Teens even set up businesses to finance field trips to places like Washington and New Orleans. For most, it's the first time they've left Nashville.

They can get medical exams, pregnancy tests and condoms. There's no abortion counseling pregnant teens are



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The whole idea is to get young people to delay pregnancy, which just doesn't fit into their lives.

”

— Lorraine Williams Greene, director

referred to other programs.

"The whole idea is to get young people to delay pregnancy, which just doesn't fit into their lives," says director Lorraine Williams Greene.

Foster's admirers say the project is a model of how he'd approach teen pregnancy as surgeon general.

Conservatives condemn the program for distributing contraceptives. The Family Institute, a conservative Nashville group, says the IHAF brochures they have seen don't mention abstinence and the program has an "activist approach" to birth control.

Gary Bauer, head of the conservative Family Research Council, says Foster's approach "is to say abstinence is best and in the next breath make it clear that birth-control pills and condoms are available. That approach has left a trail of suffering and tragedy."

Supporters say critics distort a program that faces reality: 75% of teens in Nashville's housing projects have sex by



Photos by Christopher Berkay

ROLE-PLAYING: Terrell Carter and Amelia Turner participate in an exercise of the 'I Have A Future' program in Nashville. The program teaches self-control, self-esteem, job skills and black history.

age 15. In 1993, the adolescent pregnancy rate here in Davidson County was 30 per 1,000.

When Foster and others started IHAF, says David Salcher, director of Centers for Disease Control and Prevention, "They sat down with parents and found out what they wanted. They came out really pushing abstinence, but they also had condoms available."

"There's a lot of pressure" to have sex, says Amelia Turner, 18. Program counselors "let us know that if you want to have sex, here's what you can use. But the best sex is no sex."

Greene says little money is available to document IHAF's effectiveness, but one 30-month survey ending in 1991 showed "statistically significant" declines in teen pregnancy and dropout rates.

IHAF teens include those referred by schools and proba-

tion officers, honor roll students and athletes.

More than half are young men, a reminder that teen pregnancy is not just a female problem. There are many reminders at the bleak John Henry Hale Houses, where single mothers head 83% of families.

Without IHAF, Jason Gordon, 18, says, he'd "be running from the police." Instead, he's a Fisk University freshman. "They ensured I would go to college. They pushed to keep me on my toes."

Terrell Carter, 18, credits the program for teaching him that fathering a child is "nothing to be proud of." He now has "more respect for girls. They're not just sex objects."

"It turns young people's lives around," says Louis Sullivan, secretary of Health and Human Services under Bush. It's "the kind of program that the

country needs."

Urban Institute sociologist Martha Burt "loves" the program. By saturating a small area and sticking with kids for years, it offers "enough peer support that they can withstand the pressure around them."

But it's expensive: 14 staff members counsel teens, who often stay in the program for years. IHAF's \$400,000 budget comes from private foundations and gifts from, among others, actor Bill Cosby. As government funds for social programs dry up, starting similar programs will be tough. IHAF itself has a long waiting list.

But parents think the wait is worth it. Says Sandra Summers, whose daughter Juanna attends IHAF: "It gives them something to look forward to. Something other than what's on the streets."

Contributing: Mimi Hall



David Scull/The New York Times

More Heat on Nominee

The nominee for Surgeon General, Dr. Henry W. Foster Jr., right, spoke to students at Georgetown University like Gregory Szlyk yesterday as attacks on his nomination were growing on Capitol Hill. Page 8.

N.Y. Times; 2-11-95 p. 1

Nominee's School Program Offers Alternatives to Teens

By RICK BRAGG

Special to The New York Times

NASHVILLE, Feb. 10 — Ideals that are not propped up with practical solutions do not stand much of a chance in the John Henry Hale housing project here. Young women who live in and around the neighborhood say morality alone has seldom saved anyone from the cycle of teen pregnancy.

Amelia Turner, 18, is a five-year veteran of I Have a Future, an after-school program that teaches teenagers to delay sex and childbearing, allowing them to build careers and lives. The program, started in 1987 by President Clinton's nominee for Surgeon General, Dr. Henry W. Foster Jr., combines job training, tutoring, medical services and family planning.

Ms. Turner, the child of a single parent, plans to attend college this fall. She said Dr. Foster's program saved her and hundreds of young women like her. She said it is misguided for anti-abortion groups to oppose his nomination over how many abortions he performed.

"No matter how many he did, he

could have done many, many more," she said. "They don't realize what goes on in the real world. People, wake up."

Ms. Turner, others in the program, and doctors who have worked with Dr. Foster through the years credit his program with using common sense and incentives, not just speeches about abstinence, to keep teenagers from being held back by the weight of newborn children.

Dr. Lorraine Williams Greene, the project's director, stressed that the program does not work with pregnant girls or offer abortion counseling. Rather, she said, counselors teach the young people about abstinence, responsibility and self control. As a last resort, she said, teenagers who insist on having sex are sent to the program's medical personnel, who dispense condoms or birth-control pills if deemed appropriate for their age. She would not say what percentage of the teen-

Continued on Page 8, Column 1

agers were given birth control.

Dr. Greene said the program is so successful that there have been only a few pregnancies among the 800 to 1,000 young women who took an active part in the program. About three-quarters of teen-agers in the city housing projects have sex by age 15.

Financed by foundations and private donors with some state money, the program is administered by the Department of Obstetrics and Gynecology at Meharry Medical College. A Meharry nurse practitioner supervises the program's medical staff.

Last Thursday night, some 30 members of I Have a Future crowded into the meeting room in the John Henry Hale project and one by one compared life now with what might have been. In three years, Nakeeta Hunter, 16, went from "not caring about my grades to being on the honor roll." Now she plans to go to college.

Tasandra Dooley, 16, said, "They taught us that we don't have to be pregnant." Although birth control and abstinence are part of this plan, what the program really does is give her a reason not to join the ranks of unwed mothers, she said.

It makes some of these young people angry to hear a heated debate on abortion from wealthy and powerful people whose children have relatively little to worry about.

"Most of us live in troubled neighborhoods," said 15-year-old Melissa Hunter. "We have children in middle school having babies."

The Surgeon General is in many ways a symbolic position, but the young women and men in I Have a Future, along with several colleagues, say he would bring on practical, workable solutions to the nation's health problems — the same way he brought solutions to the young women at John Henry Hale.

The abortion debate in this case "is a shortsighted issue," said Dr. Richard Smith, director of the Adolescent Gynecology Clinic at Henry Ford Hospital in Detroit, the city where Dr. Foster did his internship. "I think when you look on balance at the work this man has done throughout his career, we really should be applauding the efforts that he has made," he said.

Dr. Foster, a 61-year-old obstetrician, was nominated last week to succeed the outspoken Dr. Joycelyn Elders, whom Mr. Clinton dismissed in December. The choice was supposed to be conciliatory, but conservatives in the past week have rallied against Dr. Foster, because he performed abortions, and because he performed more than either he or the White House originally claimed.

"I don't think doing abortions characterizes Hank Foster," said Dr. David E. Satcher, director of the Centers for Disease Control and Prevention, the former president at Meharry.

Conservatives have also attacked I Have a Future for dispensing birth control items.

In an interview on the ABC News program "Nightline" on Wednesday, Dr. Foster said "no" when asked whether he favored the widespread distribution of condoms. He called abstinence "our first route," without elaborating on further action.

Dr. Foster had been on the faculty at Meharry since 1973 and served as acting president for six months after the departure of Dr. Satcher in 1993. He played a central role in negotiating with Nashville officials over the merger of the city-owned Metropolitan General Hospital with Meharry Hubbard Hospital. That merger is crucial to the medical college, which has lost its accreditation because of declining business at its own, historically black teaching hospital.

It is for his work in poor neighborhoods that Dr. Foster has drawn most of his accolades. I Have a Future is not his first such program.

In the 1970's, when he was elected to the prestigious Institute of Medicine, he fought infant mortality and teen pregnancy in rural Alabama, said Dr. Satcher. Throughout his 37-year career, Dr. Foster worked to prevent pregnancies among poorer young people and to head off the health threats to mother and child caused by too-young pregnancies, Dr. Satcher said.

The I Have a Future program reaches only a fraction of the young people in Nashville, but friends of Dr. Foster, including the teen-agers involved, believe it could be a pilot program for the nation.

It addresses much more than sex, said Dr. Satcher and teen-agers involved in the program. It is based on

Practical solutions are used to back up idealism.

common sense and self-esteem, and slowly, steadily — through informal classes almost every day after school — teaches them how a baby can forever limit their lives, and how to value their own lives.

Dr. Satcher explained how Dr. Foster and others envisioned the program. "They told me that teen-age pregnancy is really not the problem," he said. "It is a symptom, like violence, like drug abuse. The real problem is the attitudes of these young people toward the future. And so they called the program I Have a Future, and they dealt comprehensively with creating a better attitude in these teen-agers about themselves

and about the future.

"They felt that if they could do that, the teen-age pregnancy problem would be taken care of, too, because the young people would have a reason for delaying sexual behavior. You weren't just saying, 'Say no to sex.' You were saying, 'You have a reason to value yourself.'"

Tutors help with studies. Volunteers show teen-agers how to get and keep a job, or even start their own business. But most important, there is always a place to go and someone to talk to, even if it is just with each other.

Melissa Hunter has never met Dr. Foster, but she said his brainchild gives her and her friends a choice they seldom had before. A few make it out of the projects and their teen-age years without a baby and the limitations that one brings, purely on strength of character alone, she said. But it is hard.

"Here they keep you too busy to get into trouble," she said.

Jason Gordon, an 18-year-old whose mother died last year, lives with a sister. He has had every chance to fail, but seven years in the program kept him working, thinking, planning.

Now, every morning, he walks several blocks from his project to Fisk University, where he is studying business. "He's a role model for the others," Dr. Greene said.

Mr. Gordon said: "I would have never gone to college. I needed something to be part of."

The program taught him one thing most of all, he said.

"I know I'm not ready to have a child."



THOMAS S. ENELAND

HANGING TOUGH

Surgeon General nominee Henry Foster fights back

AS DR. HENRY FOSTER STROLLS along a dusty redbrick housing project in Nashville, he is treated like a hometown hero. Bill Clinton's embattled choice for Surgeon General is greeted by dozens of friends in the close-knit black community he has served for more than 20 years. "Hang in there, doctor!" shouts a woman from a passing van.

"I am," responds Foster with determination. "I am."

Indeed, the 61-year-old obstetrician-gynecologist is braced for the fight of his life. So is the White House. For the first time since becoming President, Clinton seems willing to back a controversial nominee in a major confirmation battle—even though the debate will take



COURTESY HENRY FOSTER

place in the new Republican-controlled Senate. Foster, meanwhile, is going on the offensive, angered by conservatives who have attacked his record. "My every move has been watched professionally for the last 20 years," he told PEOPLE. "Now these right-wing groups are grasping at anything. Well, that is totally unacceptable."

Foster's problems began just days after his nomination on Feb. 2. At first he told reporters he had performed "fewer than a dozen pregnancy terminations." But as conservative groups began examining his record, he was forced to concede

that the actual tally was 39. His credibility came under further attack when he admitted he had supervised clinical trials on an experimental drug in the early '80s that ended another 55 pregnancies. "Foster has been in the forefront of the movement for abortion," claims Douglas Johnson, legislative director of the National Right to Life Committee. "Any effort by the Clinton Administration to paint him otherwise is misleading."

Foster says of the abortion controversy, "I should never have gotten into counting. Why should I? I don't know of a single legislator in Washington whom

A "Sometimes I have to sacrifice a fetus to save a mother's life," says Foster (at his youth program in Nashville). "That is a terrible thing."

◀ During World War II, 12-year-old Foster helped his father, Hank Sr. (left), sell eggs in Pine Bluff, Ark.



◀ "I wasn't prepared for this," says Sandy Foster (with Henry at an NAACP dinner).

► In 1958, Foster graduated with honors from medical school in Arkansas.

▼ Al Gore joined the Fosters in Nashville on Feb 13.



UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES



point to his brain and say, 'The key to unlocking everything is here,' " Foster recalls. "I believed him."

After earning a biology degree at Atlanta's Morehouse College in 1954, Foster entered the University of Arkansas Medical School, where he was the only black in the class. Graduating in 1958, Foster interned at the Detroit Receiving Hospital, where he met St. Clair "Sandy" Anderson, now 58, a nurse he married two years later. The couple has two children: Myrna, 32, an intermediate-school teacher in McLean, Va., and Wendell, 31, a director of research at Walt Disney Television in Burbank, Calif.

For most of his career, Foster has dedicated himself to helping the less fortunate, working mainly at John Andrew Memorial Hospital in Tuskegee, Ala., and Nashville's Meharry Medical College—and piloting his own Cessna, a passion, to see patients at both medical centers. In 1987, Foster developed his highly praised "I Have a Future" initiative, which has taught hundreds of Nashville's disadvantaged teens the value of sexual abstinence and education. That work was recognized by George Bush in 1991 as one of his "Thousand Points of Light."

Foster says he was cheered by a recent phone call from his "good friend" Joycelyn Elders, the Surgeon General fired by Clinton last December for, among other things, her controversial remarks about masturbation. She advised him to "tell the truth and be yourself"—and Foster intends to do just that when his confirmation hearings begin in the Senate this month. "I try to confront challenges with three things: intelligence, energy and integrity," he says. "Those are the values I try to teach."

• DAVID ELLIS

• JANE SIMS PODESTA in Nashville

you could walk up to and ask, How many times have you voted on a labor bill? and get a specific answer."

Foster has also come under fire from the conservative Family Research Council, which charged that he had tacitly supported the Tuskegee Project, an infamous federal study in which some 400 poor black men with syphilis were left untreated so public health doctors could track the effects of their disease. An angry Foster insists he actually led a move in 1972 to get the men medical

treatment, and says the charge is politically motivated. "The moment we found out that treatment was withheld, we were outraged. This is all just pure distortion."

In many ways Foster, who grew up in Pine Bluff, Ark., has spent his life defying long odds. His father, Henry Sr., a high school science teacher, and mother, Ivie, a college art teacher, taught young Hank and his sister Doris that education was the way to get ahead in the segregated South. "My father would

Teens say Foster's vision brightens future

By TAMMIE SMITH

Staff Writer

"I Have A Future," the Meharry Medical College teen-age pregnancy prevention program, is generating national attention — and controversy — because it was founded by U.S. surgeon general nominee Dr. Henry Foster.

Yes, the program counsels teens about birth control. Yes, it does give contraceptives to teens.

But that's only part of the picture.

Snapshots of the young people whose lives are changed by the program help fill out the frame.

They are of teens like Tonika East, 17, and Jason Gordon, 18. They live in public housing, a challenging place to grow up. But these young people — outgoing and

**"A bonus of the program
has been the
neighborhood effects."**

DR. LORRAINE WILLIAMS GREENE
Director, I Have a Future

articulate with goals — give a lot of the credit to "I Have A Future" for improving their chances of success.

"I [joined] because everyone else was doing it," Tonika, a high school senior, said smiling, recalling her motives for becoming a "Future" kid in the sixth grade.

These days, others want to be like her.

Through the program, she's become well-traveled, with trips to Atlanta, Washington, Gatlinburg, Cincinnati, New Orleans and Florida. Some were rewards; others were to visit colleges she may choose to attend.

Tonika is the leader now, student body president at Pearl Cohn High School and top dog in IHAF's entrepreneurship program that teaches business ownership.

Jason's motive for getting involved in IHAF six years ago was strictly financial. He wanted the \$10 "reward" for filling out the survey to get into the program. That \$10 was a lot of candy for a 12-year-old.

The \$10 reward is no longer offered, but some program activities have a waiting list of people who want to get involved. Maybe it's because other youngsters see where Jason is headed. He entered Fisk Universi-

ty as a freshman last fall and has gone from being a "Future" kid to an employee, working 10 hours a week as a peer counselor. His goal is to one day own his own business.

"This program gives a lot of people a chance," he said. "Some of us would have made it to college anyway. This program helped ensure that."

In the spotlight

Thursday, President Clinton nominated Foster, former acting president of Meharry, to be surgeon general and offered some marching orders.

"I want Dr. Foster to use what he's learned to help America attack the epidem-

♦ Turn to PAGE 2A, Column 1

The Tennessean, February 5, 1995

Tonika East, 17, a high school student body president and head of its I Have a Future's entrepreneurship program:

"I [joined] because everyone else was doing it."



Jason Gordon, 18, a freshman at Fisk University and peer counselor, got involved in I Have a Future six years ago.

"This program gives a lot of people a chance. Some of us would have made it to college anyway. This program helped ensure that."



Dr. Lorraine Williams Greene, I Have a Future director and a clinical psychologist:

"We deal with issues such as how to be in relationships, how to be intimate with someone and not necessarily have sexual intercourse."



Charmaine Harris, 18, a participant in I Have a Future:

"Let's say you are on a date, dancing, and things start getting hot. Are you going to be passive, or stand up for what you believe?"



Calvin Peters oversees one of I Have a Future's entrepreneurship programs: "We have some kids who have never been out of Nashville. Their eyes light up when they see that bus," that comes to take them to IHAF meetings.



Teens thank Foster for brighter future

FROM PAGE 1A

ic of teen pregnancies."

With speculation that Foster's "I Have a Future" program will be a model for a national teen pregnancy prevention initiative, it is being scrutinized from all angles, especially by Clinton's conservative critics, who claim it is simply a program to disseminate contraceptives.

The attention has put Dr. Lorraine Williams Greene, director of the program, and participants such as Tonika and Jason in the media spotlight.

Greene, a clinical psychologist, said the program's agenda does include talk about birth control. And contraceptives are given

"If a young person requests it, we give it to them. We talk about responsible sexual activity. It is available."

But people who would reduce "I Have a Future" to a program that simply hands out condoms completely miss the mark, she said.

The discussion about birth control is part of a 15-week family life education process that focuses primarily on family dynamics and relationships.

"We deal with issues such as how to be in relationships, how to be intimate with someone and not necessarily have sexual intercourse," Greene explained.

How do you deal with social situations where you find yourself needing to refuse

Or as Charmaine Harris, 18, said: "Let's say you are on a date, dancing, and things start getting hot. Are you going to be passive, or stand up for what you believe?"

Greene said their message to the young people is simple: Sex just doesn't fit into their lives right now.

But it's not just talk, Greene added. Counselors give teens reasons to want to delay sex and parenthood. Youths are kept busy with field trips, after-school activities such as dance and karate classes, support groups, tutoring sessions and jobs.

But there are critics. The Family Institute, a Nashville conservative research group focusing on family issues, said "I Have a Future" comes up short.

The Institute, a year-old project of Mark Toll and Jeff Whitesides, was created, Toll said, to strengthen families. They have reviewed a fact sheet about the Meharry program.

"While the IHAF program seeks to delay the outcomes of 'early pregnancy and childbearing [among others],' there is no mention in the entire document of abstinence or delaying sexual activity," they said in a press release.

Nationally, anti-abortion groups and conservatives have attacked Foster's nomination. The 61-year-old medical educator has long ties to the Planned Parenthood Federation of America. He also has acknowledged he performed a limited number of abortions in his long medical career.

His "I Have a Future" program stresses abstinence. It does not perform abortions.

Touching communities

At John Henry Hale public housing, where some "Future" gatherings are held, you walk down streets where all the homes look alike — brick buildings with house numbers stenciled on doors and small yards that are more dirt than grass.

When a school bus stops at a corner, among the students who tromp off is a young girl holding a baby in one arm, books in the other. Another girl gets off the bus holding a teddy bear and school books.

Despite all the rap songs romancing about the 'hood, the forlorn physical environment is nothing to sing about.

It is in this setting that Meharry social workers and psychologists dispense options.

With the field trips, the money-making endeavors, the program exposes kids to life beyond their neighborhoods.

"We have some kids who have never been out of Nashville," Calvin Peters, who oversees the entrepreneurship program, explained. "Their eyes light up when they see that bus."

The program's impact extends beyond the children enrolled, Greene said, pointing to the difference in community attitudes in John Henry Hale and Preston Taylor homes compared to other housing projects that don't have IHAF.

At John Henry Hale and Preston Taylor, you hear more talk about higher education.

even among students not in IHAF, she said.

In one measure, students at the intervention sites scored higher on self-esteem. The program emphasizes the seven principles of Kwanzaa, an African-American cultural holiday celebrated right after Christmas. The principles include self-determination, unity, collective work and responsibility, cooperative economics, purpose, creativity and faith.

"A bonus of the program has been the neighborhood effects," Greene said. "The kids at the intervention site just had a stronger sense of community, sense of responsibility for self and family."

Are there fewer pregnancies?

Greene said the best way to measure their success is to do long-range tracking of participants. That takes money they don't have. To run the program takes about \$400,000 annually. Each site has a director and four case managers.

The most extensive evaluation effort so far of the 6-year-old program was funded by a grant and lasted 30 months. In it, data was gathered from young people in two public housing projects without the program, comparing it with data from young people at John Henry Hale and Preston Taylor — some in IHAF, some not.

Information was compiled on 998 kids, Greene said.

"We do know there was one known preg-

nancy among those in the intervention group during this 30 months, and 59 known pregnancies among those at the comparison sites."

Still, she cautions against generalizing the data because there was about a year's age difference in the groups compared.

But, if you let the youngsters tell it, there is less sexual activity among those in the program.

Part of it is knowing they are not the only one deciding on abstinence. Part of it is having adults they can talk to openly. Part of it is realizing the possible repercussions of early sexual activity.

"When I first came to Nashville, I used to follow the crowd," said Amelia Turner, 18, a Hume-Fogg honor student who does not live in public housing but has made it a point to be involved in IHAF for five years.

"It got to the point where I would see how people were living. There has to be a better way."

Turner has applied to five colleges, but favors Howard University. She said she wants a dual degree in medicine and biomedical engineering.

"This would be a nice program to have in other cities. In the little town I come from, there is nothing to do, so you may go over to your boyfriend's house. This takes you away from that. You don't have time to do crazy things."

In Nashville, A Portrait of Compassion

*Critics Missing
'Total Picture'*

By John Schwartz

Washington Post Staff Writer

NASHVILLE—Ask Justin Brian, 14, what he's learning in the "I Have a Future" program, founded by Henry W. Foster Jr., President Clinton's choice for surgeon general. Brian's answer: "How to be a man." Fourteen-year-old Mike Rucker says afternoons at the center doing homework help him "stay out of trouble" by "not selling drugs."

Just two weeks ago, Foster was mainly known for the seven-year-old program preaching values such as cooperation and personal esteem that he had brought to teenagers such as Brian and Rucker in Nashville's public housing projects. Today, the 61-year-old obstetrician-gynecologist finds himself the touchstone of another national debate on abortion, his every action over a 35-year career the subject of microscopic scrutiny.

But here, those who know Foster find the portrayal of him by antiabortion activists to bear little resemblance to the community-minded former medical school dean whose hard work and easy-going manner have made him

See FOSTER, A8, Col. 1

popular with all segments of society in a city his friend, Rabbi Randall M. Falk, describes as "the buckle on the 'Bible Belt.'"

The Rev. Bill Sherman of Woodmont Baptist Church, for example, said he and his congregation oppose abortion except in such cases as rape, incest and medical necessity. But he thinks Foster is "an admirable man," and said that many of Foster's attackers are focusing solely on abortion and missing "the total picture."

"He's not a politician—he's a doctor!" said Henry McKay, whom Foster delivered in 1970 and who is now a Meharry Medical College student.

Former mayor Richard Fulton (D)

FOSTER, From A8

back to Meharry in 1973, eventually becoming dean of the medical school.

Medical education is renowned for its rigor, not compassion. But Foster made it a central tenet of his teaching, according to Johnny Jones, a Fayetteville, N.C., obstetrician who studied under Foster in the 1970s. If a resident was curt with a patient or nurse, "He would forcefully set you straight" on the spot, Jones recalled, and might follow up with a closed-door conference. "It wasn't a habit they would continually repeat," Jones added.

Linda Williams, Foster's assistant from 1973 until 1990, said that Foster would scrutinize the weekly stack of patient surveys, looking for complaints about his staff, and follow up personally. "It was very important that the patients were treated with dignity," Williams said.

By most accounts, Foster's most important contribution at Meharry was the creation of the "I Have a Future" program. By the 1980s, Foster had decided that treating people for illness was not enough, that the problems of the poor were woven together too tightly to fix one piece at a time. So in 1987, he visited Nashville's tough housing projects, dining with residents and asking them what kind of social program they thought they needed for their children. Again

"Because things he's said have been misinterpreted, he's almost afraid to make a statement."

—Rabbi Randall M. Falk

said that it's hard for people in Nashville to understand how Foster's nomination has become so entangled with the abortion issue. But he has an idea. "I was in Congress for seven terms," Fulton said, "and I know that quite often members of Congress get carried away and ask questions that possibly have no bearing on the immediate problem before them."

On ABC-TV's "Nightline" last Wednesday, viewers saw a defensive, faltering Foster, far different from the articulate advocate people have come to know here. But friends figure that with no previous political experience, Foster was unprepared for the harsh attacks of antiabortion groups and the intense media scrutiny that quickly followed Clinton's an-

nouncement of his choice. "I imagine that all of this sudden glare of the spotlight has been a little overwhelming," Falk said. "Because things he's said have been misinterpreted, he's almost afraid to make a statement."

Born in Pine Bluff, Ark., Foster earned his bachelor of science degree from Morehouse College in 1954, where a former classmate, Louis W. Sullivan, secretary of health and human services in the Bush administration, recalls an exceptional gift for humor.

He "could keep you rolling in stitches all night," Sullivan said. "People would say, 'Please, Hank, no more!' Your sides were aching and your eyes dry from having been in tears too long."

and again he heard the same story: Just as much as good health, the kids of the projects needed hope, a commodity in short supply in the drug-ridden, violent neighborhoods.

Based in the housing projects it serves, the program preaches sexual abstinence and a strong anti-drug message, and stresses such values as cooperation, personal responsibility and self-esteem. Staff workers often drive the message home with striking object lessons. Program director Lorraine Williams Greene said that if two youths are fighting with each other, the staffers might make them tie their shoelaces together, saying, "You have to deal with each other. You want to argue? You want to fight? Fine. But you're going to have your shoelaces tied together the rest of the day."

The program also includes a measure of sex education in its curriculum, a fact that has drawn some fire from conservatives. Foster wrote a 1993 essay for the Nashville Tennessean supporting the nomination of Joycelyn Elders as surgeon general and stressing the importance of sex education.

"In America, we live in an open society, which is as it should be," he wrote. "In this environment of openness, our young people are bombarded with sexual messages through the media virtually from the time they arise in the morning until they retire at night. Yet, elements in our open society seek to deny providing our young people the educational basis to protect themselves from the negative effects of these media messages. . . . Sexuality education and contraceptive availability must be coupled together to be effective."

The program has earned national recognition. President George Bush named the program one of the thousand "Points of Light." Though success is hard to measure, Williams Greene points to the fact that between 1988 and 1991, there has only

been one unintended pregnancy among participants in the program, versus 59 in a similar group of young people in other Nashville housing projects who did not participate.

Today it serves some 500 children in Nashville housing projects with a budget of \$400,000 a year, some of which goes directly to students in an entrepreneurship program to start small businesses.

Justin Wilson, a prominent Republican attorney here and a member of the Meharry board of trustees, said that Foster has an uncanny knack for bridging the cultural gaps between blacks and whites. Again and again, as issues came up that could have increased friction between the races, "Doctor Foster was able to deal with issues that had heavy racial overtones in a way which was nonthreatening to either blacks or whites."

That diplomatic style came in handy as Foster became involved in one of the most controversial issues in recent Nashville history: the city's agreement to merge Nashville's aged General Hospital with Meharry's newer Hubbard Hospital, turning the institution over to Meharry to operate.

Turning the city's medical services over to Meharry made good business sense. Renovating General would have cost much more but the racial implications of entrusting them to a black institution threatened to scuttle the deal. When former Meharry president David Satcher left Meharry to head the Centers for Disease Control in Atlanta, Foster as acting president had to recruit the physicians needed to bring the negotiations to a suc-

Foster went back to Arkansas to attend medical school. The only African American in his class, he graduated with top honors and continued his medical training in Michigan, Massachusetts and then here at Meharry, one of the nation's few predominantly black medical schools, where he completed a three-year residency in obstetrics and gynecology.

After completing medical training in 1965, Foster became chief of obstetrics and gynecology at the John A. Andrew Memorial Hospital of Tuskegee University, where he founded a regional program to provide health services to poor mothers and children that became a model for others across the country. He came

See FOSTER, A10, Col. 1

successful conclusion. Meharry general counsel Richard Jackson said, "A lot of them came because of their belief in him."

Could Foster's penchant for finessing unpleasantness help to explain how Foster got into political trouble? "That's a legitimate question," Wilson said.

Instead of volunteering a worst-case estimate of the number of abortions he had performed during his medical career, Foster offered a number off the top of his head, a number that later would have to be corrected after a painstaking review of hospital records. Though he said Foster is scrupulously honest, Wilson said, "Perhaps his ability to deal with the broad issues, and the consensus-forming manner, does not take adequate account of all of the specific facts. He's more involved in the big picture than the details."

Meharry's board of trustees rejected Foster's bid to become president of the medical school because of shortcomings as an administrator, Meharry sources said. Jackson acknowledged that management is not one of Foster's strengths. Instead, Jackson said, Foster's most comfortable role is similar to that of a "tribal elder."

Jackson said that Foster "keeps the village leadership motivated and focused—and helps set their priorities. . . . It's very similar to what you want in a surgeon general."



FOSTER: The obstetrician-gynecologist says he wants the surgeon general's job because "it gives me a platform to multiply what I can do."

By Tim Dillon, USA TODAY

THE NOMINEE, IN HIS OWN WORDS

Henry Foster talks like a lawyer, pausing before answering a question and enunciating each word carefully.

President Clinton's surgeon general nominee, an obstetrician and gynecologist, wears a pink metal lapel pin in the shape of a ribbon, a symbol of breast cancer awareness. He warns visitors that lung cancer is now the No. 1 killer of American women.

Foster is a probably a stranger to most Americans, his name a synonym for a bungled White House nomination. The nation will meet him when his confirmation hearings begin May 2.

His serious, professorial demeanor diminishes as he relaxes. The Southern-tinged voice moves to a higher pitch and his round face softens as he giggles. On one wrist is a gold watch, on the other a rubber band to remind him to speak more slowly.

In a 45-minute interview in the White House basement office of John Podesta, Clinton's staff secretary, Foster discussed his career and the controversies surrounding his nomination:

ON WHY HE WANTS THE JOB: "It gives me a platform to multiply what I can do for mothers and babies and particularly adolescent health care, since the president has stated that teen pregnancy is one of our nation's major health problems. It's epidemic."

ON CAREER REGRETS: "I'm very proud of what I've accomplished in my life. I've worked very hard. I was brought up, fortunately, by two strong parents who did not believe in damning the system. They believed in the American system in spite of what we had to live in the segregated South."

ON TRUST IN THE SYSTEM: "I'm a little black kid coming from the segregated South in Arkansas that never did

think I would be in this position. ... That's a quantum leap and only in an open country like this could that occur. This is a great nation."

ON RACE IN THE DEBATE: "This is not about race at all. It's about the health of this nation. It's about the health of our children. My nomination is not about race; it's about my capability and what I can do for all people."

ON THE SYPHILIS STUDY: "When I first heard about the syphilis study in 1972, I was outraged. In fact, I was incredulous. I did not think that kind of research could be federally sanctioned in 1972. But I was wrong. ... It was I who went ... to identify the victims so they could be treated."

ON HIS ODDS: "On one of the shows recently they said only 16 or 18 (senators) said they'd vote for me. That didn't bother me at all, because most people have done what I think is fair. They said they will wait until after the hearings and make their judgments."

ON CONTROVERSY: "One, I don't think, can be fully prepared, but it does make me recall one of my favorite phraseologist's statements. The late Winston Churchill once said that democracy is absolutely the worst form of government that's ever been created, except for all the others."

ON HIS POLITICS: "I have voted Democrat and Republican (for former Tennessee governor Lamar Alexander, for example). He's a good person, I can tell you that."

ON HIS OPTIMISM: "I was whistling one morning and they said, 'What are you so happy about?' I was able to get up on my own strength this morning and assume a vertical position with no help. That is something very good to be happy about."

SHOW: *All Things Considered*
National Public Radio (4:30 pm ET)
February 17, 1995

HEADLINE: Dr. Foster's Work in Nashville Praised

BYLINE: JOANNE SILBERNER

HIGHLIGHT:

Dr. Henry Foster's work in Nashville, Tennessee with teen programs and upgrading the Meharry Medical College, brings praise from those who know him. He is known as a quiet, unassuming doctor.

BODY:

NOAH ADAMS, Host: For the last two weeks, President Clinton's nominee to be U.S. Surgeon General, Dr. Henry Foster, has been in the middle of the controversy. It centers on procedures he did as a gynecologist, hysterectomies on retarded women, and abortions. Dr. Foster has said he wants the chance to tell Congress, and the American people, who he really is. A poll this week showed that even though Americans may not be clear about that, more support the nomination than oppose it. NPR's Joanne Silberner visited Dr. Foster's home town, Nashville, Tennessee, this week, to find out what people there think about it.

JOANNE SILBERNER, Reporter: If you want to know about Henry Foster, go to Meharry Medical College where he spent 21 years teaching medical students, taking care of patients, and as an administrator. At Meharry's Hubbard Hospital, workers have ripped out most of the walls and ceilings. Here on the fifth floor, the water pipes, the electrical lines, the heating ducts are all exposed. Hubbard Hospital has just begun an 18-month renovation.

WILLIAM HARVEY, Meharry-Hubbard Hospital Administrator: It will be a 150-bed hospital, completely renovated throughout, all new equipment. It'll be- it'll be a gorgeous new hospital for the city of Nashville.

JOANNE SILBERNER: Hospital administrator William Harvey shows us around what will be the pediatrics ward. The renovation is the final step in a bitterly contested merger between Meharry's Hubbard Hospital and Nashville's General Hospital, a merger that's happening largely because of Henry Foster.

While the merger will save the city money, it means closing down the white-run public hospital and bringing patients and city money to black-run Meharry - something some people in Nashville didn't want. The city went through months of public hearings on the merger. Republicans and Democrats both credit Foster with being able to bring all sides together. He worked behind the scenes in closed-door meetings, keeping people talking. Nashville mayor Phil Bredesen says Foster's quiet style worked.

PHIL BREDESEN, Mayor of Nashville, Tennessee: He has a very nice, low-key way of getting things done. What I found was that- that in a very political environment, which things like this merger were, he had a way of getting things done without being overtly political, that his kind of quietness and conservatism and competence was a very- it just was just a very politically effective approach.

JOANNE SILBERNER: For the merger to proceed, Meharry had to prove that highly qualified doctors would want to come to work here. John Mauppin [sp], head of Meharry, says it wasn't easy.

JOHN MAUPPIN, Meharry Hospital: Dr. Foster led that recruitment and brought some outstanding physicians from around this country who were dedicated to the mission of Meharry to serve the underserved and were willing to come to Nashville, Tennessee and work at General Hospital, even in the old facility. Most people didn't believe that we would be able to recruit people like that.

JOANNE SILBERNER: There are lots of reasons doctors might not want to come to Meharry. Some of the patients can't pay their doctors' bills at all, and many patients' bills are paid at low government rates. The medical school doesn't own a lot of fancy machines and didn't have enough patients to maintain accreditation for some of its teaching programs, and the emphasis here is on primary care, not the highly-specialized medicine that many doctors find more interesting. But Foster was able to meet the city's requirement of 56 doctors. One of the doctors who came was obstetrician-gynecologist Elwin Grimes [sp].

ELWIN GRIMES, Obstetrician-Gynecologist: First of all, he told me that he was going to present me with a challenge that would be one of the most difficult of my whole life. All right, and then he described the need that existed here, and from there, we got into discussions that have to do with what's important in regard to the contributions that we make as physicians. What are the things that we all do that make a difference?

JOANNE SILBERNER: What Foster is most known for in Nashville and what was supposed to sell him to the Congress is a local program called 'I Have a Future.'

JOE JENKINS, 'I Have a Future' Instructor: OK. Once again, welcome to family life education. Once again, for those who may have forgotten from week-to-week, I'm Joe Jenkins.

JOANNE SILBERNER: Twenty-five teens are sitting, boy-girl-boy-girl, in a classroom in a Nashville high school. It's an after school program Foster started eight years ago for teenagers from two city housing projects. Every day Joe Jenkins starts the class the same way.

JOE JENKINS: OK. Everybody understand this is a teen pregnant prevention program? Everybody understand the best way to prevent pregnancy is-

STUDENTS IN CLASS: Abstinence.

JOE JENKINS: Abstinence. Once again, always understand, no matter what you hear from everybody else, there are more people not having sex than there are having sex.

JOANNE SILBERNER: It's not just abstinence, the program also teaches birth control methods and sexual responsibility, something that conservatives raised concerns about the first day after Foster's nomination. But the focus of the program is life skills; teaching the teens how to conduct themselves in job interviews and on the job, having them run a small business, tutoring, taking them on trips, that sort of thing. The idea is to teach the teens that there are better ways to get attention than having a baby.

Tanya Rutledge [sp] is 17. She's been in the program eight years.

TANYA RUTLEDGE, 'I Have a Future' Student: I plan to graduate this year and go to college, and I want to own my own beauty shop.

JOANNE SILBERNER: If you hadn't been in the program, what do you think your life would be like?

TANYA RUTLEDGE: I think I would probably be like my other friends which have children or they're about to have a child.

JOANNE SILBERNER: What would that kind of life be like?

TANYA RUTLEDGE: It would be awful because I wouldn't be able to go to college and make the kind of money that I want to make.

JOANNE SILBERNER: More than 800 teens have gone through the program since Foster started it. There are no hard statistics on how well the program is doing, but during one 30-month period, only one girl got pregnant - much lower than in the past. In some circles, like the housing projects and the local medical community, Henry Foster is a hero. But citywide he is not that well known. Frank Gibson, political editor of one of Nashville's newspapers, The Tennessean, didn't expect even the nomination or what followed.

FRANK GIBSON, Political Editor, The Tennessean: I would. I would say that I was surprised, but only because I - I would not have thought about it. You know, he just did not have a very high profile in this community. No, you know - no controversy, certainly that this newspaper has known about and written about.

JOANNE SILBERNER: The national controversy over abortion, that started after the president named Foster, hasn't cost him support here. Gibson says the local community is continuing to back Foster. There were no major questions about the hysterectomies Foster performed on retarded women. The only opposition in Nashville to Foster's nomination seems to come from people who don't know him personally. They, like some

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national leaders, strongly object to the abortions he's done. Bill Bomgardner [sp] leads the local chapter of an anti-abortion group, the Christian Action Council.

BILL BOMGARDNER, Local Leader Christian Action Council: I certainly have no personal ill will to Dr. Foster. I just think it's a poor decision to put a pro-abortionist on as the top doc. There are certain things that disqualify you, and this is one of those issues. Killing people is sort of permanent.

JOANNE SILBERNER: But not all abortion opponents feel that way. Avon Williams III [sp] is the son of the first African-American state senator in Tennessee, and has known Foster his whole life. Foster nursed Williams' wife through a tough pregnancy and delivered his daughter. Williams is a Republican, a member of the Christian right. He thinks abortion should only be considered when the mother's life is at stake. Williams says Foster shouldn't have done any abortions, but that all the other things that he has done would make him a good surgeon general.

AVON WILLIAMS III, Acquaintance of Dr. Foster: If you're going to make this a referendum on abortion, and on doctors who perform abortions, Hank Foster is probably the worst choice you could possibly make. I mean, from a standpoint of political strategy, as a pro-lifer, Hank Foster is not- would not be the guy I'd be trying to bring down. Hank Foster has not been an abortionist. He's been promoting life most of his career. Why would we choose somebody like Hank Foster to vilify? It just doesn't make sense to me.

JOANNE SILBERNER: On a cold and rainy Wednesday evening, the male chorus at the First Baptist Church on Nashville's Capitol Hill is rehearsing. Down the hall, the pastor Reverend Sherman Tribble [sp] has gathered a few people together to talk about Henry Foster. This is Foster's church. He's been a member since he arrived in Nashville in 1973. The congregation strongly supports him. Inez Crutchfield [sp] is a church member and a patient of Dr. Foster's.

INEZ CRUTCHFIELD, Patient of Dr. Foster: Because of him, I frequently say, 'I am alive today.' Because it was Dr. Foster who discovered that I had cancer at a very early stage, and it was Dr. Foster who did the surgery.

JOANNE SILBERNER: Crutchfield says she was thrilled when she heard her doctor had been nominated as surgeon general. But the political battle that began soon after upset her.

INEZ CRUTCHFIELD: I was very angry. I was just furious, to be very frank with you. That anyone would question- having known him as well as I did, I could not imagine persons questioning his professionalism, his reputation here, in Tennessee, in this city, was without blemishes, far as I- I would know.

JOANNE SILBERNER: Foster came back to the church last weekend. Reverend Sherman Tribble says he's in good spirits, his faith challenged, but not shaken.

Rev. SHERMAN TRIBBLE, Pastor, First Baptist Church: Sunday when we looked at our New Testament lesson, one of the verses from Luke, Chapter 12 said that, when persons come before the authorities to be tried, don't spend a lot of time concocting answers. Rely on the spirit, or the Holy Spirit to guide you. And as he looked at that particular verse, when we were leaving the service, he just kept pointing to it. He'd say, 'Reverend, that's it. That's it. That's it.' And, I guess, for him it said that, when I get a chance to present my views in the public forum, it'll be all right.

JOANNE SILBERNER: Foster began presenting his views this week. He spent two days on Capitol Hill in Washington, talking to senators, looking for the same kind of support he's gotten from his community. This is Joanne Silberner reporting.

I HAVE A FUTURE:

Preventing Teen Pregnancy Through Abstinence and Hope

INNOVATIVE PROGRAM FOUNDED IN INNER-CITY HOUSING PROJECTS:

- In 1987, Dr. Henry Foster -- then Chairman of the Ob/Gyn Department at Meharry Medical College -- founded a program for teenagers in two housing projects in Nashville, Tennessee. It was a pioneering effort to reduce the number of teen pregnancies while also addressing other serious problems of inner-city youth -- drugs, violence, alcohol abuse, homicide, unemployment.
- The prevention of teen pregnancy is a critical focus because early childbearing is so often linked -- either as a cause or a consequence -- to violence, drug abuse, tobacco and alcohol use, sexually-transmitted diseases, AIDS, poverty, and welfare.
- The goal of the I Have A Future program is to address these inter-related problems by enhancing the young people's self-image, stressing personal responsibility, and presenting positive alternatives for the future.

IHAF GIVES TEENS REASONS TO WANT TO DELAY SEX & PREGNANCY:

- Dr. Foster founded IHAF because he saw that most teen pregnancy programs at that time were limited to advocating contraception. But these programs did not have a significant impact on teen pregnancy because they only addressed the *capacity* to have a child, without addressing the *desire* to have a child. Research has shown that many impoverished teenagers in inner-city neighborhoods think their futures hold little hope other than having babies.
- Dr. Foster was convinced that a much broader approach was needed, one that empowered inner-city teens to take control of their own futures -- giving them incentives to delay childbearing until a more appropriate time. IHAF was designed on the premise that changes in behavior should be addressed within a framework that provides strategies for positive decision making, while enhancing self-image.
- I Have A Future helps teenagers understand what they should say "no" to -- stressing abstinence throughout the program. But, equally importantly, it also gives them something to say "yes" to -- education, jobs, and successful futures within their reach.

FAMILY AND COMMUNITY INVOLVEMENT AT ALL LEVELS:

- Dr. Foster wanted the community to play a key role in designing the program from the start. He commissioned a *Head Of Household Survey* -- asking parents and community leaders the main problems their teenagers faced and what programs might help solve them. The three biggest problems they identified were: drug and alcohol abuse, teen pregnancy, and crime. To solve these, they recommended: tutoring and job training, drug prevention programs, and sexual education. And 91% of the parents asked that it be easier for sexually active teenagers to get birth control.
- IHAF is now part of the fabric of the community itself, with a role for everyone -- from parents and grandparents, to clergy and business leaders, to volunteers and local government.

WHO? WHAT? WHERE? WHEN? HOW? – THE DETAILS

- Who May Join? Any teenager, aged 10 - 17, who lives in the *John Henry Hale* or the *Preston Taylor* housing projects may participate in IHAF -- which attracts an average of 150 youths each week. More than half of the participants are African American males. Over 850 youths have participated since the program was founded.
- When Is It Open? IHAF is open in the afternoon, on weekends, and all summer -- times when teenagers are not in school, often get in trouble, and need a place to go.
- Values: IHAF is a value-based program, with these values permeating all aspects of the curriculum -- self-esteem; physical and mental well-being; completion of school; abstinence; sexual responsibility; self control; ability to handle inter-personal conflict; and the value of helping others.
- Curriculum: The program is sensitive to different developmental needs and abilities. Consequently the curriculum emphasizes knowledge, attitude, and awareness for early adolescents, and behavioral skills for older adolescents. Classes include:
 - After-School Tutoring / Computer Training
 - Job Readiness And Career Development Classes
 - Alcohol And Drug Abuse Prevention Programs
 - Conflict Resolution Training / Violence Prevention
 - Sports / Self-Defense Classes
 - Comprehensive Adolescent Health Services (including contraceptives)
- Activities: IHAF makes a special effort to take the teens on trips out of Nashville. Many of these young people had never left Davidson County. Now, they visit colleges, speak to successful African-American role models, and tour the nation's capitol. Their view of the world -- and what their role in it can be -- grows with every trip.
- The Entrepreneur Program: One of the most popular programs helps teenagers learn more about the working world -- and about personal responsibility -- by giving them the tools to start their own businesses in the communities where they live.

THE RESULTS SPEAK FOR THEMSELVES – FEWER MOMS, MORE GRADS:

- Based on internal evaluations, preliminary results show statistically significant differences between young people in the IHAF program and those who did not participate. Teens who actively participate in IHAF had higher self-esteem, fewer pregnancies, a stronger sense of responsibility, and a greater sense of a promising future. No systematic evaluation has been performed but the program is actively seeking grants to fund outside research that would track the participants over time.
- Fewer Pregnant Teens: One 30-month internal study reported 1 known pregnancy among active participants in the two IHAF housing projects, compared to 59 known pregnancies at two housing projects that didn't have the program.
- More College Students: The program has also demonstrated a rare capacity to hold the attention of older adolescents, including African-American males. In 1994, 24 participants graduated from high school and 16 of these, including 8 males, went on to college. Another 4 entered the Armed Forces.

IHAF IS A NATIONALLY RECOGNIZED AWARD-WINNING PROGRAM:

- In 1989, the American Medical Association awarded IHAF its Adolescent Health Award
- In 1991, President George Bush selected IHAF to be one of America's Thousand Points of Light

FUNDED BY PRESTIGIOUS ORGANIZATIONS AROUND THE COUNTRY:

- Carnegie Corporation of New York
- William T. Grant Foundation
- Bill and Camille Cosby
- State of Tennessee, Department of Health
- United Way of Middle Tennessee

National Organizations Supporting Dr. Foster
As of April 5, 1995

ADVOCATES FOR YOUTH
AFRICAN METHODIST EPISCOPAL CHURCH
ALPHA KAPPA ALPHA SORORITY
ALPHA PHI ALPHA FRATERNITY
AMBULATORY PEDIATRIC ASSOCIATION
AMERICAN ACADEMY OF CHILD AND
 ADOLESCENT PSYCHOLOGY
AMERICAN ACADEMY OF DERMATOLOGY
AMERICAN ACADEMY OF OTOLARYNGOLOGY
AMERICAN ACADEMY OF PAIN PHYSICIANS
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AMERICAN COLLEGE OF CHEST PHYSICIANS
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AMERICAN GROUP PRACTICE ASSOCIATION
AMERICAN SOCIETY OF CATARACT AND
 REFRACTIVE SURGERY
AMERICAN FEDERATION OF STATE, COUNTY,
 AND MUNICIPAL EMPLOYEES
AMERICAN ASSOCIATION OF UNIVERSITY
 WOMEN
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 SCHOOLS
AMERICAN COLLEGE OF PHYSICIANS
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 MEDICINE
AMERICAN SOCIETY OF ANESTHESIOLOGISTS
AMERICANS FOR DEMOCRATIC ACTION
AMERICANS UNITED FOR SEPARATION OF
 CHURCH AND STATE
ASSOCIATION OF ACADEMIC HEALTH
 CENTERS
ASSOCIATION OF AMERICAN MEDICAL
 COLLEGES
ASSOCIATION OF BLACK CARDIOLOGISTS
ASSOCIATION OF MATERNAL AND CHILD
 HEALTH PROGRAMS
ASSOCIATION OF MEDICAL SCHOOL
 PEDIATRIC CHAIRMAN
ASSOCIATION OF MINORITY HEALTH
 PROFESSIONS SCHOOLS
ASSOCIATION OF PROFESSORS OF
 OBSTETRICS AND GYNECOLOGY
ASSOCIATION OF SCHOOLS OF PUBLIC
 HEALTH
ASSOCIATION OF STATE AND TERRITORIAL
 HEALTH OFFICIALS
ASSOCIATION OF TEACHERS OF PREVENTIVE
 MEDICINE

BAPTIST MINISTERS ASSOCIATION
BLACK LEADERSHIP FORUM
B'NAI B'RITH WOMEN
CAMPAIGN FOR WOMEN'S HEALTH
CATHOLICS FOR A FREE CHOICE
CENTER FOR WOMEN POLICY STUDIES
CENTER FOR REPRODUCTIVE LAW & POLICY
CHILDREN'S HEALTH FUND
CLARA BELL DUVALL EDUCATION FUND
COALITION OF BLACK TRADE UNIONS
COALITION OF LABOR UNION WOMEN
COUNCIL OF UNIVERSITY CHAIRS OF
 OBSTETRICS AND GYNECOLOGY
COUNCIL ON RESIDENT EDUCATION IN
 OBSTETRICS AND GYNECOLOGY
DELTA SIGMA THETA SORORITY
ENDOCRINE SOCIETY
ECUMENICAL MINISTERIAL ASSOCIATION
HOLLYWOOD WOMEN'S POLITICAL COMMITTEE
HUMAN RIGHTS CAMPAIGN FUND
INTERNATIONAL WOMEN'S HEALTH
 COALITION
KAPPA ALPHA PSI FRATERNITY
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NATIONAL ABORTION AND REPRODUCTIVE
 RIGHTS ACTION LEAGUE
NATIONAL ABORTION FEDERATION
NATIONAL ALLIANCE OF BLACK SCHOOL
 EDUCATORS
NATIONAL ASIAN WOMEN'S HEALTH
 ORGANIZATION
NATIONAL ASSOCIATION OF COUNTY AND
 CITY HEALTH OFFICIALS
NATIONAL ASSOCIATION FOR THE
 ADVANCEMENT OF COLORED PEOPLE
NATIONAL ASSOCIATION FOR EQUAL
 OPPORTUNITY IN HIGHER EDUCATION
NATIONAL ASSOCIATION FOR PUBLIC
 HEALTH POLICY
NATIONAL ASSOCIATION OF PEOPLE WITH
 AIDS
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NATIONAL BLACK CHILD DEVELOPMENT
 INSTITUTE
NATIONAL BLACK NURSES' ASSOCIATION
NATIONAL BLACK WOMEN'S HEALTH PROJECT
NATIONAL COUNCIL OF JEWISH WOMEN
NATIONAL COUNCIL OF NEGRO WOMEN
NATIONAL COUNCIL OF SENIOR CITIZENS
NATIONAL EDUCATION ASSOCIATION
NATIONAL FAMILY PLANNING &
 REPRODUCTIVE HEALTH ASSOCIATION
NATIONAL HISPANIC MEDICAL ASSOCIATION

1

NATIONAL MEDICAL ASSOCIATION
NATIONAL MINORITY AIDS COUNCIL
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SOCIETY OF CRITICAL CARE MEDICINE
SOCIETY FOR INVESTIGATIVE DERMATOLOGY
SOCIETY FOR PEDIATRIC RESEARCH
SUMMIT '93 HEALTH COALITION
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VOTERS FOR CHOICE
WIDER OPPORTUNITIES FOR WOMEN
WOMEN'S LEGAL DEFENSE FUND
ZERO POPULATION GROWTH
ZETA PHI BETA SORORITY

NOMINATION OF DR. HENRY FOSTER FOR SURGEON GENERAL

Questions & Answers

MESSAGE

Extreme right-wing opponents of a woman's right to choose will use any diversionary tactic in their arsenal to derail the nomination of Dr. Henry Foster. They want to take away a woman's right to choose and will try to make this a debate about abortion. Americans deserve a debate about the qualifications of one of the nation's leading physicians, whose nomination has earned strong support from the medical community around the country.

A LENGTHY, DISTINGUISHED ACADEMIC CAREER

As a respected scholar, an accomplished researcher, a practicing physician, and a medical school dean, Dr. Foster has published widely on a variety of subjects. A person of Dr. Foster's experience should be judged by the objectives he has pursued throughout the course of a 38-year career -- not by distortions of his writings taken out of context.

- Dr. Foster has delivered thousands of babies.
- Dr. Foster has helped train hundreds of doctors, many of whom went on to serve the nation's poor urban and rural communities.
- Dr. Foster started "*I Have A Future*" -- a community-based program to fight teen pregnancy by teaching abstinence and self-esteem -- chosen by President Bush as one of America's 1,000 Points of Light.

Following, please find a compilation of common questions and sample responses on the following subjects:

- The "Credibility" Issue
- Abortion
- Sterilization
- Accreditation of Meharry Medical College
- The Tuskegee Syphilis Experiment

April 6, 1995

CREDIBILITY

CHARGE: *I'm concerned about the credibility of Dr. Foster and the White House. Different numbers have been tossed around, incorrect information was sent up to the Senate, there seems to have been an intent to deceive. Credibility is the real issue to me.*

RESPONSE: There was absolutely no intent to deceive. Dr. Foster answered an initial question about the number of abortions he had performed by relying on his memory, without reviewing his entire record, and this was certainly a mistake. But to suggest that he deliberately lied about that record is outrageous and unfair. Dr. Foster is an honest physician and academic with a distinguished 38 year record of service. He was appointed to the Ethics Advisory Board for President Carter's Secretary of Health and is currently serving his second term on the Ethics Committee of the Nashville Academy of Medicine.

The issue here is not "credibility" and the debate is not about numbers. The issue is the qualification of one of the nation's leading physicians to be Surgeon General and his support of a woman's right to choose. "Credibility" is a smoke screen -- thrown up by those who want to avoid taking a public stand on the abortion issue, but nonetheless want to destroy this nomination. And they make no bones about their strategy of diversion. The Republican Speaker of the House has openly advised his party to "never touch" the issues at hand -- specifically, abortion -- and keep trying to make this important debate about "dishonesty."

The real issues here are the outstanding qualifications of this nominee to serve as Surgeon General and the right of all American women to choose. Let those who would oppose Dr. Foster take on these issues honestly and publicly state their positions, rather than hiding behind the credibility smokescreen. If they refuse, their credibility becomes the issue.

ABORTION

CHARGE: *Dr. Foster advocates the use of abortion as a means of contraception.*

RESPONSE: Dr. Foster has never advocated that abortion be used in place of contraception. In fact, Dr. Foster has repeatedly expressed his concern about the increased reliance on abortion over birth control measures. He believes abortion should be safe, legal, and rare.
[continued]

Throughout his medical practice and distinguished career, Dr. Foster has promoted abstinence as the best way to prevent unwanted pregnancy. His life's work, as he has said repeatedly, has been dedicated to making sure young people don't have to face the choice of having abortions.

BACKGROUND: Dr. Foster published an article, "*Contraceptives in Sickle Cell Disease*," which examined the different reproductive options for women with sickle cell anemia. He acknowledged that abortion is viewed as a contraceptive in parts of Europe, but did not advocate the use of abortion as a contraceptive in the U.S.

CHARGE: *Dr. Foster is an abortionist.*

RESPONSE: Dr. Foster is one of the nation's leading physicians -- a highly respected obstetrician/gynecologist and one of the leading medical educators in the country. In his distinguished 38-year career, Dr. Foster has delivered thousands of babies and instructed hundreds of young physicians.

Dr. Foster's life has been dedicated to preventing unwanted pregnancies and making sure young people don't have to face the choice of having abortions. Dr. Foster does believe strongly in the right of a woman to choose and echoes the President's belief that abortions should be safe, legal, and rare.

CHARGE: *Dr. Foster has promoted in-home abortions to make them more available as contraceptives.*

RESPONSE: Dr. Foster does not equate any form of abortion with contraception. He has never promoted the use of in-home abortions, nor has he indicated such support in his writings.

Dr. Foster believes that abortions should be safe, legal and rare. He believes that when abortions are done, they should be performed in the safest manner possible. Therefore, as an expert in the field of maternal health, he supports research into safer methods.
[continued]

BACKGROUND: As Chairman of the Department of Obstetrics and Gynecology, Dr. Foster was the principal investigator at Meharry Medical College for an FDA-approved clinical trial -- conducted in many medical centers throughout the country -- to test the efficacy and safety of an abortifacient suppository administered during early pregnancy. The trial was a research project conducted in an academic medical center, all medical procedures were performed in the hospital, and all patients were volunteers.

CHARGE: *Dr. Foster's promotion of abortion is evidence of the liberal mindset that encourages sexual promiscuity among young people and does not require them to take responsibility for their actions.*

RESPONSE: This is a total distortion. Dr. Foster has never promoted abortion. In fact, he has devoted much of his professional life and career to making sure none of his patients ever has to face that decision. Dr. Foster established a program in the housing projects of Nashville called "*I Have a Future*," which stresses abstinence as the best way to prevent unwanted pregnancy.

Through "*I Have A Future*," Dr. Foster and his team help build the self-esteem of young men and women. By providing education and job opportunities, the program tells teens that they have futures full of positive options so its best to delay sex and pregnancy for a more appropriate time. In fact, Dr. Foster established this program because he found that most teen pregnancy programs were limited to advocating contraception, rather than empowering teenagers to take charge of their lives and consciously make other choices. Since many impoverished inner-city teenagers think their futures hold little hope other than having babies, Dr. Foster developed a program that addressed the *desire* to have a child, not just the *capacity*.

"*I Have A Future*" is a nationally recognized program that has received support from the Carnegie Corporation, the Tennessee Department of Health, and Bill and Camille Cosby. "*I Have A Future's*" approach to preventing teen pregnancy was recognized by President Bush in 1991 when he chose the program to be one of America's Thousand Points of Light.

STERILIZATION

CHARGE: *Dr. Foster has performed hysterectomies to sterilize severely retarded women.*

RESPONSE: In 1976, when Dr. Foster wrote that he had performed hysterectomies on severely retarded women, the sterilization of severely mentally retarded women for hygienic purposes was within the medical mainstream. Medical theory and practice have changed in the intervening decades and Dr. Foster no longer accepts the sterilization of a severely mentally retarded woman as appropriate. Dr. Foster believes strongly in the individual rights of the disabled.

In the article, Dr. Foster stressed that *"obstetricians and gynecologists must guard vigilantly against injudicious and indiscriminate removal of the normal uterus."*

BACKGROUND: Nineteen years ago, in 1976, Dr. Foster wrote an article saying he had recently *"begun to use hysterectomy in patients with severe mental retardation."* This was done to *"eliminate the menses, which can be of significant hygienic benefit to those severely handicapped individuals."*

Dr. Arthur Caplan, Director of the Center for Bioethics at the University of Pennsylvania, said that Dr. Foster's article seemed keenly aware of the long history of abuse of surgical sterilizations. For its time, the article *"represents an enlightened and cutting-edge opinion about the need of caution and care with respect to that form of surgical sterilization."* [New York Times, 2/13/95]

CHARGE: *Dr. Foster has routinely encouraged sterilization of patients with sickle cell disease after they have been able to deliver a child.*

RESPONSE: Dr. Foster actively opposed routine sterilization of sickle-cell disease patients. He has encouraged counseling, screening, and patient management to enable women with this disease to have healthy babies. From the start of his medical career, Dr. Foster has conducted path-breaking scientific research on the diagnosis and treatment of sickle cell disease, improving both maternal and child survival rates.

ACCREDITATION OF MEHARRY MEDICAL COLLEGE

CHARGE: *Meharry Medical College lost its accreditation during Dr. Foster's tenure.*

RESPONSE: Meharry Medical College never lost its accreditation. However, three of its ten medical residency training programs -- including the ob/gyn residency program in June 1991 -- did lose their accreditation. At the time, they had insufficient patient volume and case diversity to provide adequate medical experience for their residents. As is true for many historically black hospitals, Meharry did not receive adequate public funding for the care it provided to uninsured patients and, without these funds, its patient volume declined.

Dr. Foster committed himself to doing everything in his power to preserve the vital role of one of the nation's foremost black hospitals. In 1992, he played a key role in a merger between Meharry and Nashville Metropolitan Hospital that is expected to increase patient volume and result in the reinstatement of these three residency programs. The merger was conditional upon the development of a top-flight medical faculty, which Dr. Foster successfully recruited.

It was clear in the 1991 decision that the quality of Meharry's residency programs was not the problem. David Denton of the Southern Regional Education Board said, *"People shouldn't confuse the residency problems with the quality of teaching at Meharry. It has been very effective at getting its graduates licensed."* In fact, Meharry has trained more black doctors than any other school in America, at one point providing over 40% of the nation's black doctors and dentists. It plays a key role in attracting minorities to medicine and providing doctors to poor urban areas and under-served rural towns.

TUSKEGEE SYPHILIS STUDY

CHARGE: *It seems clear from many news accounts that Dr. Foster attended a 1969 meeting of the Macon County Medical Society where the members of the society granted permission to continue the notorious Tuskegee syphilis study in which poor black men were experimented on. How can such a person be considered for the position of Surgeon General?*

RESPONSE: Dr. Foster has said that he first learned of Tuskegee Syphilis study in 1972 and was outraged. As President of the local medical society, he called its members together immediately to try to identify the infected men and get them treatment. He says that he has no memory of attending such a meeting in 1969, but knows that if he had heard of the study earlier, he would have demanded then that it be immediately stopped.

In fact, Broadus Butler, who was appointed by the Department of Health to investigate the study, concluded that: "What was clear from our review was that this was a federal government study from start to finish, with no input or participation from local Tuskegee doctors, Any effort to assign blame to the local doctors -- many of whom weren't even aware of the study until the very end and then were not aware of the details -- is terribly misplaced."

Dr. Foster was a young black doctor who had deliberately chosen to go Alabama to serve the very people he is being accused of neglecting. It is outrageous that groups who oppose Dr. Foster's nomination to achieve their own narrow goals circulate yet another wild allegation to turn attention away from the qualifications of one of the nation's leading physicians for this important position.

A LIFE-LONG RECORD OF SERVICE: **The Accomplishments Of Dr. Henry Foster**

HIGHLY TRAINED PHYSICIAN – DELIVERED THOUSANDS OF BABIES:

Dr. Foster is a highly trained obstetrician/gynecologist, who has delivered thousands of babies in his 38 years of medical practice.

- After receiving an undergraduate degree from Morehouse College in Georgia, he was accepted to medical school at age 20. He was the only African American in his medical school class at the University of Arkansas.
- After earning his Medical Degree in 1958, Dr. Foster did his internship at Detroit Receiving Hospital in Michigan and conducted residency training in Massachusetts and Tennessee.
- Dr. Foster served the United States as a Captain in the U.S. Air Force, stationed as a Medical Officer in Washington state from 1959 to 1961. He then served in the active Air Force Reserves in Boston, Massachusetts from 1961 to 1962.

RESPECTED EDUCATOR – TAUGHT HUNDREDS OF MEDICAL STUDENTS:

In 1973, Dr. Foster was asked to chair the Department of Ob/Gyn at Meharry Medical College in Nashville, Tennessee -- because of his proven record in involving his doctors in the communities they served. For the past 21 years, Dr. Foster has helped train hundreds of America's finest medical practitioners at Meharry, which has produced nearly 40% of the nation's black doctors and dentists.

- Acting President of Meharry Medical College -- from October 1993 until left for sabbatical in June 1994.
- Dean of School of Medicine and Vice President for Health Services, Meharry Medical College, 1990-1993
- Professor and Chairman, Department of Obstetrics and Gynecology, Meharry Medical College, 1973-1990

MATERNAL AND INFANT CARE PROGRAM [Tuskegee, Alabama] -- **NEW IDEAS TO FIGHT INFANT MORTALITY IN THE RURAL SOUTH**

- Dr. Foster is one of the nation's leading experts on, and advocates for, maternal and child health. Immediately after completing his medical training, Dr. Foster returned to the rural south and began his lifelong crusade against infant mortality. At that time, rural areas suffered from a shortage of doctors; many poor women had no access to health care until it was time to deliver their babies with midwives at home. To address Alabama's high level of infant mortality, Dr. Foster applied for a grant from the Department of Health to expand the *Maternity and Infant Care Program* at Tuskegee Institute, and directed the development of this program from 1970 - 1973.
- Dr. Foster developed a comprehensive approach to maternal and child health -- involving teams of doctors, nurses, social workers and nutritionists -- with the ambitious goal of preventing health problems in mothers and newborn children. The teams worked in the rural communities to reach women early in their pregnancies, identify those women with a high potential for complication, and ensure they received specialized attention throughout their pregnancy and following the birth. [continued]

- Dr. Foster's approach was well ahead of its time, becoming a national model for "regionalized perinatal care" -- a program involving extensive community outreach, specialized services for high risk women, and comprehensive care of mothers and infants both before and following birth. Primarily because of this pathbreaking work, Dr. Foster was elected to the prestigious Institute of Medicine.

**"HIGH RISK" YOUNG PEOPLE'S PROGRAM [Robert Wood Johnson Grant]--
IMPROVING THE HEALTH OF TEENAGERS THROUGHOUT THE U.S.**

- After working with the Robert Wood Johnson Foundation to replicate his perinatal model, Dr. Foster was chosen by the Foundation to direct a multi-million dollar grant initiative to increase health care services for teenagers throughout the United States.
- This initiative targeted young people, aged 15 to 24, who lived in areas characterized by high rates of teen pregnancy, violence, drug and alcohol abuse, and mental illness. Under Dr. Foster's guidance, 20 teaching hospitals developed comprehensive health programs to expand services for young people in their own communities, improve their health, and train doctors and nurses in the specialized care of high risk youth.
- Between 1982 and 1986, these programs provided health services to approximately 306,000 young people. In addition, formal training in adolescent care was given to 115 adolescent medicine fellows, 974 medical residents, and 753 graduate trainees in nursing, medicine, psychology, and social work.

**"I HAVE A FUTURE" [Nashville, Tennessee] --
CURBING TEEN PREGNANCY THROUGH ABSTINENCE AND HOPE:**

- In February 1987, Dr. Foster began a pioneering effort to reduce the number of teen pregnancies by stressing abstinence and improving self-esteem. Dr. Foster established "*I Have A Future*" because he found that most teen pregnancy programs were limited to advocating contraception, rather than empowering teenagers to take charge of their lives and consciously make other choices. "*I Have A Future*" stresses job skills, education, and personal responsibility. Based in the housing developments it serves, the program involves parents and communities in advocating a strong anti-drug message, and teaching alternatives to violence and early sexual activity.
- The results speak for themselves. In one 30 month study comparing the two IHAF housing developments with two developments that didn't have the program, only one pregnancy has been recorded among the young women who took active part in the program, while 59 were registered in the comparison group.
- And, in 1994, twenty-four participants graduated from high school and sixteen -- including eight African American males -- went on to two- and four-year colleges. Four other participants entered the armed forces.
- This nationally recognized program has received numerous awards -- from groups such as the American Medical Association and the State of Tennessee House of Representatives. President George Bush chose "*I Have A Future*" to be one of America's "Thousand Points of Light" in 1991.

MEHARRY HOSPITAL MERGER WITH METROPOLITAN GENERAL:
A STUDY IN MANAGEMENT SKILLS, LEADERSHIP, AND VISION:

- In 1992, Dr. Foster directed a process that helped save one of the nation's foremost black hospitals and medical training programs. Like many historically black hospitals, Meharry's Hubbard Hospital had been denied adequate public funding, which led it to lose patients. This threatened the viability of some of its residency training programs -- which play a vital role in attracting minorities to medicine and providing doctors to rural and inner-city communities.
- In 1992, Dr. Foster played a key role in the merger of Meharry with Metropolitan General Hospital, an overcrowded city hospital which was looking for additional space and a newer facility. The merger was conditional upon the recruitment of a top-flight medical faculty, a successful process led by Dr. Foster. Through an extensive notification and screening process, Dr. Foster recruited 74 full-time physicians six weeks ahead of the deadline -- in the face of skepticism by the political and medical communities that Meharry could achieve that goal.
- *"Dr. Foster led that recruitment and brought some outstanding physicians from around this country who were dedicated to the mission of Meharry to serve the underserved. . . Many people didn't believe we would be able to recruit people like that."* Dr. John Maupin, President of Meharry [NPR, "All Things Considered," 2/17/95]

AWARDS: A LIFETIME OF ACHIEVEMENT:

- Elected to Institute of Medicine, 1972 [then one of youngest people ever elected]
- *Man Of The Year*, March of Dimes Birth Defects Foundation, Nashville Chapter, 1982
- *Faculty Award for Excellence in Science and Technology*, first White House Initiative on Historically Black Colleges and Universities, 9/25/88
- *Meritorious Service Award*, Mayor's Office of Drug Policy, 3/14/93
- *Honorary Degree*, Doctor of Science, University of Arkansas, 5/15/93
- *"Physician, Teacher and Scholar Award"*, National Medical Association, 8/10/93

Henry Foster

Why I Want to Be Surgeon General

Just a little over a week ago, few people outside Nashville knew anything about me. But after President Clinton announced his intention to nominate Dr. Henry Foster for surgeon general on Feb. 2, it seems like everybody thinks they know everything about me.

Two weeks ago, no one, not even my wife, St. Clair, my daughter, Myrna, and my son, Wendell—as devoted as they are—followed my every move and every word with rapt attention. Now, when I wake up in the morning and look out my window, the press is out there waiting and watching. When I go to my office, they follow me into the elevator. And walking down the street, I have been punched in the face, inadvertently, I think, with one of those huge microphones you see on TV. I have never seen anything like it.

I have even picked up a new lexicon. Words that matter in Washington are not in dictionaries in the rest of America. They certainly never taught me these words in medical school or the delivery room: Sound bites. Boom mikes. Stake-outs. Live shots. Talking heads. On-air analysis. All dissecting me over and over again. And all before I've uttered one word at my confirmation hearings before the Senate.

People who have never met me analyze my character and my life's work. They attack me personally before they ever give me a chance to introduce myself or tell my story. But those attacks do not define me. I know who I am and what I stand for. I also know that I am a symbol in a larger debate that has polarized this country for many years. But the attacks do hurt.

I cannot say that my work as a doctor entirely prepared me for these two turbulent weeks. But I have learned a few things during my 38 years as a doctor, a teacher and a crusader against teen pregnancy that have prepared me to be a good surgeon general.

I have been face to face with real life-and-death challenges. When you see low birth-weight babies born to mothers not yet old enough to drive a car, you have an appreciation

of what trauma really means. When you visit the homes of families living in grinding poverty and feel the palpable sense of hopelessness in their lives, you begin to understand what it is to be up against the odds. Compared to that, shouted questions and overheated rhetoric may be uncivil, but I can handle them. When people ask me why I want to be surgeon general, I know the answer.

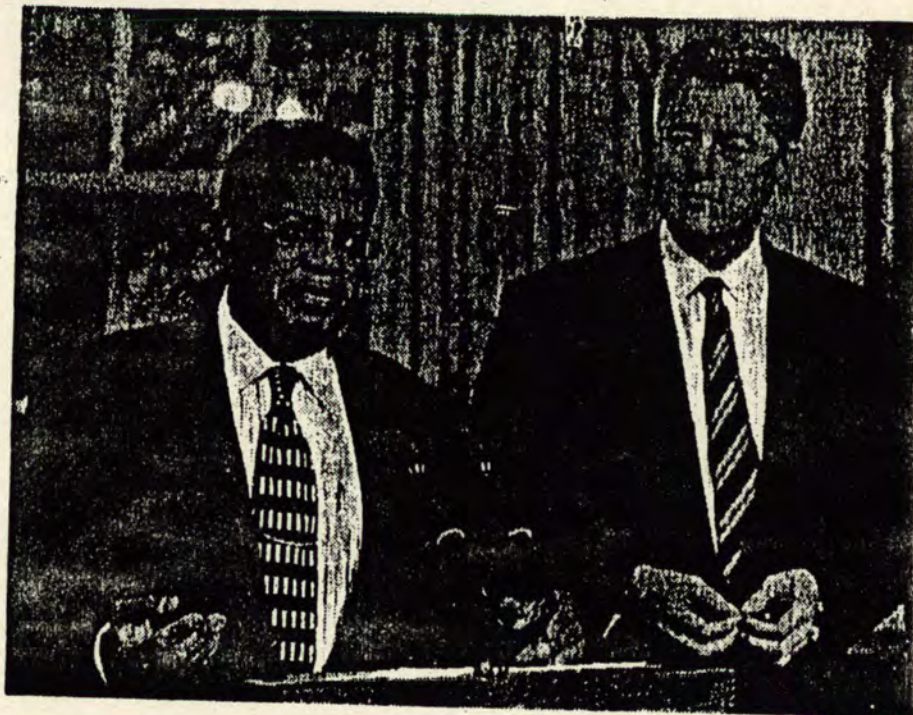
When you've had the good fortune to participate in the miracle of birth as many times as I have, it is difficult to stand on the sidelines and watch so many people wasting the precious gift of life.

It is difficult to look around America today and see so much needless suffering. Too many children suffer, because their parents have not been taught the value of prevention. Too many people don't have access to quality health care. And too many of us have turned away from those basic American values that can prevent violence or abuse of any kind from taking root.

But all is not lost. America is moving forward to confront both our health care crisis and the crisis of values that has led to far too much irresponsible behavior. As your surgeon general, I believe I can turn the small ripples of success that we have produced into great waves of progress. I believe that I can draw attention and help develop lasting solutions to the tragic public health problems confronting us—from the epidemic of violence to the spread of AIDS to the terrible problem of substance abuse. But I will be giving my greatest attention to what the president has called "our most serious social problem," the epidemic of teen pregnancy in this country.

It's ironic that my work fighting teen pregnancy has been overshadowed by my opponents' talk about abortion. I do believe in the right of a woman to choose. And I also support the president's belief that abortions should be safe, legal and rare. But my life's work has been dedicated to making sure that young people don't have to face the choice of having abortions.

I have some ideas about how young people can avoid that difficult choice. We are reducing



THE WASHINGTON POST

teen pregnancy in the Nashville housing projects through "I Have a Future"—a program we started at Meharry Medical College back in 1987. Our approach is to expand adolescent health care programs beyond the schools and bring them to the community, where they can become a part of the fabric of everyday life. Encouraging abstinence and involving the entire community, we have begun to replace a culture of hopelessness with one that gives young people clear pathways to healthy futures.

In my work with young people in Nashville, there is one lesson I stress above all others. To break the cycle of despair, you must learn that

there is a reward for sacrifice. And earning that reward is a fringe benefit. It allows you to give something back. That is a hard lesson to learn, but it is one that has kept me going through these difficult weeks. Having President Clinton place his faith in me is something I could never have imagined as a young boy growing up in the segregated South. Now, I want to give something back to a country that has rewarded my work and sacrifice, and God willing, I'll have that opportunity.

The writer is a nominee for U.S. surgeon general.

DR. HENRY FOSTER, JR., MD
An Abbreviated Biography

PERSONAL HISTORY: MARRIED FOR 35 YEARS, TWO CHILDREN

<u>Born</u>	1933	September 8, in Pine Bluff, Arkansas
<u>Married</u>	1960	St. Clair Anderson
<u>Children</u>	1962	Myrna Faye
	1964	Wendell, III

EDUCATION/TRAINING: EXPERIENCED OBSTETRICIAN/GYNECOLOGIST

<u>College</u>	1954	B.S. Degree Morehouse College (Atlanta, GA)
	1958	M.D. Degree School of Medicine, University of Arkansas (Little Rock)
<u>Internship</u>	1958-59	Detroit Receiving Hospital Wayne State University (Detroit, MI)
<u>Military</u>	1959-61	Captain and Medical Officer, U.S. Air Force Larson Air Force Base (WA)
	1961-62	Active Reserves, Air Force (Boston, MA)
<u>Residency</u>	1961-62	Surgical Resident Malden Hospital (Malden, MA)
	1962-65	Ob/gyn Resident George W. Hubbard Hospital (Nashville, TN)

MEDICAL PRACTICE: A THIRTY EIGHT YEAR CAREER

<u>Tuskegee, AL</u>	1965-73	Chief, Obstetrics and Gynecology John A. Andrew Memorial Hospital Tuskegee Institute
	1970-73	Director, Maternity and Infant Care Project Tuskegee Institute
<u>Nashville, TN</u>	1973-90	Professor and Chairman, Dept. of Obstetrics and Gynecology Meharry Medical College
		Chief, Obstetrics and Gynecology George W. Hubbard Hospital of Meharry Medical College
	1981-86	Director, High Risk Youth Program Robert Wood Johnson Foundation

1987 Founded "*I Have A Future*" Program to fight teen pregnancy in two Nashville housing developments

1990-93 Dean, School of Medicine and
Vice President for Health Services
Meharry Medical College

10/93- 6/94 Acting President
Meharry Medical College

Washington, DC

1994-95 Association of Academic Health Centers
Senior Scholar-in-Residence

POSITIONS: A MEDICAL LEADER

- Ethics Advisory Board, Department of Health, Education and Welfare, 1978
- Member, former Governor Lamar Alexander's *Task Force on Healthy Children* (Chaired subcommittee on infant mortality)
- President, Association of Professors of Gynecology and Obstetrics [1993-94]
- Editorial Board, *Academia*, American Association of Medical Colleges [former]
- Examiner, American Board of Obstetrics and Gynecology [former]
- Board Member, Planned Parenthood Federation of America
- Board Member, March of Dimes Birth Defects Foundation, Nashville Chapter
- Ethics Committee, Nashville Academy of Medicine
- Council Member, Institute of Medicine, National Academy of Sciences
- National Medical Association, Executive Committee Member, Ob/Gyn Section

SERVICE: AN ACTIVE ROLE IN HIS COMMUNITY

- Advisory Committee, Young Women's Christian Association (YWCA, Nashville)
- "*Success by Six*" -- A Family Life Enhancement Community Intervention
- *Partnership 2000* -- A City Planning Project for the Year 2000 and Beyond
- 100 Black Men of Middle Tennessee, Inc.

AWARDS: A LIFETIME OF ACHIEVEMENT

- Elected to Institute of Medicine, 1972 [then one of youngest people ever elected]
- *Man Of The Year*, March of Dimes Birth Defects Foundation, Nashville Chapter, 1982
- *Faculty Award for Excellence in Science and Technology*, first White House Initiative on Historically Black Colleges and Universities, 9/25/88
- "*I Have a Future Program*" selected by President Bush to be one of America's "Thousand Points of Light," 3/15/91
- *Meritorious Service Award*, Mayor's Office of Drug Policy, 3/14/93
- *Honorary Degree*, Doctor of Science, University of Arkansas, 5/15/93
- "*Physician, Teacher and Scholar Award*", National Medical Association, 8/10/93

DR. HENRY W. FOSTER, JR. —
IN HIS OWN WORDS: Excerpts from Speeches

Oval Office Statement Upon Nomination, February 2, 1995

In my view, you can judge the character of a nation by the manner in which it treats its elderly and its children. There is nothing more stifling than a compromised beginning. We must assure healthier starts in the lives of our children.

George Washington University, February 10, 1995

For the past 38 years, as a teacher, a university leader, and a practicing obstetrician/gynecologist, I have dedicated my entire professional life to bringing healthy lives into this world -- and helping people reach their full potential.

I have personally delivered thousands and thousands of babies. . . And I have worked tirelessly to improve the health of newborns, unborns, and their mothers. When you've had the good fortune to participate in the miracle of birth as many times as I have, it is difficult to stand on the sidelines and watch so many people wasting the precious gift of life . . .

But all is not lost. America is moving forward to confront both our health care crisis and the crisis of values that has led to too much irresponsible behavior. As your Surgeon General -- working with you and all Americans -- I believe that I can turn the small ripples of success that we have produced into great waves of progress.

First Baptist Church Capitol Hill, February 26, 1995

I want to tell you, my friends, that I believe in what I have done with my life. I believe in helping to bring healthy babies into this world. It is one of the greatest miracles a person can experience. I believe in training fine young women and men to be doctors. I have encouraged them to serve the rural communities and inner city neighborhoods which have too many health problems and too little health care. I believe in the work we have done together as a community to delay teen pregnancy -- not just by telling our young people what they cannot do, but by *showing* them what they can do. They can make other choices. They can get an education. They can have a future. We have worked hand in hand on this and I believe in what we've done.

Sasha Bruce Foundation, March 3, 1995

As your Surgeon General I will have multiple responsibilities -- but the health needs of America's children will be one of my largest priorities.

I have seen first hand, what poverty, neglect, abuse, and lack of health care access can do to a young person. In crowded cities and in places you can't even find on a map -- I have come face to face with real life and death challenges. . . Low birthweight babies born to mothers not yet old enough to drive a car. . . Low income women in the rural south with no access to prenatal care, and no one but a lay midwife at their side at the time of delivery.

I know that these impediments not only stunt the growth of children, they inevitably stunt the growth of this nation. There is nothing more in the national self-interest than the protection and nurturing of our children. And I have devoted my entire career to this goal.

To Medical Residents at Children's Hospital, March 6, 1995

It is no accident that I am an educator -- by practice and by preference -- and that the President has asked me to be Surgeon General. The role of Surgeon General -- a role critically important to our nation -- is that of an educator. To educate the American people about positive health activities to embrace, preventive health measures to adopt, and negative health measures to avoid. But in a sense it is what we do every day in our practice and in our teaching.

It is trying to use science to heal and to educate -- and to provide our communities and our society with the care they need when they need it. The Surgeon General's responsibility is to do this from the highest office. But it is also what all of you will do when you finish your training and serve the world as doctors. And it is what my former students practice every day.

This is a very exciting time. Our challenges are great, but so are our opportunities. In America, we are free to make our country as good in practice as in promise, and I believe that working together we can do that.

Annual Meeting of APGO¹ and CREOG², March 8, 1995

We started the I Have a Future teen pregnancy prevention program at Meharry Medical College back in 1987. Anchored in Nashville's public housing projects, this program brings services for teenagers into their communities, where they can become a part of the fabric of their daily life. And we involve the entire community. Everybody -- from parents and grandparents to clergy and business leaders to volunteers and local government -- has a role to play.

One of the main reasons we started this program was because back then, too many programs simply gave teenagers contraceptives, without giving them a vision of a successful future. That wasn't enough. Programs that provide the *capacity* to prevent pregnancy will fail unless they also create the *desire* to prevent pregnancy. Too many children today believe their future holds little for them except having babies. For adolescents, that's a dead-end dream and we have got to replace it with a dream of hope and unlimited achievement. That's what I Have a Future is all about. Having a future.

We stress abstinence first and foremost. But -- most important -- we give young people reasons to want to postpone early sexual activity. We try to give our young people the self-esteem and self-respect and life options that they need to say "no" to sex and "yes" to their education and futures. . . And it's working. Just last year, 24 of the program participants graduated from high school. And 16 of these young people are now in college, while four others joined the Armed Forces.

National Newspaper Publishers Association, March 16, 1995

Let me repeat, the role of the Surgeon General -- first and foremost -- is to educate and to advocate. By temperament and training, I am a teacher. In addition to being a doctor for 38 years, I have run a major health sciences center, comprised of four schools: medicine, dentistry, allied health, and graduate studies.

As chair of the Department of Ob/gyn at Meharry Medical College, I taught hundreds of young men and women who went on to become some of the nation's finest doctors. At Meharry, we encourage our medical students to seek out those areas where health needs are high and resources low. All Americans deserve the best doctors available, and we tell our students that it is the highest calling of the medical profession to serve those whom others may have forgotten.

¹Association of Professors of Gynecology and Obstetrics

²Council of Residency Education in Obstetrics and Gynecology

April 3, 1995

Dr. Lee Brown
Director
Office of National Drug Control Policy
Executive Office of the President
Washington, DC 20500

Dear Dr. Brown:

Thank you for the excellent meeting which we had recently to discuss the enormous challenges involved in confronting the serious problem of drug abuse. You have provided outstanding leadership on this issue and I look forward to joining you and working with you. Your leadership is helping Americans to understand that treatment, prevention, and research are vital components of an effective strategy against substance abuse. Our strategy must reflect a genuine balance which combines strong law enforcement with determined efforts to reduce the demand for illegal drugs.

I am deeply concerned, as I know you are, by the recent increases in illegal drug usage by young people, as indicated by the Monitoring the Future Survey. There has been a resurgence of favorable reference to illegal drug use in popular culture and, at the same time, a marked reduction in news coverage of the drug problem. I have seen the terrible harm drugs do to our nation's youth. It is clear that the primary role of the Surgeon General is to educate and I will make it a high priority in this role to send the message to young people and to their parents that drugs are dangerous and deadly. I will use my bully pulpit to join you in re-enlisting community leaders from all walks of life to come together in sending a renewed message about the corrosion and chaos that come from drug abuse.

Drug and alcohol abuse are also connected intimately to so much of the violence that is tearing at our country's social fabric. Substance abuse is involved in an estimated 50 percent of domestic violence cases and an even greater percentage of child abuse and neglect situations. Adolescent deaths from violence and automobile accidents are disproportionately related to alcohol and drug abuse. And the overall cost to the economy of drug and alcohol abuse is nearly \$170 billion annually.

Hence the stakes are high. And we need to understand that, for too many of our young people who come to abuse drugs or alcohol, the abuse is a symptom of other problems -- either in their own families or in their own perception that their future lacks opportunities and possibilities, or both. Community coalitions and community partnerships to prevent substance abuse are vital, but we need to understand that helping families function better and making sure that positive future opportunities are available are also essential parts of the agenda.

Letter To Director Lee Brown

April 3, 1995

Page 2

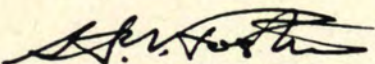
That is what we tried to do in 1987 when parents in the Nashville housing projects told us that drug and alcohol abuse was the biggest problem their teenagers faced. We established the I Have A Future program -- based in the housing projects where the teens live -- involving the entire community in teaching a strong anti-drug message. Parents and teachers and clergy work together to communicate values -- teaching our young people responsibility and self-respect, and showing them the damage to their communities, their families, and their futures that can result from drug abuse. Most important, we raise their self-esteem and teach them skills -- so that drugs do not seem an attractive choice, or their only choice. Before they use drugs to block out the pain of their present, we offer them hope for their future. I know that communities all over the country can come together in the same way and fight this problem that threatens us all.

We know that real prevention -- such as the I Have A Future program -- works. Equally important, we know that treatment works. Recovering drug abusers and alcoholics are the first to say that their personal commitment to recovery is crucial, but treatment -- in different forms and approaches for different people -- makes a huge difference. However, treatment can only work if we invest sufficient resources to make it available to those who need it. I will join you in educating policy makers at all levels that investing in treatment is cost-effective. You and I know this, but those of us who know the facts have not been as effective as we would like to be in communicating them to those who make decisions about these critical matters.

I am emboldened at the prospect of joining an Administration that believes in a policy which combines intelligent law enforcement with investments in prevention, treatment, and research. As one example, this Administration's commitment to innovative drug courts represents exactly the kind of partnership between law enforcement and public health that we need to have if we're going to make any progress in reducing the levels of drug and alcohol abuse. Drugs like cocaine, heroin, and marijuana are illegal and should remain illegal. There should be no question about that. The question should be how do we obtain an adequate investment in everything that we need to be doing to help solve the problem.

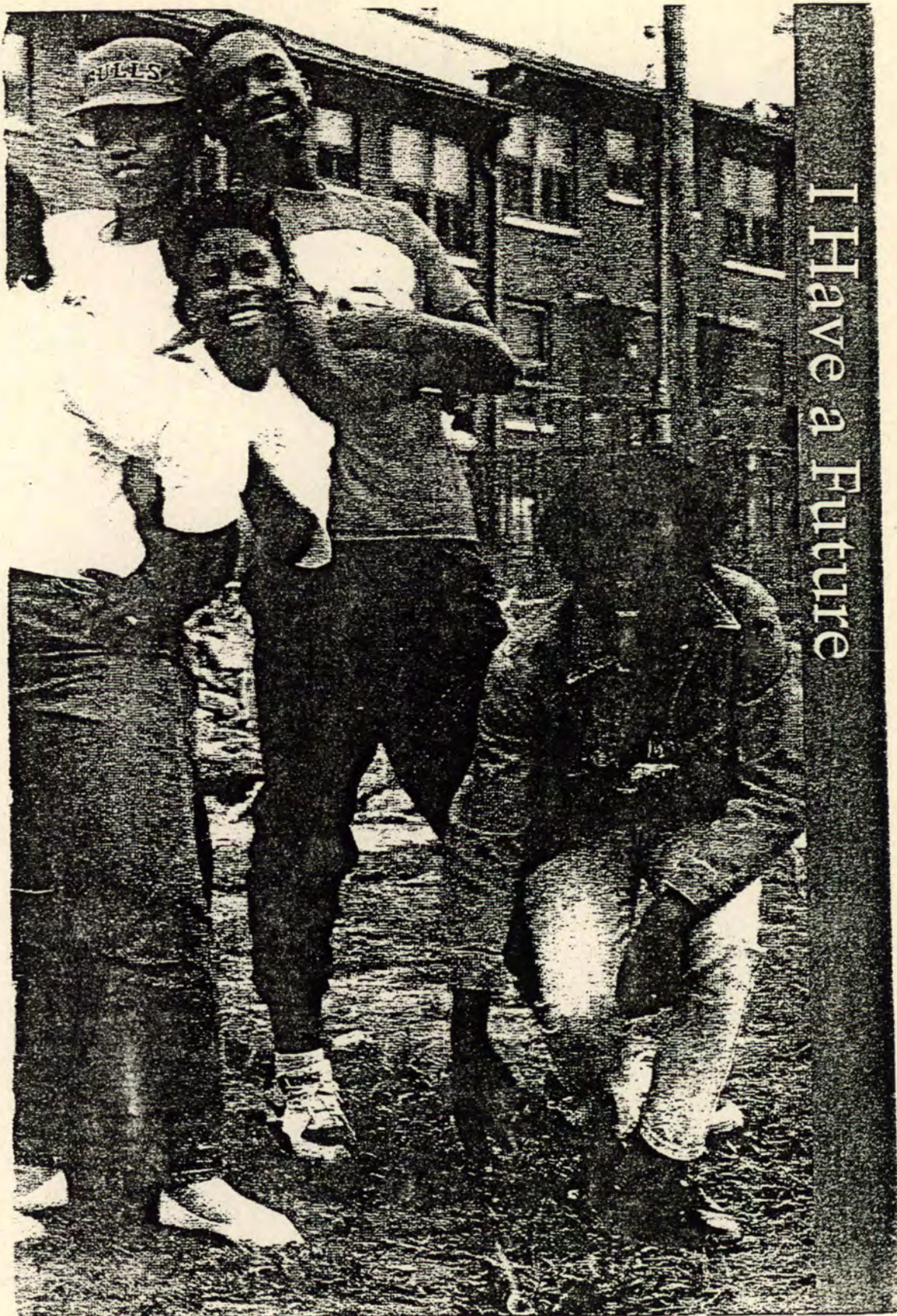
I look forward to working with you on this great challenge.

Sincerely,



Henry W. Foster, Jr., M.D.

I Have a Future



Background

As part of its historic mission to serve the disadvantaged, Meharry Medical College has a strong commitment to preventing damaging lifestyles and health behaviors among adolescents.

As the nation's only historically black, independent academic health services center, Meharry has a long history of community concern and involvement. Thus, Meharry has taken this opportunity to develop model programs which provide life-enhancement experiences and health services to high-risk adolescents while preparing health professionals to address relevant issues associated with the youth population.

The Department of Obstetrics and Gynecology has initiated "I Have A Future," a program which addresses a burgeoning problem in our communities — adolescent pregnancy. Frequently, life-threatening and health-threatening consequences of early pregnancy and childbearing are devastating for both the young mother and child. When compounded by the emotional, social and economic traumas faced by the teenage father, families and the community as a whole, the problems of adolescent pregnancy impose an imperative for innovative solutions.

The challenge is to develop a system which successfully educates and motivates adolescents to pursue a myriad of constructive life options and delay parenthood. The program was built on the premise that changes in sexual behavior should be addressed within a framework that provides strategies for positive decision-making while enhancing self-image.

Program Description

The major thrust of this longitudinal, research-intervention project is to develop a model program to prevent teenage pregnancy, substance abuse, and unemployment. Since 1987, the Department of Obstetrics and Gynecology of Meharry Medical College has developed and instituted a comprehensive community-based adolescent pregnancy prevention program involving four municipal housing developments in Nashville, Tennessee.

Previous efforts to prevent teenage pregnancy have focused on giving adolescents the capacity to control their fertility. It has been clear from pregnancy and fertility rates that many high-risk youth are not being reached effectively. Economically disadvantaged adolescents with little hope and limited aspirations frequently cannot understand that having a baby can adversely affect their lives. To the contrary, it is often viewed as an enhancement.

Those who have been at the forefront in the battle to delay early pregnancy and childbearing advocate enhancing self-image and presenting positive alternatives for the future. Subsequently, the program attempts to address the issues surrounding adolescent pregnancy from a broader psychosocial context. Success then rests on convincing youth that the future is theirs to control. The name of the project itself — "I Have A Future" — is based on this premise.

Project Objectives

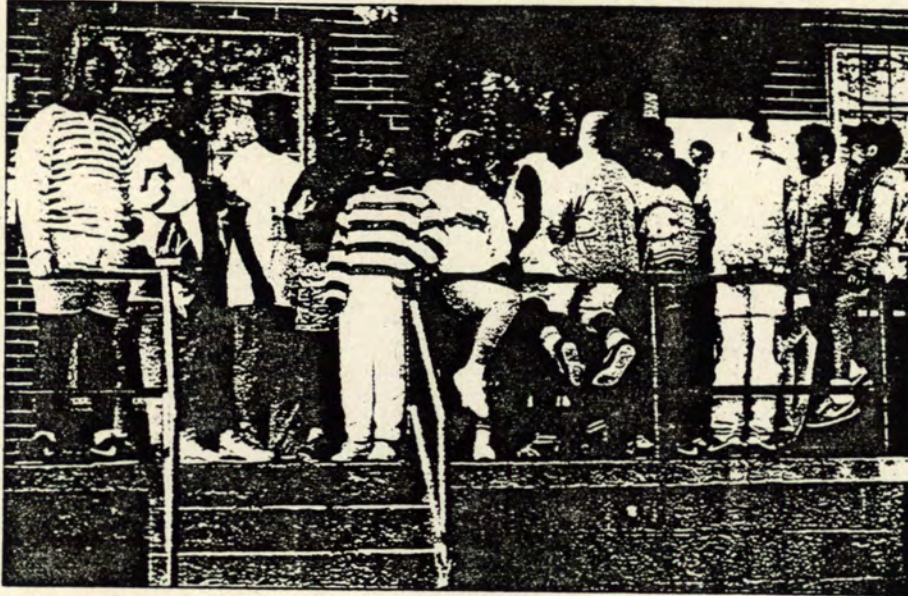
The "I Have A Future" program incorporates a two-pronged delivery system based in the community. Both individual and group interventions are used to meet the following project objectives:

- To develop a replicable community-based, life-enhancement program that promotes a significant reduction in the incidence of early pregnancy and childbearing among high-risk adolescents.
- To improve knowledge, attitudes and behaviors related to personal health, human sexuality, drug and alcohol abuse and other factors which may place them at risk.
- To provide greater access to, and increase utilization of, comprehensive adolescent health services and social services, including contraceptive availability.
- To improve socially adaptive/appropriate behaviors with particular focus on school achievement, pre-vocational skills development, and delinquency rates.
- To enhance the ability of high-risk adolescents to overcome environmental barriers in attaining the skills necessary to pursue meaningful employment and educational opportunities with the promise of upward mobility.
- To engender a more positive self-concept and constructive attitude towards community, family life and the future.

Each objective has been further delineated such that components may be addressed specifically via baseline-pre/post-measures as well as within specific interventions.

Setting

The "I Have A Future" program is located within the municipal housing projects to ensure the following: (a) Provision of services during the times that they are most accessible to all adolescents (without stigmatizing school drop-outs) through an adjunct program. (b) Close proximity to the families to increase opportunities for interaction within the context of the full range of situations that characterize life in the public housing projects.



Target Population

The participants in this program are from four public housing sites. Two sites receive the intervention and the others are considered control sites. Baseline data have been collected from all four sites.

Prior to the delivery of services, a "Quality of Life Needs Assessment" was conducted with 497 heads-of-households of homes which had youth between the ages of 10 and 17 residing in them. The assessment was designed to gather demographic information, residents' perception of problems impacting on the youth, community needs and ideas on how to resolve existing problems. Of the 497 completed surveys, we found that the majority of the respondents were females (87%), single head-of-households (83%), of African American origin (98%). Over one-half (58%) of the respondents completed high school, however, seventy-one percent were unemployed. Seventy-nine percent of the families had an annual income of less than \$5,000, however, only sixty-five percent received supplemental financial assistance. The participants reported the following problems as most pervasive: Drug and alcohol abuse (92%), adolescent pregnancy (76%), crime (48%), and youth unemployment (44%). Most importantly, seventy-seven percent of the participants indicated their willingness to be part of a program that strengthens families. This information was important, for it reflects the communities' commitment to work at improving their quality of life and their support for a community-based intervention program.

Description of Services

The program is designed to assist adolescents in learning good health practice and making positive choices. The basic service components are delivered in the context of the following areas of concentration:

Comprehensive Health Services

Currently, services are provided by the staff of the Department of Obstetrics and Gynecology of Meharry Medical College at "I Have A Future" clinics within the housing projects. Services are provided each week, with the clinics emphasizing primary health care and health screenings (e.g., physical examinations and lifestyle assessments) and on-going health services (e.g., screening for sexually transmitted diseases, pregnancy tests and distribution of contraceptives).

Organized Social-Learning Activities

Activities with structured educational and behavioral objectives are offered to "I Have A Future" participants. Emphasis is on creativity, physical awareness, nutrition and personal responsibility.

It is critical that the programming be age-appropriate since the target population spans the ages of 10 to 17. While the curriculum focuses on knowledge, attitudes, and behaviors for all groups, the emphasis is on behaviors for the older adolescent group (14 to 17).

The primary value orientation of the program focuses on the integration and implementation of the NGUZO SABA Principles (Seven Principles of Blackness) into each participant's role as a positive family member and in their practice of responsible health behavior. These principles are: NIA (Purpose), UMOJA (Unity), KUJICHAGULIA (Self-Determination), UJIMA (Collective Work and Responsibility), UJAMAA (Cooperative Economics), KUUMBA (Creativity) and IMANI (Faith).

All aspects of the program promote the following: Self-esteem and pride in individuality; physical and mental well-being; completing school; developing job skills and enhancing employability; sexual responsibility; self-control and handling interpersonal conflict; value of helping others and the community; responsible citizenry and family-life values/appropriate parenting. The adolescents are divided into mixed gender groups. Groups serve as the operating-structure for a majority of the programming, with specific activities serving as incentives and vehicles for discussion.



Examples of on-going and planned activities:

Pro-Social Skills Development

(Focusing on good decision-making and problem-solving with special emphasis on Alcohol and Drug Abuse Prevention)

Conflict Resolution Training/ Violence Prevention

Creative Movement/Dance

Sports

Tutoring

Family-Life Education

Self-defense class

Computer Skills

Outings

CHARM Class for Females

(Choosing How To Adorn & Refine Myself)

MATURE Class

(Males Adorning, Thinking and Using Refined Energies)

Rites of Passage Program

Art Classes

Entrepreneurship Program

(Includes Pre-employment Training)

Peer Counseling

Opportunities

Parent Involvement

Every effort is made to involve parents/residents, to make them feel that it is their program and to give them a sense of empowerment and ownership. One such example is the Parent Empowerment Program, a community-based family alternative program in which the parents receive training in family health promotion with emphasis on increasing their effectiveness in the battle to prevent substance abuse in their community. The training equips the parents with the knowledge and skills they need to run workshops and provide services to families that are in need of assistance on substance abuse issues. Some topics covered during their training include: Effective communication, group leadership, crisis intervention and parent effectiveness skills. Other parent-focused activities include: Parent appreciation nights, spaghetti dinners, weight management classes, etc.

Staffing

The "I Have A Future" staff consists of a multi-disciplinary team that includes psychologists, nurses, public health education specialists, counselors, physicians, tutors and volunteers (from the community and local colleges and universities).

Evaluation

The evaluation plan for the "I Have A Future" project incorporates a longitudinal, quasi-experimental design. There are two intervention sites located at two public housing projects and two comparison sites located at two other housing projects in the Nashville metropolitan area. All four sites are similar demographically. Annual assessments of the youth between the ages of 10 and 17 will be conducted for a minimum of three years. The assessment battery includes instruments for measuring knowledge, attitudes and behaviors related to sexuality, contraception, and pregnancy, as well as measures of self-concept, social support, family environment, and psychosocial maturity.

Baseline data collection was completed in 1989. Baseline data were collected from 998 adolescents within the four housing sites (555 study group, 443 control group). The second phase of data collection was completed in 1990. The third phase will begin in the winter of 1991. Preliminary analyses of the baseline data indicate that approximately seventy-five percent of the youth who are at least 15 years old have engaged in sexual intercourse. Contraceptive practices are very poor and twenty-seven percent of the sexually active females indi-

cated that they had been pregnant at least once. These data indicate a definite need for intervention.

In addition to the annual assessments at the intervention and comparison sites, a process evaluation is incorporated in the evaluation design. The number and type of services provided to youth by the "I Have A Future" program in the intervention sites are monitored. This information will be used to determine how much intervention each youth at the intervention sites received. These data will also be used to determine which services were the most effective in achieving the goals of "I Have A Future".

Finally, pre- and post-tests have been developed for each of the "I Have A Future" content-oriented modules. These tests are administered at the beginning and the end of each of the modules. These data have been used to refine the modules so that they are most effective in producing the desired outcomes, such as change in knowledge and attitudes.

Community Support

Resident associations at all housing projects are actively involved in the program. Community representatives are on the "I Have A Future" Advisory Committee.

Metropolitan Nashville development and housing agencies have assisted in obtaining office space within the community. With their staff acting as liaisons between residents and community centers, the agencies have collaborated with us and helped recruit youth into the program. Many program activities have been sponsored by both "I Have A Future" and the local community centers.

National and local advisory committees, representing a cross-section of organizations, institutions and disciplines assist in program planning and act as advocates for "I Have A Future."

Currently, "I Have A Future" is funded by the Carnegie Corporation, W.T. Grant Foundation, William and Flora Hewlett Foundation, and Bill and Camille Cosby. The Tennessee Department of Mental Health and Retardation has funded the Parent Empowerment Program.

The "I Have A Future" staff has been documenting the development of the program from its inception. These chronicles are being developed into protocols for each of the program components. The "I Have A Future" staff is available for technical assistance in such areas as program planning, implementation and evaluation strategies.



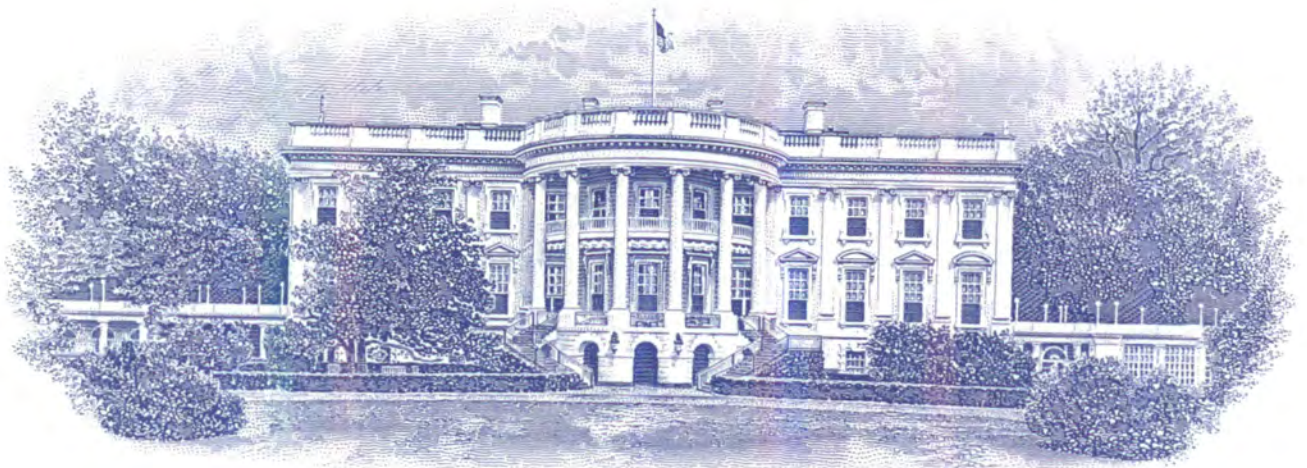
Contact:
MEHARRY MEDICAL COLLEGE
Department of Obstetrics and Gynecology
"I Have A Future" program
1005 D.B. Todd Blvd.
Nashville, Tennessee 37208
(615) 327-6100

HENRY W. FOSTER, M.D., DIRECTOR
LORRAINE WILLIAMS GREENE, Ph.D., DEPUTY DIRECTOR

PACKET GIVEN
OUT AT DPC
LUNCH



The White House



PHOTOCOPY
PRESERVATION

DPC SENATE PACKET ON DOCTOR FOSTER

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DR. HENRY FOSTER, JR., MD
An Abbreviated Biography¹

PERSONAL HISTORY: MARRIED FOR 34 YEARS, TWO CHILDREN

<u>Born</u>	1933	September 8, in Pine Bluff, Arkansas
<u>Married</u>	1960	St. Clair Anderson
<u>Children</u>	1962	Myrna Faye
	1964	Wendell, III

EDUCATION/TRAINING: EXPERIENCED OBSTETRICIAN/GYNECOLOGIST

<u>College</u>	1954	B.S. Degree Morehouse College (Atlanta, GA)
	1958	M.D. Degree School of Medicine, University of Arkansas (Little Rock)
<u>Internship</u>	1958-59	Detroit Receiving Hospital Wayne State University (Detroit, MI)
<u>Military</u>	1959-61	Captain and Medical Officer, U.S. Air Force Larson Air Force Base (WA)
	1961-62	Active Reserves, Air Force (Boston, MA)
<u>Residency</u>	1961-62	Surgical Resident Malden Hospital (Malden, MA)
	1962-65	Ob/gyn Resident George W. Hubbard Hospital (Nashville, TN)

MEDICAL PRACTICE: A THIRTY EIGHT YEAR CAREER

Tuskegee, Alabama

1965-73	Chief, Obstetrics and Gynecology John A. Andrew Memorial Hospital Tuskegee Institute
1970-73	Director, Maternity and Infant Care Project Tuskegee Institute

Nashville, TN

1973-90	Professor and Chairman, Dept. of Obstetrics and Gynecology Meharry Medical College
	Chief, Obstetrics and Gynecology George W. Hubbard Hospital of Meharry Medical College

¹This document is intended to highlight Dr. Foster's career. For a complete CV, please contact Legislative Affairs at the Department of Health and Human Services [690-6786].

- 1981-86 Director, High Risk Youth Program (Robert Woods Johnson)
- 1987 Founded "*I Have A Future*" Program to fight teen pregnancy
- 1990-93 Dean, School of Medicine and
Vice President for Health Services
Meharry Medical College
- 10/93- 6/94 Acting President
Meharry Medical College

Washington DC

- 1994-95 Association of Academic Health Centers
Senior Scholar-in-Residence

POSITIONS: A MEDICAL LEADER

- Ethics Advisory Board, Department of Health, Education and Welfare, 1978
- Member, former Governor Lamar Alexander's *Task Force on Healthy Children* (Chaired subcommittee on infant mortality)
- President, Association of Professor of Gynecology and Obstetrics [1993-94]
- Editorial Board, *Academia*, American Association of Medical Colleges [former]
- Examiner, American Board of Obstetrics and Gynecology [former]
- Planned Parenthood Federation of America
- Board Member, March of Dimes Birth Defects Foundation, Nashville Chapter
- Ethics Committee, Nashville Academy of Medicine
- Council Member, Institute of Medicine, National Academy of Sciences
- National Medical Association, Executive Committee Member, Ob/Gyn Section

SERVICE: AN ACTIVE ROLE IN HIS COMMUNITY

- Advisory Committee, Young Women's Christian Association (YWCA, Nashville)
- "*Success by Six*" -- A Family Life Enhancement Community Intervention
- *Partnership 2000* -- A City Planning Project for the Year 2000 and Beyond
- 100 Black Men of Middle Tennessee, Inc.

AWARDS: A LIFETIME OF ACHIEVEMENT

- Elected to Institute of Medicine, 1972 [at time, one of youngest people ever elected]
- *Man Of The Year*, March of Dimes Birth Defects Foundation, Nashville Chapter, 1982
- *Faculty Award for Excellence in Science and Technology*, first White House Initiative on Historically Black Colleges and Universities, 9/25/88
- "*I Have a Future Program*" selected by President Bush to be one of America's "Thousand Points of Light," 1991
- *Meritorious Service Award*, Mayor's Office of Drug Policy, 3/14/93
- *Honorary Degree*, Doctor of Science, University of Arkansas, 5/15/93
- "*Physician, Teacher and Scholar Award*", National Medical Association, 8/10/93

Henry Foster
Wash. Post 2-13-95

Why I Want to Be Surgeon General

Just a little over a week ago, few people outside Nashville knew anything about me. But after President Clinton announced his intention to nominate Dr. Henry Foster for surgeon general on Feb. 2, it seems like everybody thinks they know everything about me.

Two weeks ago, no one, not even my wife, St. Clair, my daughter, Myrna, and my son, Wendell—as devoted as they are—followed my every move and every word with rapt attention. Now, when I wake up in the morning and look out my window, the press is out there waiting and watching. When I go to my office, they follow me into the elevator. And walking down the street, I have been punched in the face, inadvertently, I think, with one of those huge microphones you see on TV. I have never seen anything like it.

I have even picked up a new lexicon. Words that matter in Washington are not in dictionaries in the rest of America. They certainly never taught me these words in medical school or the delivery room: Sound bites. Boom mikes. Stake-outs. Live shots. Talking heads. On-air analysis. All dissecting me over and over again. And all before I've uttered one word at my confirmation hearings before the Senate.

People who have never met me analyze my character and my life's work. They attack me personally before they ever give me a chance to introduce myself or tell my story. But those attacks do not define me. I know who I am and what I stand for. I also know that I am a symbol in a larger debate that has polarized this country for many years. But the attacks do hurt.

I cannot say that my work as a doctor entirely prepared me for these two turbulent weeks. But I have learned a few things during my 38 years as a doctor, a teacher and a crusader against teen pregnancy that have prepared me to be a good surgeon general.

I have been face to face with real life-and-death challenges. When you see low birth-weight babies born to mothers not yet old enough to drive a car, you have an appreciation

of what trauma really means. When you visit the homes of families living in grinding poverty and feel the palpable sense of hopelessness in their lives, you begin to understand what it is to be up against the odds. Compared to that, shouted questions and overheated rhetoric may be uncivil, but I can handle them. When people ask me why I want to be surgeon general, I know the answer.

When you've had the good fortune to participate in the miracle of birth as many times as I have, it is difficult to stand on the sidelines and watch so many people wasting the precious gift of life.

It is difficult to look around America today and see so much needless suffering. Too many children suffer, because their parents have not been taught the value of prevention. Too many people don't have access to quality health care. And too many of us have turned away from those basic American values that can prevent violence or abuse of any kind from taking root.

But all is not lost. America is moving forward to confront both our health care crisis and the crisis of values that has led to far too much irresponsible behavior. As your surgeon general, I believe I can turn the small ripples of success that we have produced into great waves of progress. I believe that I can draw attention and help develop lasting solutions to the tragic public health problems confronting us—from the epidemic of violence to the spread of AIDS to the terrible problem of substance abuse. But I will be giving my greatest attention to what the president has called "our most serious social problem," the epidemic of teen pregnancy in this country.

It's ironic that my work fighting teen pregnancy has been overshadowed by my opponents' talk about abortion. I do believe in the right of a woman to choose. And I also support the president's belief that abortions should be safe, legal and rare. But my life's work has been dedicated to making sure that young people don't have to face the choice of having abortions.

I have some ideas about how young people can avoid that difficult choice. We are reducing



teen pregnancy in the Nashville housing projects through "I Have a Future"—a program we started at Meharry Medical College back in 1987. Our approach is to expand adolescent health care programs beyond the schools and bring them to the community, where they can become a part of the fabric of everyday life. Encouraging abstinence and involving the entire community, we have begun to replace a culture of hopelessness with one that gives young people clear pathways to healthy futures.

In my work with young people in Nashville, there is one lesson I stress above all others. To break the cycle of despair, you must learn that

there is a reward for sacrifice. And earning that reward has a fringe benefit. It allows you to give something back. That is a hard lesson to learn, but it is one that has kept me going through these difficult weeks. Having President Clinton place his faith in me is something I could never have imagined as a young boy growing up in the segregated South. Now, I want to give something back to a country that has rewarded my work and sacrifice, and God willing, I'll have that opportunity.

The writer is a nominee for U.S. surgeon general.

REMARKS BY DR. HENRY FOSTER, SURGEON GENERAL NOMINEE; GEORGE WASHINGTON
MEDICAL SCHOOL, WASHINGTON, DC / FRIDAY, FEBRUARY 10, 1995
GW-10-01 page# 1

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OF THAT PERSON'S OFFICIAL DUTIES.

THIS IS A RUSH TRANSCRIPT.

DR. FOSTER: (Applause.) Thank you, Dr. Kaminitsky (ph), thank
you and the George Washington University administration for inviting
me. And, Alan (sp), I thank you for your gracious introduction and
your wise pronouncements that were so accurate. I wish they had been
incorrect.

But it is a pleasure to be here at this prestigious university
that has contributed so much. But most of all, you, the students, all
of you in your various capacities, in your academic choosings, you are
our future health care workforce. I'm honored to be before you and I
thank you for coming.

Now, you guys gave me a lot of inspiration; you don't know how.
But nobody expected your men's basketball team to upset the number one
team in the nation, but you did. (Applause.) So I know -- and
particularly since my alma mater was number one and U Mass had beaten
them earlier in the season, so I was very delighted and happy with
that. (Laughter.) And keep up the good work. So now you understand
I feel like I have a tough battle ahead of me as you did as your team.

It is fitting that the president announced his intent to nominate
me for the position of surgeon general on February 2nd, Groundhog Day.
(Laughter.) That's the day if the groundhog sees its shadow we know
we're in for six more weeks of winter, but if the groundhog doesn't
see it, we know that spring is just around the corner. I feel a
little bit like that groundhog because ever since February 2nd, when
President Clinton and Secretary Shalala publicly called me to service,
the descriptions of myself and my work that I have read in the
newspapers, seen on television, have cast an unrecognizable shadow of
the man that I really am. Yes, I see a shadow, but it's not my
shadow. And that means spring is just around the corner.

- More -

In his announcement of my nomination, the president thanked me for taking on this difficult task of public service at a time when public service sometimes is done at a very high price. I thought I knew what he meant at the time, but after the past week, I really know what he means now!

So you might be wondering, well why do I want this job? Well let me tell you, if you've been listening to the news lately you may have gotten the wrong idea about my professional career. I have been a doctor for 38 years. I have run a major health sciences center comprised of four schools -- medicine, dentistry, allied health and graduate studies. In 1972, as Dr. Weingold (sp) said, I was very fortunate, I was elected into the Institute of Medicine of the National Academy of Sciences. I was the youngest member ever at that time. I founded the award-winning "I Have a Future" program, which was recognized by the nation and by President Bush as one of the Thousand Points of Light.

I am also a husband of 35 years this week -- (applause) -- thank you. And the father of a son and daughter, in fact, a daughter who lives in this area and teaches middle school science. For the past 38 years, as a teacher, a university leader and a practicing obstetrician/gynecologist, I have dedicated my entire professional life to bringing healthy lives into this world and helping people reach their full potential. I have personally delivered thousands and thousands of babies.

While chair of the Department of Ob/Gyn at Meharry, I taught more than 1,500 medical students who came under my tutelage during their basic rotation. Founded 119 years ago, Meharry is among the nation's finest teaching institutions. (A single person applauds, followed by laughter.) And I have worked tirelessly to improve the health of newborns, unborns, and their mothers and their families.

When you've had the good fortune to participate in the miracle of birth as many times as I have, and I know some of you, it is difficult to stand on the sidelines and watch so many people wasting the precious gift of life. It is difficult to look around America today and see so much needless suffering because of the lack of knowledge about prevention, or a lack of access and utilization of quality health care, or the lack of those basic values that prevent violence or abuse from taking root.

But all is not lost. America is moving forward to confront both our health crisis and the crisis of values that has led to too much irresponsible behavior. As your surgeon general, working with you and all Americans, I believe that I can turn the small ripple of success, as manifested by the "I Have a Future" program that -- to -- will produce into great waves of progress on a national level. I believe that I can help empower more people to reclaim the power over their own lives; that I can help inspire people in communities all across this nation to put a stop to dangerous and destructive behaviors; that I can help draw more attention to the tragic public health problems facing us, from the epidemic of violence to the spread of AIDS, to the terrible problem of substance abuse. The biggest tragedy is that these conditions are largely preventable, and the deaths they cause are so often unnecessary.

Take violence, for example. I believe that we have the power to eradicate this scourge and prevent its recurrence. At least 2,200,000 Americans are victims of violent injury each year. In 1992, there were more than 37,000 firearm-related deaths in this country. Unbelievable. Escalating violence in America causes not only unnecessary injury and death, it is also a major cause of disintegration and the hopelessness that pervade so many of our communities. We can dig at the root causes of this epidemic and we can weed it out, we can extinguish its existence. I know we can. And it's going to -- but it's going to take time -- communities working together.

Then there's drug and alcohol abuse. A growing number of our young people are using illicit drugs and ruining their chances to grow into healthy and productive adulthoods. Recent surveys by the Department of Health and Human Services confirm that for three years in a row now, the use of marijuana and other drugs in 8th, 10th and 12th grade students has actually risen. At the same time, we see an increase in the number of older drug users who are showing up in emergency rooms. We've got to do a better job at drug prevention, sending clear, consistent, anti-drug messages, listening to our young people, helping them form positive goals, and giving them the support they need to achieve them.

And then there's AIDS. The Centers For Disease Control and Prevention has revealed that in 1993, AIDS overtook accidents as the number one killer of men in this nation between the ages of 25 and 44 -- automobile accidents, everything else, violence. AIDS. And just this week, the World Health Organization reported that HIV cases are rising fastest among women, and especially young girls and adolescents. While we are still searching for a cure, we know how to prevent the spread of HIV, and we must not be timid in sharing what we know. The knowledge we have about preventing AIDS has the power to save millions of lives. You will have the chance to save millions of lives. The key is to commit ourselves not only to talking the talk, but to walking the walk of prevention.

Which brings me to the issue that the president asked me to place at the top of my agenda -- teen pregnancy. And I want to commend the president in the strongest terms for his role in turning the nation's spotlight on this unacceptable problem. All of the afflictions that I have just mentioned -- violence, drug use, AIDS -- all of them are linked to the unacceptably high teen pregnancy rate in this country. Early sex and early pregnancy so often are linked either as a cause or a consequence of violence, drug use, AIDS, poverty and so many other negative outcomes. Every day -- listen -- every day, 8,400 teenagers become sexually active. And every day, 2,781 teenagers get pregnant. This translates into 116 pregnancies an hour, 24 hours a day. This is bad for the teens and even worse for their children. We know that children born to teenagers are more likely to have serious health problems and are more likely to be poor. We know that about 80 percent of our children born to teenage parents who dropped out of high school now live in poverty.

If we want to prevent teen pregnancy, we must offer our young people more than slogans and dependency. We must offer them something that's worth more than gold. We must offer them a quality education, a full array of health services, and enhanced self-esteem and life options. Too many children today believe their only hope is having babies. Any of you who read Leon Dash's (sp) award-winning series when he lived in Anacostia, 13-, 14-, 15-year-old girls, their goal is to try and get pregnant. Even the fellows didn't want them pregnant. What a tragedy when a 13-year-old or a 14-year-old has nothing else to look for at that particular juncture of her life. That's a dead-end dream having babies at that age. We've got to replace it with a dream of hope and unlimited achievement.

We got a grant from the state where each kid was given so much money. They had to set up a bank account, they made T-shirts and did all kinds of things to make money, and they learned how to balance their checkbooks. This is important for people who live in the inner city and youngsters who just don't see this.

The kind of skills development and character building is not only important for girls and young women, but our research is showing us more and more -- I don't know why we would think differently -- it is also critically important for boys and young men. We have to take the time to understand all the unique aspects of young people's lives, building up their self-esteem, telling them we believe in them, and believing we believe in them, but not simply treating them as a collection of problems. That's what we have done with our I Have a Future program, and it works.

Now let me just give you one other little nuance of the type of, I think, cultural sensitivity that's needed. Whether you go into the barrio or whether you go into Miami or if you go into Appalachia, you must have a cultural sensitivity. I'm deviating from my text just momentarily. When we started this program, we had a job readiness -- (it still is ?) -- component, where we prepare kids how to learn to go out and get jobs, but the one thing that I told our staff that we would never do, we would never tell these young kids that the way they spoke was wrong or bad, for to do so requires of them to reject a part of themselves and their culture, their grandmother. That's their culture. It causes them to reject it.

Let's think about it. A lot of you are in medical school. I know some of you are in the other allied health professions. But what is communication? Well, physiologically, you take in some air in the chest, you tense the vocal cords, you use the diaphragm and expel, and a sound comes out that hits the tympanic membrane and the malleus, incus and stapes, acoustic nerve, goes into the brain. (Laughter.) All this happens very quickly, and somebody -- that's all it is, I mean, if you're communicating. But I know you're wondering, "Well, what?"

I like coining terms. I coined a term called a "residential venue." That's what we call putting these services right in the housing projects. This term I called -- I said, "What you young people have to do now, you must become bilingual. You must learn operative English." That's how we do it in a positive way. (Applause.) That's how you do it. You learn -- that's what Hispanics have to do if they speak Spanish as their first language. They shouldn't reject their language. This is what you have to do, operative English. You know, we tell them you don't "ax" for a job, you "ask" for a job. (Laughter.) But we do that. Maybe you do that if you work in the post office. (Laughter.)

We know -- (laughter) -- we know only one of the programs -- hear this, this is really important. We know -- and I had to tell my staff, they kept saying there was only one pregnancy -- we only know of one pregnancy that have occurred in the young women who participated in our program between 1988 and 1991, compared to 59 pregnancies in the other two demographically similar national housing projects, where the "I Have a Future" program is not offered.

That's a philosophy that embodies the "I Have a Future" Program that we started at Meharry Medical College back in 1987. Our approach is to expand adolescent health care programs beyond the schools and bring them into the communities directly, where they can become a part of the fabric of everyday life. Our program is anchored in Nashville's public housing projects, right in the middle of the housing projects, smack in the middle.

With respect to sexuality, the emphasis first and foremost is always placed on abstinence. Don't many people get pregnant practicing abstinence. The program --

AUDIENCE MEMBER: (Inaudible) -- support condom distribution in school.

DR. FOSTER: The program involves entire --

AUDIENCE MEMBER: (Inaudible) -- Jocelyn Elders -- (inaudible) -- and you're opposed to that. You are not qualified to be surgeon general.

DR. FOSTER: It's okay. (Laughter, applause.) Thank you. I missed the punch line. (Laughter.) That was a nice break, I tell you. (Applause.)

The program involves the entire families and the total social matrix of the surrounding community. Everybody from parents to grandparents, to politicians and volunteers, and from clergy to business leaders, has a role to play. There are three parts to the program. First, we equip adolescents with the basic information they need about health, human sexuality and drug and alcohol use, so they understand the benefits of abstinence and the consequences of early sexual activity and other risky behaviors.

Second, we provide a comprehensive array of adolescent health services with a focus on abstinence. And let me deviate from the text just a moment.

Those of you who really want to see how this program is configured, I would refer you to the Journal of Health Care for the Poor and Underserved, Volume I, Number 1. You can see all of the components and how it is configured. In some cases that means access to birth control. Wait a minute. Hey, it means access to birth control, in some. It's a whole -- (laughter) -- spectrum, we provide the spectrum -- not narrow, that won't get it -- with a very strong emphasis on parental and community involvement. That really is the bedrock of this. It has to be holistic, it really does. We no longer treat patients; they're families, they're part of a matrix, they're interdependent.

And third and most important, we help young people enhance their life options through activities that improve their job skills, self-reliance and self-esteem. For example, the youth entrepreneurial component of our program helps teenagers learn more about themselves and about the world of work and empowering them to start business and communities.

And just last year -- I was so proud of this -- I conducted the graduation ceremonies at Meharry this year as its acting president. Sixteen -- sixteen students of our 24 program participants who graduated from high school last year have gone on to college. I have an insert put into the commencement brochure of the 119th -- 18th commencement of Meharry had all their names and where they were going to college and what they were doing. And eight of them were African-American males; eight of them were African-American females. These are kids that are at Fisk, Middle Tennessee State University, Skerritt College (sp), Austin Peay, Belmont, and it's really, really very encouraging.

It has not been easy, and it doesn't happen over night. In fact, it's a difficult process and requires great dedication by many people, but it is working! This shows what one community can do when it makes teenage well-being a real priority, and I believe this kind of success is possible in any community, every community.

Let me be a bit clearer. As surgeon general, I will work to empower local communities to develop comprehensive programs that fit their individual needs. What works in Nashville may not work completely in Chicago or Charlotte. It will be up to local communities to decide ultimately what is best for them. The administration and I are congruent in our emphasis on abstinence, because I believe that abstinence and aspiration are inextricably linked.

My opponents say that this nomination is about abortion. I have dedicated my entire career to taking all medical steps to meet the needs of my patients, and that includes performing illegal abortions when it's necessary -- legal abortions when it's necessary. Legal abortions. (Applause.) It's the law of the land. (Applause.) I believe in the right of a woman to choose, and I also support the president's belief that abortion should be safe, legal and rare. (Applause.)

And just last year -- I was so proud of this -- I conducted the graduation ceremonies at Meharry this year as its acting president. Sixteen -- sixteen students of our 24 program participants who graduated from high school last year have gone on to college. I have an insert put into the commencement brochure of the 119th -- 12th commencement of Meharry had all their names and where they were going to college and what they were doing. And eight of them were African-American males; eight of them were African-American females. These are kids that are at Fisk, Middle Tennessee State University, Skerritt College (sp), Austin Peay, Belmont, and it's really, really very encouraging.

And the irony, after the debate, is my life work has been dedicated to making sure that young people don't have to face the choice of abortions. To do this, we have put life's possibilities within the reach of these young people. Because when I was reading, as I asked my wife, I said, Why is it that at the time 96 17-year-olds and younger in this country per thousand get pregnant every year, 9.6, and in Japan it's only 7.7 per thousand? She thought and said, Well, they -- probably they're doing something else. Which was quite right. It was prophetic in a way.

And of course that's what we knew, we've got to substitute something else. One of the reasons I hope it is because there are so many positive trends out there. That's why I'm hopeful, I'm sanguine. Like the steady decline in smoking over 20 years. And I don't think many in this group are smokers, I'll bet that. The steep decline in the numbers of people drinking and driving, it's been a real decline. And the steady increase in the use of seat belts, brought on in great part by children. Mama, daddy, faster your seat belt.

Americans are demonstrating that with quality leadership we can make headway on major public health problems if we put our minds to it. Since the president asked me to take on the job of surgeon general, I have been in the fight of my life. I am standing strong, and I appreciate the strong support of the president and all of those here who support me. I appreciate your support.

One thing I know: My fight is no tougher than the one I am asking all of you to join; that's the fight to improve the health of all Americans to prevent teenage pregnancy. I am eager to get to work, because there is so much to be done. I won't hesitate to call on each and every one of you for help. These are our children. They need all of our help.

Thank you very much. (Applause.)

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NOMINATION OF DR. HENRY FOSTER FOR SURGEON GENERAL

Questions & Answers

MESSAGE

Extreme right-wing opponents of a woman's right to choose will use any diversionary tactic in their power to derail the nomination of Dr. Henry Foster. They want to take away a woman's right to choose and will try to make this a debate about abortion. Americans deserve a debate about the qualifications of one of the nation's leading physicians, whose nomination has earned strong support from the medical community around the country.

A LENGTHY, DISTINGUISHED ACADEMIC CAREER

As a respected scholar, an accomplished researcher, a practicing physician, and a medical school dean, Dr. Foster has published widely on a variety of subjects. A person of Dr. Foster's experience should be judged by the objectives he has pursued throughout the course of a 38-year career -- not by distortions of his writings taken out of context.

- Dr. Foster has delivered thousands of babies.
- Dr. Foster has helped train hundreds of doctors, many of whom went on to serve the nation's poor urban and rural communities.
- Dr. Foster started "*I Have A Future*," a family-based program to fight teen pregnancy -- chosen by President Bush as one of America's 1,000 Points of Light.

Following, please find a compilation of common questions and sample responses on the following subjects:

- The "Credibility" Issue
- Abortion
- Sterilization
- Accreditation of Meharry Medical College

CREDIBILITY

CHARGE: *I'm concerned about the credibility of Dr. Foster and the White House. Different numbers have been tossed around, incorrect information was sent up to the Senate, there seems to have been an intent to deceive. Credibility is the real issue to me.*

RESPONSE: There was absolutely no intent to deceive. Dr. Foster answered an initial question about the number of abortions he had performed by relying on his memory, without reviewing his entire record, and this was certainly a mistake. But to suggest that he deliberately lied about that record is outrageous and unfair. Dr. Foster is an honest physician and academic with a distinguished 38 year record of service. He was appointed to the Ethics Advisory Board for President Carter's Secretary of Health and is currently serving his second term on the Ethics Committee of the Nashville Academy of Medicine.

The issue here is not "credibility" and the debate is not about numbers. The issue is the qualification of one of the nation's leading physicians to be Surgeon General and his support of a woman's right to choose. "Credibility" is a smoke screen -- thrown up by those who want to avoid taking a public stand on the abortion issue, but nonetheless want to destroy this nomination. And they make no bones about their strategy of diversion. The Republican Speaker of the House has openly advised his party to "never touch" the issues at hand -- specifically, abortion -- and keep trying to make this important debate about "dishonesty."

The real issues here are the outstanding qualifications of this nominee to serve as Surgeon General and the right of all American women to choose. Let those who would oppose Dr. Foster take on these issues honestly and publicly state their positions, rather than hiding behind the credibility smokescreen. If they refuse, their credibility becomes the issue.

ABORTION

CHARGE: *Dr. Foster advocates the use of abortion as a means of contraception.*

RESPONSE: Dr. Foster has never advocated that abortion be used in place of contraception. In fact, Dr. Foster has repeatedly expressed his concern about the increased reliance on abortion over birth control measures. He believes abortion should be safe, legal, and rare.
[continued]

Throughout his medical practice and distinguished career, Dr. Foster has promoted abstinence as the best way to prevent unwanted pregnancy. His life's work, as he has said repeatedly, has been dedicated to making sure young people don't have to face the choice of having abortions.

BACKGROUND: Dr. Foster published an article, "*Contraceptives in Sickle Cell Disease*," which examined the different reproductive options for women with sickle cell anemia. He acknowledged that abortion is viewed as a contraceptive in parts of Europe, but did not advocate the use of abortion as a contraceptive in the U.S.

CHARGE: Dr. Foster is an abortionist.

RESPONSE: Dr. Foster is one of the nation's leading physicians -- a highly respected obstetrician/gynecologist and one of the leading medical educators in the country. In his distinguished 38-year career, Dr. Foster has delivered thousands of babies and instructed hundreds of young physicians.

Dr. Foster's life has been dedicated to preventing unwanted pregnancies and making sure young people don't have to face the choice of having abortions. Dr. Foster does believe strongly in the right of a woman to choose and echoes the President's belief that abortions should be safe, legal, and rare.

CHARGE: Dr. Foster has promoted in-home abortions to make them more available as contraceptives.

RESPONSE: Dr. Foster does not equate any form of abortion with contraception. He has never promoted the use of in-home abortions, nor has he indicated such support in his writings.

Dr. Foster believes that abortions should be safe, legal and rare. He believes they should be performed only as a last resort, but that when they are done they should be performed in the safest manner possible. Therefore, as an expert in the field of maternal health, he supports research into safer methods. [continued]

BACKGROUND: As Chairman of the Department of Obstetrics and Gynecology, Dr. Foster was the principal investigator at Meharry Medical College for an FDA-approved clinical trial -- conducted in many medical centers throughout the country -- to test the efficacy and safety of an abortifacient suppository administered during early pregnancy. The trial was a research project conducted in an academic medical center, all medical procedures were performed in the hospital, and all patients were volunteers.

CHARGE: *Dr. Foster's promotion of abortion is evidence of the liberal mindset that encourages sexual promiscuity among young people and does not require them to take responsibility for their actions.*

RESPONSE: This is a total distortion. Dr. Foster has never promoted abortion. In fact, he has devoted much of his professional life and career to making sure none of his patients ever has to face that decision. To battle sexual promiscuity among young persons, Dr. Foster established a program in the housing projects of Nashville called "*I Have a Future*," which stresses abstinence as the best way to prevent unwanted pregnancy.

Through "*I Have A Future*," Dr. Foster and his team help build the self-esteem of young men and women by providing education and job opportunities. In fact, Dr. Foster established this program because he found that most teen pregnancy programs were limited to advocating contraception, rather than empowering teenagers to take charge of their lives and consciously make other choices.

"*I Have A Future*" is a nationally recognized program that has received support from the Carnegie Corporation, the Tennessee Department of Health, and Bill and Camille Cosby. In 1991, President Bush named "*I Have A Future*" as one of America's 1,000 Points of Light.

STERILIZATION

CHARGE: *Dr. Foster has performed hysterectomies to sterilize severely retarded women.*

RESPONSE: In 1976, when Dr. Foster wrote that he had performed hysterectomies on severely retarded women, the sterilization of severely mentally retarded women for hygienic purposes was within the medical mainstream. Medical theory and practice have changed in the intervening decades and Dr. Foster no longer accepts the sterilization of a mentally retarded woman as appropriate. Dr. Foster believes strongly in the individual rights of the disabled.

In the article, Dr. Foster stressed that *"obstetricians and gynecologists must guard vigilantly against injudicious and indiscriminate removal of the normal uterus."*

BACKGROUND: Nineteen years ago, in 1976, Dr. Foster wrote an article saying he had recently *"begun to use hysterectomy in patients with severe mental retardation."* This was done to *"eliminate the menses, which can be of significant hygienic benefit to those severely handicapped individuals."*

Dr. Arthur Caplan, Director of the Center for Bioethics at the University of Pennsylvania, said that Dr. Foster's article seemed keenly aware of the long history of abuse of surgical sterilizations. For its time, the article *"represents an enlightened and cutting-edge opinion about the need of caution and care with respect to that form of surgical sterilization."* [New York Times, 2/13/95]

CHARGE: *Dr. Foster has routinely encouraged sterilization of patients with sickle cell disease after they have been able to deliver a child.*

RESPONSE: Dr. Foster actively opposed routine sterilization of sickle-cell disease patients. He has encouraged counseling, screening, and patient management to enable women with this disease to have healthy babies. From the start of his medical career, Dr. Foster has conducted path-breaking scientific research on the diagnosis and treatment of sickle cell disease, improving both maternal and child survival rates.

ACCREDITATION OF MEHARRY MEDICAL COLLEGE

CHARGE: *Meharry Medical College lost its accreditation during Dr. Foster's tenure.*

RESPONSE: Meharry Medical College never lost its accreditation. However, three of its ten medical residency training programs -- including the ob/gyn residency program in June 1991 -- did lose their accreditation. At the time, they had insufficient patient volume and case diversity to provide adequate medical experience for their residents. As is true for many historically black hospitals, Meharry did not receive adequate public funding for the care it provided to uninsured patients and, without these funds, its patient volume declined.

Dr. Foster committed himself to doing everything in his power to preserve the vital role of one of the nation's foremost black hospitals. In 1992, he played a key role in a merger between Meharry and Nashville Metropolitan Hospital that is expected to increase patient volume and result in the reinstatement of these three residency programs. The merger was conditional upon the development of a top-flight medical faculty, which Dr. Foster successfully recruited.

It was clear in the 1991 decision that the quality of Meharry's residency programs was not the problem. David Denton of the Southern Regional Education Board said, *"People shouldn't confuse the residency problems with the quality of teaching at Meharry. It has been very effective at getting its graduates licensed."* In fact, Meharry has trained more black doctors than any other school in America, providing over 40% of the nation's black doctors and dentists. It plays a key role in attracting minorities to medicine and providing doctors to poor urban areas and under-served rural towns.

THE WHITE HOUSE

WASHINGTON

March 15, 1991

Dear Friends:

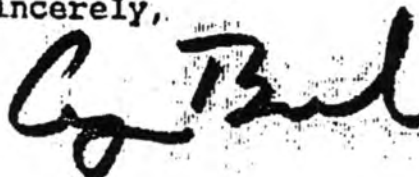
I was delighted to learn of your outstanding work in behalf of your community. Your generosity and willingness to serve others merit the highest praise, and I am pleased to recognize you as the 404th "Daily Point of Light."

Since taking office as President, I have urged all Americans to make community service central to their lives and work. Judging by your active engagement in helping others, it is clear that you understand this obligation.

We must not allow ourselves to be measured by the sum of our possessions or the size of our bank accounts. The true measure of any individual is found in the way he or she treats others -- and the person who regards others with love, respect, and charity holds a priceless treasure in his heart. With that in mind, I have often noted that, from now on in America, any definition of a successful life must include serving others. Your efforts provide a shining example of this standard.

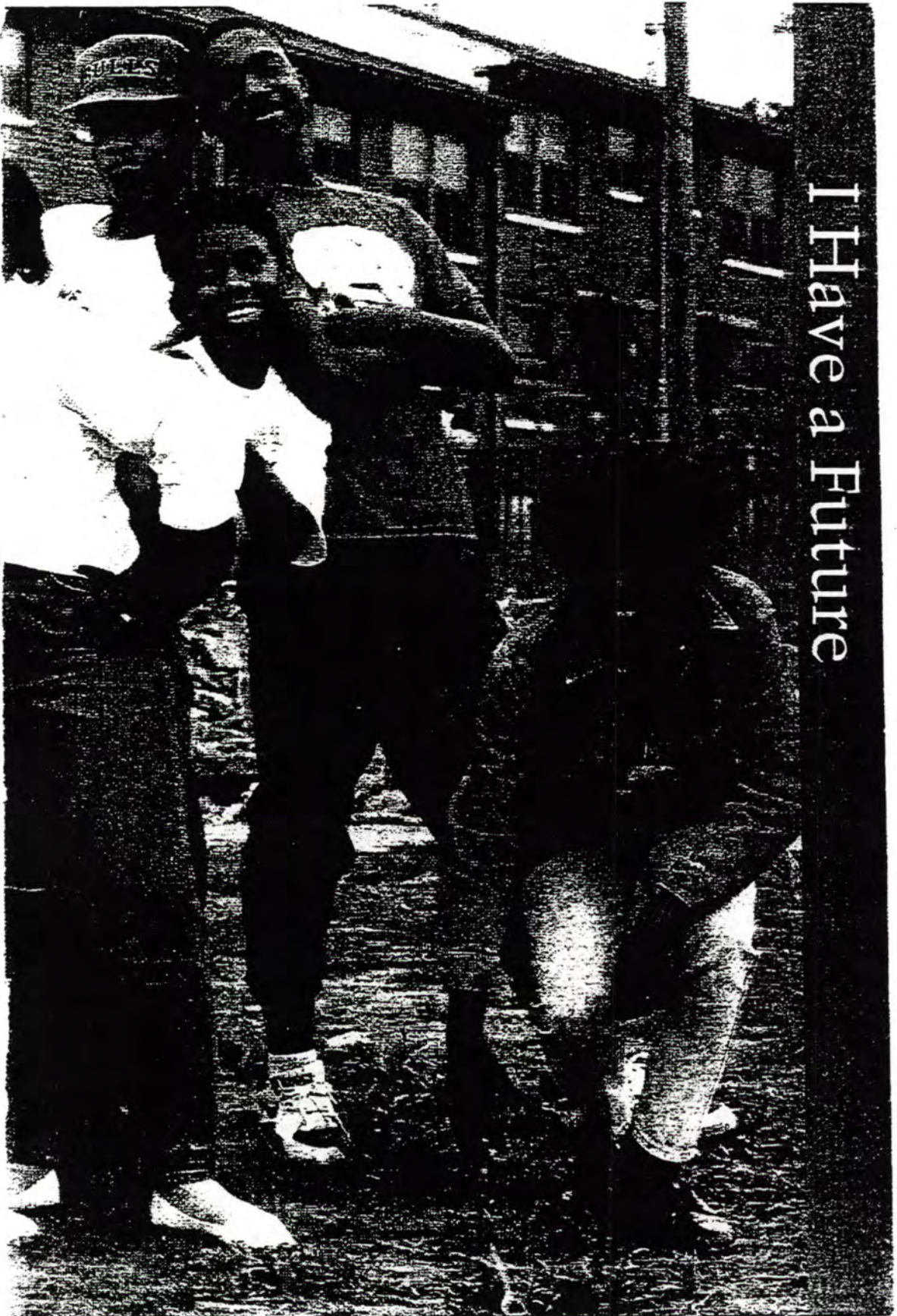
Barbara joins me in congratulating you and in sending you our warm best wishes for the future. May God bless you always.

Sincerely,



Volunteers and Staff of the
"I Have A Future" Program
Meharry Medical College

I Have a Future





Background

As part of its historic mission to serve the disadvantaged, Meharry Medical College has a strong commitment to preventing damaging lifestyles and health behaviors among adolescents.

As the nation's only historically black, independent academic health services center, Meharry has a long history of community concern and involvement. Thus, Meharry has taken this opportunity to develop model programs which provide life-enhancement experiences and health services to high-risk adolescents while preparing health professionals to address relevant issues associated with the youth population.

The Department of Obstetrics and Gynecology has initiated "I Have A Future," a program which addresses a burgeoning problem in our communities — adolescent pregnancy. Frequently, life-threatening and health-threatening consequences of early pregnancy and childbearing are devastating for both the young mother and child. When compounded by the emotional, social and economic traumas faced by the teenage father, families and the community as a whole, the problems of adolescent pregnancy impose an imperative for innovative solutions.

The challenge is to develop a system which successfully educates and motivates adolescents to pursue a myriad of constructive life options and delay parenthood. The program was built on the premise that changes in sexual behavior should be addressed within a framework that provides strategies for positive decision-making while enhancing self-image.

Program Description

The major thrust of this longitudinal, research-intervention project is to develop a model program to prevent teenage pregnancy, substance abuse, and unemployment. Since 1987, the Department of Obstetrics and Gynecology of Meharry Medical College has developed and instituted a comprehensive community-based adolescent pregnancy prevention program involving four municipal housing developments in Nashville, Tennessee.

Previous efforts to prevent teenage pregnancy have focused on giving adolescents the capacity to control their fertility. It has been clear from pregnancy and fertility rates that many high-risk youth are not being reached effectively. Economically disadvantaged adolescents with little hope and limited aspirations frequently cannot understand that having a baby can adversely affect their lives. To the contrary, it is often viewed as an enhancement.

Those who have been at the forefront in the battle to delay early pregnancy and childbearing advocate enhancing self-image and presenting positive alternatives for the future. Subsequently, the program attempts to address the issues surrounding adolescent pregnancy from a broader psychosocial context. Success then rests on convincing youth that the future is theirs to control. The name of the project itself — "I Have A Future" — is based on this premise.

Project Objectives

The "I Have A Future" program incorporates a two-pronged delivery system based in the community. Both individual and group interventions are used to meet the following project objectives:

- To develop a replicable community-based, life-enhancement program that promotes a significant reduction in the incidence of early pregnancy and childbearing among high-risk adolescents.
- To improve knowledge, attitudes and behaviors related to personal health, human sexuality, drug and alcohol abuse and other factors which may place them at risk.
- To provide greater access to, and increase utilization of, comprehensive adolescent health services and social services, including contraceptive availability.
- To improve socially adaptive/appropriate behaviors with particular focus on school achievement, pre-vocational skills development, and delinquency rates.
- To enhance the ability of high-risk adolescents to overcome environmental barriers in attaining the skills necessary to pursue meaningful employment and educational opportunities with the promise of upward mobility.
- To engender a more positive self-concept and constructive attitude towards community, family life and the future.

Each objective has been further delineated such that components may be addressed specifically via baseline-pre/post-measures as well as within specific interventions.

Setting

The "I Have A Future" program is located within the municipal housing projects to ensure the following: (a) Provision of services during the times that they are most accessible to all adolescents (without stigmatizing school drop-outs) through an adjunct program. (b) Close proximity to the families to increase opportunities for interaction within the context of the full range of situations that characterize life in the public housing projects.



Target Population

The participants in this program are from four public housing sites. Two sites receive the intervention and the others are considered control sites. Baseline data have been collected from all four sites.

Prior to the delivery of services, a "Quality of Life Needs Assessment" was conducted with 497 heads-of-households of homes which had youth between the ages of 10 and 17 residing in them. The assessment was designed to gather demographic information, residents' perception of problems impacting on the youth, community needs and ideas on how to resolve existing problems. Of the 497 completed surveys, we found that the majority of the respondents were females (87%), single head-of-households (83%), of African American origin (98%). Over one-half (58%) of the respondents completed high school, however, seventy-one percent were unemployed. Seventy-nine percent of the families had an annual income of less than \$5,000, however, only sixty-five percent received supplemental financial assistance. The participants reported the following problems as most pervasive: Drug and alcohol abuse (92%), adolescent pregnancy (76%), crime (48%), and youth unemployment (44%). Most importantly, seventy-seven percent of the participants indicated their willingness to be part of a program that strengthens families. This information was important, for it reflects the communities' commitment to work at improving their quality of life and their support for a community-based intervention program.

Description of Services

The program is designed to assist adolescents in learning good health practice and making positive choices. The basic service components are delivered in the context of the following areas of concentration:

Comprehensive Health Services

Currently, services are provided by the staff of the Department of Obstetrics and Gynecology of Meharry Medical College at "I Have A Future" clinics within the housing projects. Services are provided each week, with the clinics emphasizing primary health care and health screenings (e.g., physical examinations and lifestyle assessments) and on-going health services (e.g., screening for sexually transmitted diseases, pregnancy tests and distribution of contraceptives).

Organized Social-Learning Activities

Activities with structured educational and behavioral objectives are offered to "I Have A Future" participants. Emphasis is on creativity, physical awareness, nutrition and personal responsibility.

It is critical that the programming be age-appropriate since the target population spans the ages of 10 to 17. While the curriculum focuses on knowledge, attitudes, and behaviors for all groups, the emphasis is on behaviors for the older adolescent group (14 to 17).

The primary value orientation of the program focuses on the integration and implementation of the NGUZO SABA Principles (Seven Principles of Blackness) into each participant's role as a positive family member and in their practice of responsible health behavior. These principles are: NIA (Purpose), UMOJA (Unity), KUJICHAGULIA (Self-Determination), UJIMA (Collective Work and Responsibility), UJAMAA (Cooperative Economics), KUUMBA (Creativity) and IMANI (Faith).

All aspects of the program promote the following: Self-esteem and pride in individuality; physical and mental well-being; completing school; developing job skills and enhancing employability; sexual responsibility; self-control and handling interpersonal conflict; value of helping others and the community; responsible citizenry and family-life values/appropriate parenting. The adolescents are divided into mixed gender groups. Groups serve as the operating-structure for a majority of the programming, with specific activities serving as incentives and vehicles for discussion.



Examples of on-going and planned activities:

Pro-Social Skills Development
*(Focusing on good decision-making and
 problem-solving with special emphasis on
 Alcohol and Drug Abuse Prevention)*
 Conflict Resolution Training/
 Violence Prevention
 Creative Movement/Dance
 Sports
 Tutoring
 Family-Life Education
 Self-defense class
 Computer Skills
 Outings

CHARM Class for Females
*(Choosing How To Adorn
 & Refine Myself)*
 MATURE Class
*(Males Adorning, Thinking
 and Using Refined Energies)*
 Rites of Passage Program
 Art Classes
 Entrepreneurship Program
*(Includes Pre-employment
 Training)*
 Peer Counseling
 Opportunities

Parent Involvement

Every effort is made to involve parents/residents, to make them feel that it is their program and to give them a sense of empowerment and ownership. One such example is the Parent Empowerment Program, a community-based family alternative program in which the parents receive training in family health promotion with emphasis on increasing their effectiveness in the battle to prevent substance abuse in their community. The training equips the parents with the knowledge and skills they need to run workshops and provide services to families that are in need of assistance on substance abuse issues. Some topics covered during their training include: Effective communication, group leadership, crisis intervention and parent effectiveness skills. Other parent-focused activities include: Parent appreciation nights, spaghetti dinners, weight management classes, etc.

Staffing

The "I Have A Future" staff consists of a multi-disciplinary team that includes psychologists, nurses, public health education specialists, counselors, physicians, tutors and volunteers (from the community and local colleges and universities).

Evaluation

The evaluation plan for the "I Have A Future" project incorporates a longitudinal, quasi-experimental design. There are two intervention sites located at two public housing projects and two comparison sites located at two other housing projects in the Nashville metropolitan area. All four sites are similar demographically. Annual assessments of the youth between the ages of 10 and 17 will be conducted for a minimum of three years. The assessment battery includes instruments for measuring knowledge, attitudes and behaviors related to sexuality, contraception, and pregnancy, as well as measures of self-concept, social support, family environment, and psychosocial maturity.

Baseline data collection was completed in 1989. Baseline data were collected from 998 adolescents within the four housing sites (555 study group, 443 control group). The second phase of data collection was completed in 1990. The third phase will begin in the winter of 1991. Preliminary analyses of the baseline data indicate that approximately seventy-five percent of the youth who are at least 15 years old have engaged in sexual intercourse. Contraceptive practices are very poor and twenty-seven percent of the sexually active females indi-

cated that they had been pregnant at least once. These data indicate a definite need for intervention.

In addition to the annual assessments at the intervention and comparison sites, a process evaluation is incorporated in the evaluation design. The number and type of services provided to youth by the "I Have A Future" program in the intervention sites are monitored. This information will be used to determine how much intervention each youth at the intervention sites received. These data will also be used to determine which services were the most effective in achieving the goals of "I Have A Future".

Finally, pre- and post-tests have been developed for each of the "I Have A Future" content-oriented modules. These tests are administered at the beginning and the end of each of the modules. These data have been used to refine the modules so that they are most effective in producing the desired outcomes, such as change in knowledge and attitudes.

Community Support

Resident associations at all housing projects are actively involved in the program. Community representatives are on the "I Have A Future" Advisory Committee.

Metropolitan Nashville development and housing agencies have assisted in obtaining office space within the community. With their staff acting as liaisons between residents and community centers, the agencies have collaborated with us and helped recruit youth into the program. Many program activities have been sponsored by both "I Have A Future" and the local community centers.

National and local advisory committees, representing a cross-section of organizations, institutions and disciplines assist in program planning and act as advocates for "I Have A Future."

Currently, "I Have A Future" is funded by the Carnegie Corporation, W.T. Grant Foundation, William and Flora Hewlett Foundation, and Bill and Camille Cosby. The Tennessee Department of Mental Health and Retardation has funded the Parent Empowerment Program.

The "I Have A Future" staff has been documenting the development of the program from its inception. These chronicles are being developed into protocols for each of the program components. The "I Have A Future" staff is available for technical assistance in such areas as program planning, implementation and evaluation strategies.



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February 11, 1995, Saturday, Late Edition - Final

SECTION: Section 1; Page 1; Column 3; National Desk

LENGTH: 1366 words

HEADLINE: Preventing Teen Pregnancy Results in Praise for Nominee

BYLINE: By RICK BRAGG, Special to The New York Times

DATELINE: NASHVILLE, Feb. 10

BODY:

Ideals that are not propped up with practical solutions do not stand much of a chance in the John Henry Hale housing project here. Young women who live in and around the neighborhood say morality alone has seldom saved anyone from the cycle of teen pregnancy.

Amelia Turner, 18, is a five-year veteran of I Have a Future, an after-school program that teaches teen-agers to delay sex and childbearing, allowing them to build careers and lives. The program, started in 1987 by President Clinton's nominee for Surgeon General, Dr. Henry W. Foster Jr., combines job training, tutoring, medical services and family planning.

Ms. Turner, who comes from a single-parent family, plans to attend college this fall. She said Dr. Foster's program had saved her and hundreds of young women like her. She said anti-abortion groups were misguided to oppose him over how many abortions he had performed.

"No matter how many he did, he could have done many, many more," she said. "They don't realize what goes on in the real world. People, wake up."

Ms. Turner, others in the program, and doctors who have worked with Dr. Foster through the years credit his program with using common sense and not just with handing out free condoms and offering speeches about abstinence.

Dr. Lorraine Williams Greene, the project's director, stressed that the program does not work with pregnant girls or offer abortion counseling. Rather, she said, counselors teach the young people about abstinence, responsibility and self control. As a last resort, teen-agers who insist on having sex are sent to the program's medical personnel, who dispense condoms or birth-control pills if deemed appropriate for their age. She would not say what percentage of the teen-agers were given birth-control items.

Dr. Greene said there have been only a few pregnancies among the 800 to 1,000 young women who were active in the program. About three-quarters of teen-agers in the city housing projects have sex by age 15.

Financed by foundations and private donors with some state money, the program is administered by the Department of Obstetrics and Gynecology at Meharry Medical College. A Meharry nurse practitioner supervises the program's medical staff.

Last Thursday night, some 30 members of I Have a Future crowded into the meeting room in the John Henry Hale project and compared life now with what might have been. In three years, Nakeeta Hunter, 16, went from "not caring about my grades to being on the honor roll." Now she plans to go to college.

Tasaundra Dooley, 16, said, "They taught us that we don't have to be pregnant." Although birth control and abstinence are part of this plan, what the program really does is give her a reason not to join the ranks of unwed mothers, she said.

It makes some of these young people angry to hear a heated debate on abortion from wealthy and powerful people whose children have relatively little to worry about.

"Most of us live in troubled neighborhoods," said 15-year-old Melissa Hunter. "We have children in middle school having babies."

The Surgeon General is in many ways a symbolic position, but the young women and men in I Have a Future, along with colleagues of Dr. Foster, say he would bring on practical, workable solutions to the nation's health problems -- the same way he brought solutions to the young women at John Henry Hale.

The abortion debate in this case "is a shortsighted issue," said Dr. Richard Smith, director of the Adolescent Gynecology Clinic at Henry Ford Hospital in Detroit, the city where Dr. Foster did his internship.

"I think when you look on balance at the work this man has done throughout his career, we really should be applauding the efforts that he has made," Dr. Smith said.

Dr. Foster, a 61-year-old obstetrician, was nominated last week to succeed the outspoken Dr. Joycelyn Elders, whom Mr. Clinton dismissed in December. The choice was supposed to be conciliatory, but conservatives in the past week have rallied against Dr. Foster, because he performed abortions, and because he performed more than either he or the White House originally claimed.

"I don't think doing abortions characterizes Hank Foster," said Dr. David E. Satcher, director of the Centers for Disease Control and Prevention, the former president at Meharry.

Conservatives have also attacked I Have a Future for dispensing birth control items.

In an interview on the ABC News program "Nightline" on Wednesday, Dr. Foster said "no" when asked whether he favored the widespread distribution of condoms. He called abstinence "our first route," without elaborating on further action.

Dr. Foster joined the faculty at Meharry in 1973 and served as acting president for six months after the departure of Dr. Satcher in 1993. He played a central role in negotiating with Nashville officials over the merger of the city-owned Metropolitan General Hospital with Meharry Hubbard Hospital. That merger is crucial to the medical college, which lost its accreditation in 1990 because of declining business at its own, historically black teaching hospital.

It is for his work in poor neighborhoods that Dr. Foster has drawn most of his accolades. I Have a Future is not his first such program. In the 1970's, when he was elected to the prestigious Institute of Medicine, he fought infant mortality and teen pregnancy in rural Alabama, said Dr. Satcher. Throughout his 37-year career, Dr. Foster worked to prevent pregnancies among poorer young people and to head off the health threats to mothers who become pregnant too young and to their babies, Dr. Satcher said.

The I Have a Future program reaches only a fraction of the young people in Nashville, but friends of Dr. Foster, including the teen-agers involved, believe it could be a pilot program for the nation.

It addresses much more than sex, said Dr. Satcher and teen-agers involved in the program. It is based on common sense and self-esteem, and slowly, steadily -- through informal classes almost every day after school -- teaches them how a baby can forever limit their lives, and how to value their own lives.

Dr. Satcher explained how Dr. Foster and others envisioned the program. "They told me that teen-age pregnancy is really not the problem," he said. "It is a symptom, like violence, like drug abuse. The real problem is the attitudes of these young people toward the future. And so they called the program I Have a Future, and they dealt comprehensively with creating a better attitude in these teen-agers about themselves and about the future.

"They felt that if they could do that, the teen-age pregnancy problem would be taken care of, too, because the young people would have a reason for delaying sexual behavior. You weren't just saying, 'Say no to sex.' You were saying, 'You have a reason to value yourself.' "

Tutors help with studies. Volunteers show teen-agers how to get and keep a job, or even start their own business. But most important, there is always a place to go and someone to talk to, even if it is just with each other.

Melissa Hunter has never met Dr. Foster, but she said his brainchild gives her and her friends a choice they seldom had before. A few make it out of the projects and their teen-age years without a baby and the limitations that babies bring, purely on strength of character alone, she said. But it is hard.

"Here they keep you too busy to get into trouble," she said.

"If our grades are low, we go into study hall," said Katashai Looney, 17, a high school senior.

Calvin Peters, a 28-year-old counselor at the program, said the program teaches young men that fathering a child can end their dreams.

Jason Gordon, an 18-year-old whose mother died last year, lives with a sister. He has had every chance to fail, but seven years in the program kept him working, thinking, planning.

Now, every morning, he walks several blocks from his project to Fisk University, where he is studying business. "He's a role model for the others," Dr. Greene said.

Mr. Gordon said: "I would have never gone to college. I needed something to be part of."

The program taught him one thing most of all, he said.

"I know I'm not ready to have a child."

GRAPHIC: Photo: Counselor Calvin Peters, 28, right, talked with teen-agers in the I Have a Future program on Thursday at the John Henry Hale housing project in Nashville. Mr. Peters has been with the program for six years. (Alan S. Weiner for The New York Times)(pg. 8)

LANGUAGE: ENGLISH

LOAD-DATE-MDC: February 11, 1995

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February 12, 1995, Sunday, Final Edition

SECTION: A Section; Pg. A01

LENGTH: 1595 words

HEADLINE: In Nashville, A Portrait of Compassion; Critics Missing 'Total Picture'

BYLINE: John Schwartz, Washington Post Staff Writer

BODY:

Ask Justin Brian, 14, what he's learning in the "I Have a Future" program, founded by Henry W. Foster Jr., President Clinton's choice for surgeon general. Brian's answer: "How to be a man." Fourteen-year-old Mike Rucker says afternoons at the center doing homework help him "stay out of trouble" by "not selling drugs."

Just two weeks ago, Foster was mainly known for the seven-year-old program preaching values such as cooperation and personal esteem that he had brought to teenagers such as Brian and Rucker in Nashville's public housing projects. Today, the 61-year-old obstetrician-gynecologist finds himself the touchstone of another national debate on abortion, his every action over a 35-year career the subject of microscopic scrutiny.

But here, those who know Foster find the portrayal of him by antiabortion activists to bear little resemblance to the community-minded former medical school dean whose hard work and easygoing manner have made him popular with all segments of society in a city his friend, Rabbi Randall M. Falk, describes as "the buckle on the Bible Belt."

The Rev. Bill Sherman of Woodmont Baptist Church, for example, said he and his congregation oppose abortion except in such cases as rape, incest and medical necessity. But he thinks Foster is "an admirable man," and said that many of Foster's attackers are focusing solely on abortion and missing "the total picture." "He's not a politician -- he's a doctor!" said Henry McKay, whom Foster delivered in 1970 and who is now a Meharry Medical College student.

Former mayor Richard Fulton (D) said that it's hard for people in Nashville to understand how Foster's nomination has become so entangled with the abortion issue. But he has an idea. "I was in Congress for seven terms," Fulton said, "and I know that quite often members of Congress get carried away and ask questions that possibly have no bearing on the immediate problem before them."

On ABC-TV's "Nightline" last Wednesday, viewers saw a defensive, faltering Foster, far different from the articulate advocate people have come to know here. But friends figure that

with no previous political experience, Foster was unprepared for the harsh attacks of antiabortion groups and the intense media scrutiny that quickly followed Clinton's announcement of his choice. "I imagine that all of this sudden glare of the spotlight has been a little overwhelming," Falk said. "Because things he's said have been misinterpreted, he's almost afraid to make a statement."

Born in Pine Bluff, Ark., Foster earned his bachelor of science degree from Morehouse College in 1954, where a former classmate, Louis W. Sullivan, secretary of health and human services in the Bush administration, recalls an exceptional gift for humor.

He "could keep you rolling in stitches all night," Sullivan said. "People would say, 'Please, Hank, no more!' Your sides were aching and your eyes dry from having been in tears too long."

Foster went back to Arkansas to attend medical school. The only African American in his class, he graduated with top honors and continued his medical training in Michigan, Massachusetts and then here at Meharry, one of the nation's few predominantly black medical schools, where he completed a three-year residency in obstetrics and gynecology.

After completing medical training in 1965, Foster became chief of obstetrics and gynecology at the John A. Andrew Memorial Hospital of Tuskegee University, where he founded a regional program to provide health services to poor mothers and children that became a model for others across the country. He came back to Meharry in 1973, eventually becoming dean of the medical school.

Medical education is renowned for its rigor, not compassion. But Foster made it a central tenet of his teaching, according to Johnny Jones, a Fayetteville, N.C., obstetrician who studied under Foster in the 1970s. If a resident was curt with a patient or nurse, "He would forcefully set you straight" on the spot, Jones recalled, and might follow up with a closed-door conference. "It wasn't a habit they would continually repeat," Jones added.

Linda Williams, Foster's assistant from 1973 until 1990, said that Foster would scrutinize the weekly stack of patient surveys, looking for complaints about his staff, and follow up personally. "It was very important that the patients were treated with dignity," Williams said.

By most accounts, Foster's most important contribution at Meharry was the creation of the "I Have a Future" program. By the 1980s, Foster had decided that treating people for illness was not enough, that the problems of the poor were woven together too tightly to fix one piece at a time. So in 1987, he visited Nashville's tough housing projects, dining with residents and asking them what kind of social program they thought they needed for their children. Again and again he heard the same story: Just as much as good health, the kids of the projects needed hope, a commodity in short supply in the drug-ridden, violent neighborhoods.

Based in the housing projects it serves, the program preaches sexual abstinence and a strong anti-drug message, and stresses such values as cooperation, personal responsibility and

self-esteem. Staff workers often drive the message home with striking object lessons. Program director Lorraine Williams Greene said that if two youths are fighting with each other, the staffers might make them tie their shoelaces together, saying, "You have to deal with each other. You want to argue? You want to fight? Fine. But you're going to have your shoelaces tied together the rest of the day."

The program also includes a measure of sex education in its curriculum, a fact that has drawn some fire from conservatives. Foster wrote a 1993 essay for the Nashville Tennessean supporting the nomination of Joycelyn Elders as surgeon general and stressing the importance of sex education.

"In America, we live in an open society, which is as it should be," he wrote. "In this environment of openness, our young people are bombarded with sexual messages through the media virtually from the time they arise in the morning until they retire at night. Yet, elements in our open society seek to deny providing our young people the educational basis to protect themselves from the negative effects of these media messages. . . . Sexuality education and contraceptive availability must be coupled together to be effective."

The program has earned national recognition. President George Bush named the program one of the thousand "Points of Light." Though success is hard to measure, Williams Greene points to the fact that between 1988 and 1991, there has only been one unintended pregnancy among participants in the program, versus 59 in a similar group of young people in other Nashville housing projects who did not participate.

Today it serves some 500 children in Nashville housing projects with a budget of \$ 400,000 a year, some of which goes directly to students in an entrepreneurship program to start small businesses.

Justin Wilson, a prominent Republican attorney here and a member of the Meharry board of trustees, said that Foster has an uncanny knack for bridging the cultural gaps between blacks and whites. Again and again, as issues came up that could have increased friction between the races, "Doctor Foster was able to deal with issues that had heavy racial overtones in a way which was nonthreatening to either blacks or whites."

That diplomatic style came in handy as Foster became involved in one of the most controversial issues in recent Nashville history: the city's agreement to merge Nashville's aged General Hospital with Meharry's newer Hubbard Hospital, turning the institution over to Meharry to operate.

Turning the city's medical services over to Meharry made good business sense. Renovating General would have cost much more but the racial implications of entrusting them to a black institution threatened to scuttle the deal. When former Meharry president David Satcher left Meharry to head the Centers for Disease Control in Atlanta, Foster as acting president had to recruit the physicians needed to bring the negotiations to a successful conclusion. Meharry general counsel Richard Jackson said, "A lot of them came because of their belief in him."

Could Foster's penchant for finessing unpleasantness help to explain how Foster got into political trouble? "That's a legitimate question," Wilson said.

Instead of volunteering a worst-case estimate of the number of abortions he had performed during his medical career, Foster offered a number off the top of his head, a number that later would have to be corrected after a painstaking review of hospital records. Though he said Foster is scrupulously honest, Wilson said, "Perhaps his ability to deal with the broad issues, and the consensus-forming manner, does not take adequate account of all of the specific facts. He's more involved in the big picture than the details."

Meharry's board of trustees rejected Foster's bid to become president of the medical school because of shortcomings as an administrator, Meharry sources said. Jackson acknowledged that management is not one of Foster's strengths. Instead, Jackson said, Foster's most comfortable role is similar to that of a "tribal elder."

Jackson said that Foster "keeps the village leadership motivated and focused -- and helps set their priorities. . . . It's very similar to what you want in a surgeon general."

@CAPTION: HENRY W. FOSTER JR.

GRAPHIC: Photo:

LANGUAGE: ENGLISH

LOAD-DATE-MDC: February 12, 1995

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Los Angeles Times

February 14, 1995, Tuesday, Home Edition

SECTION: Part A; Page 14; Column 1; National Desk

LENGTH: 712 words

HEADLINE: FOSTER CITED CAUTION ON SURGERIES;
NOMINATION: CHOICE FOR SURGEON GENERAL WARNED IN 1976 ARTICLE
AGAINST 'INJUDICIOUS, INDISCRIMINATE' USE OF HYSTERECTOMIES. HE URGED
'INFORMED CONSENT.'

BYLINE: By MARLENE CIMONS and PAUL RICHTER, TIMES STAFF WRITERS

DATELINE: WASHINGTON

BODY:

Surgeon General nominee Henry W. Foster Jr.'s 1976 medical journal article that acknowledges he performed hysterectomies on severely mentally retarded patients also warns against "injudicious and indiscriminate" use of the surgery and urges "informed consent" for patients, a relatively new medical doctrine at the time.

The tone of the article could be interpreted in a way that puts Foster somewhat ahead of mainstream medical beliefs in recognizing potential for abuse in performing hysterectomies on mentally disabled women without permission, mental health experts and others said Monday. Foster's medical opinions appear closer to medical beliefs today, when such practices are regarded as unethical and often result in litigation, they said.

"Obstetricians and gynecologists must guard vigorously against the injudicious and indiscriminate removal of the normal uterus," Foster wrote in the January, 1976, issue of the Southern Medical Journal. "Failure to do so will only serve to reinforce much of the hostility and suspicion currently directed toward our discipline."

Much of that suspicion exists "because there is a failure to communicate the concept that removal of the anatomically normal uterus can be completely justifiable," he wrote. Consequently, "efforts must be made to inform patients and uninformed critics."

Taking those positions put Foster ahead of most physicians at the time, said Arthur Caplan, director of the center for bioethics at the University of Pennsylvania.

"He was not taking the older stance which was: Doctors can sterilize whichever incompetent people they choose without permission or apology -- he said it has a limited use

for a small number of women and only if you notify a guardian or parent," Caplan said. "Was it enough? No. But he was ahead of where everyone else was at the time."

Foster has been under attack by anti-abortion groups and other critics for his record in performing abortions. Although he first said that he had performed fewer than a dozen, he acknowledged last week that he is the doctor of record on 39 abortions since 1973.

The White House has responded by stepping up its defense of the nominee and by releasing documents that portray Foster as dedicated to improving the health of poor people. Those documents include the 1976 article that mentioned hysterectomies on the mentally retarded, a practice that White House officials conceded could raise new complaints about Foster, although there actually has been little criticism of that aspect of his career.

Monday, Vice President Al Gore, traveling in Nashville with Foster, denounced opponents of Foster's confirmation. "We're not going to let the extremists win," he said.

The White House also charged that Republicans were leading the anti-Foster campaign as a pay-back for the contributions and votes of anti-abortion groups. White House Press Secretary Mike McCurry seized on reports that the National Republican Senatorial Committee, which raises money for Senate candidates, gave \$175,000 to the anti-abortion National Right to Life Committee before the November, 1994, elections.

McCurry said that anti-abortion groups have "the Republican Party by the nose and they're dragging them around."

Despite the vigorous defense, a leading Democrat predicted that Foster's nomination would be defeated if a vote were to occur now.

"You'd probably get almost no Republicans going for it," said Sen. John B. Breaux (D-La.), chief deputy Democratic whip. And, he said in an interview, even among Democrats "you'd probably have some that are not going to vote for it."

The 1976 article by Foster generally was not about performing the procedure on the mentally disabled, but about medical conditions under which an otherwise normal uterus could be removed.

The White House confirmed that Foster performed involuntary hysterectomies, but said that he had been involved in only a small number. Experts, describing the climate at the time, said that such medical procedures were routine and that laws and attitudes regarding patients' rights -- particularly those of the mentally disabled -- were being widely debated and evolving during the early 1970s.

Times Washington Bureau researcher D'Jamila Salem contributed to this story.

GRAPHIC: Photo, Nominee News: Mental health experts said a 1976 article by Surgeon General nominee Henry Foster Jr. could be viewed as ahead of then-mainstream beliefs. In

the article, he acknowledged performing hysterectomies on mentally retarded patients. Above center, Foster appears with Vice President Gore at a Nashville housing project. Associated Press

LANGUAGE: ENGLISH

LOAD-DATE-MDC: February 15, 1995

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Los Angeles Times
February 19, 1995, Sunday, Home Edition

HEADLINE: TUSKEGEE STILL HOLDS DR. FOSTER IN ITS HEART

BYLINE: By RICHARD A. SERRANO, TIMES STAFF WRITER

BODY:

Dr. Henry W. Foster Jr. saved the life of the mayor's infant son. He talked a scared and confused Joyce German out of an abortion. He ran a network of prenatal clinics that persuaded young, poor women to abandon their midwives. And he delivered babies.

"Oh, the babies," recalled his nurse, Thelma Walker-Brown. "Lots of babies. Babies, babies, babies."

He was just out of medical school when he came to Tuskegee. Young, ambitious, trained in modern medicine. Among the poor, the uneducated and the sick living on the red clay soil of east-central Alabama, among the women who didn't know or couldn't afford to call a doctor, Foster was the best they had.

This was Alabama in the 1960s, a time and a place unlike the world today, long before the President of the United States would summon Foster to become the nation's surgeon general.

So great is the contrast between the political maelstrom of Washington and this community -- and what Foster meant to it -- that people in Tuskegee find it hard to grasp how the life of the "Dr. Hank" they grew to respect could be reduced to a question of how many abortions he may have performed in three decades of medical practice.

Indeed, the portrait of the young doctor that emerges in the recollections of old colleagues and others here serves as a sharp example of just how tortured the nation's struggle over abortion has become.

He is remembered in Tuskegee as the town "baby doctor" who, before *Roe vs. Wade*, performed abortions only in the rarest emergency of having to save a mother's life. As former colleague Dr. Thomas Calhoun said, he was not "an abortionist who works in an abortion clinic and all he does is abortions. . . ."

In the politics of this issue today, such distinctions tend to lose any meaning. Since Foster first acknowledged doing a small number of abortions, and later revised his estimate to 39, his chances of winning Senate confirmation next month have been in grave doubt.

Opponents do not argue that Foster did nothing good; those for whom abortion is an issue of uncompromisable morality believe that he was part of one thing so bad that

nothing else matters. And some contend that the Clinton White House's bungling -- particularly its failure to give an accurate, forthright account of Foster's record at the outset -- has contaminated the nomination process beyond repair.

Those arguments may be the ones that determine Foster's fate as a candidate for surgeon general.

But they seem remote to those who remember how he labored to open the rural poor to the advantages of preventive medicine. How, through his satellite clinics and other outreach programs, Alabama women learned to take better care of themselves and their unborn children.

When Foster was back in Tuskegee last year to address a conference on rural health care, he reflected on the work he and his staff had done.

"I spent nine years of my life here in this most unique community," he said. "We were ahead of our time."

The native of Pine Bluff, Ark., who served in the Air Force as a medical officer, came here in 1964 as the lone obstetrician-gynecologist at the John A. Andrew Memorial Hospital -- a 180-bed, three-story brick facility on the campus of the famed Tuskegee University.

He was an African American doctor serving a black population. Tuskegee was about 87% black, as it remains today, and so were the vast majority of cottonseed farmers and loggers in the surrounding Tuskegee National Forest east of Montgomery, Ala.

The median income when Foster arrived here was less than \$2,500 a year. In the five-county rural area, families went without electricity, telephones and, in some cases, running water. Without jobs or education, how could you tell them modern health care was more important?

Foster took over for Dr. Joseph Mitchell, whom townspeople remember as overworked and stressed and who one day died of a heart attack.

"So Dr. Foster came in and he had all these pressures and he said he wanted to do it all," Walker-Brown said. "He said he was young and he could do it all."

His average caseload ran into the hundreds. He sometimes delivered three babies a day. In truth, the number of infants delivered under Foster's care simply cannot be counted.

Louis Rabb, administrator of the hospital before it closed in 1987, when too many charity cases drained its resources, remembered: "It was a tremendous number of babies. Probably thousands of them."

Taking in patients from Macon, Bullock, Russell, Lee and Elmore counties, Foster expanded Mitchell's program of women's clinics in the rural areas. Friends say he spent afternoons in his Chevrolet Corvair, driving out into the countryside and teaching young women how to care for themselves properly.

The task was often daunting, his colleagues say. Women would wait the full nine months before they called a doctor, if they called one at all. For generations they had gone to a network of midwives operating throughout the region.

Foster sometimes found himself performing emergency surgery to repair a crudely done abortion. Or trying to save women with advanced eclampsia -- a disorder that may occur late in pregnancy -- who were rushed to his hospital in convulsions or already in a coma.

"It's hard to even visualize now," Walker-Brown said. "Women didn't have running water. They didn't have indoor toilets. They didn't have any stable income.

"They were the poorest of the poor. Women who didn't have anything. Women who didn't come to the hospital until the last minute.

"And they were brought here sometimes by lay midwives. They would physically bring them here. Or they'd bring them here with their premature babies. I mean, they'd put those babies in boxes with hot water bottles and bring them to us and ask us to save their lives."

Against this backdrop was the matter of race. The local hospital served only whites, except for a few black emergency patients that it took in and assigned to rooms normally used as closets. So the John A. Andrew Hospital became a mecca for Alabama blacks.

During Foster's time here, Tuskegee, like much of the South, underwent a metamorphosis.

There were civil rights demonstrations on the Tuskegee University campus. A young black man named Sammy Young was shot to death by a white assailant at the town bus depot in an incident that sparked protest marches. Voter-registration gerrymandering that shut blacks out of the polls was overturned by the Supreme Court.

Then the year before Foster left, Johnny Ford became the first black mayor of Tuskegee -- an office he still holds. In front of the Confederate statue that graced the town square, he placed a red-white-and-blue sign proclaiming: "Welcome to Tuskegee, Pride of the Growing South."

Ford said he also feels deeply indebted to Foster. The doctor saved his son's life.

Before he became mayor, Ford worked in New Orleans. His wife, Frances, who was pregnant with their first child, developed complications. They quickly returned to Tuskegee and Foster's care.

"She was bedridden for a while because she was carrying the child low and if she stood up it would cause her to go into labor. It was a very delicate situation," Ford said.

"It turned out he had to deliver the child early, and it took his skill to know when to take the child at exactly the right time."

Later, when Ford became mayor, Jet magazine put him on the cover with his wife and son. Foster liked to point to John Jr.'s picture and tell everyone: "That's my boy." Ford says to this day: "I owe my son's life to Dr. Hank."

In her own way, Joyce German credits Foster with saving her child as well.

She was 20, a student at Tuskegee, unmarried and pregnant with her second child. She knew Foster from services at the Missionary Baptist Church here. One day she knocked on his door at the hospital.

"I didn't want to have another child," she said. "I asked for an abortion, but he refused. He said this child was a blessing to me. He said to have the child and it would turn out all right. Today I have a beautiful daughter who went on to become the valedictorian at her high school."

But also while in Tuskegee, Foster did come under criticism for his efforts to spread the use of birth control. At that time in the rural South, many suspected that the white power structure was pushing birth control as a way to curb the number of black births, and maybe to kill off the black race altogether.

"There has been an outcry by various groups that the intent of family planning is black genocide, and that the ultimate effect will be black genocide," Foster said in a speech while still in Tuskegee.

But he argued that acceptance of more birth control measures would only enhance the black population in Tuskegee, and bring it in line with modern life in the rest of the nation.

It was a delicate line for Foster, but one his colleagues said he balanced well.

"He was well-educated, but when he was with the people down here, he didn't set himself up in an ivory tower," said Dr. Calvin R. Dowe, who worked with Foster at the John A. Andrew Hospital.

Added Dr. Calhoun: "With Hank, we got a whole new dimension."

So when people in Tuskegee remember the good that Foster tried to accomplish, it becomes all the more troubling when they see the furor over his selection as surgeon general.

His uncle, William B. Hill, a 90-year-old retired farm extension service agent, saw his nephew come to Tuskegee and move on, and said he cannot understand what people would want in a surgeon general if not someone like Foster. Nor can his wife, 92-year-old Sadie Hill.

"We were all real poor people when Hank was here," Sadie said. "We were just people who needed help. He helped us."

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SHOW: *All Things Considered* (NPR 4:30 pm ET)
February 17, 1995

HEADLINE: Dr. Foster's Work in Nashville Praised

GUESTS: WILLIAM HARVEY; PHIL BREDESEN; JOHN MAUPPIN; ELWIN GRIMES;
JOE JENKINS; TANYA RUTLEDGE; FRANK GIBSON; BILL BOMGARDNER; AVON
WILLIAMS III; INEZ CRUTCHFIELD; Rev. SHERMAN TRIBBLE;

BYLINE: JOANNE SILBERNER

HIGHLIGHT:

Dr. Henry Foster's work in Nashville, Tennessee with teen programs and upgrading the Meharry Medical College, brings praise from those who know him. He is known as a quiet, unassuming doctor.

BODY:

NOAH ADAMS, Host: For the last two weeks, President Clinton's nominee to be U.S. Surgeon General, Dr. Henry Foster, has been in the middle of the controversy. It centers on procedures he did as a gynecologist, hysterectomies on retarded women, and abortions. Dr. Foster has said he wants the chance to tell Congress, and the American people, who he really is. A poll this week showed that even though Americans may not be clear about that, more support the nomination than oppose it. NPR's Joanne Silberner visited Dr. Foster's home town, Nashville, Tennessee, this week, to find out what people there think about it.

JOANNE SILBERNER, Reporter: If you want to know about Henry Foster, go to Meharry Medical College where he spent 21 years teaching medical students, taking care of patients, and as an administrator. At Meharry's Hubbard Hospital, workers have ripped out most of the walls and ceilings. Here on the fifth floor, the water pipes, the electrical lines, the heating ducts are all exposed. Hubbard Hospital has just begun an 18-month renovation.

WILLIAM HARVEY, Meharry-Hubbard Hospital Administrator: It will be a 150-bed hospital, completely renovated throughout, all new equipment. It'll be- it'll be a gorgeous new hospital for the city of Nashville.

JOANNE SILBERNER: Hospital administrator William Harvey shows us around what will be the pediatrics ward. The renovation is the final step in a bitterly contested merger between Meharry's Hubbard Hospital and Nashville's General Hospital, a merger that's happening largely because of Henry Foster.

While the merger will save the city money, it means closing down the white-run public hospital and bringing patients and city money to black-run Meharry - something some

people in Nashville didn't want. The city went through months of public hearings on the merger. Republicans and Democrats both credit Foster with being able to bring all sides together. He worked behind the scenes in closed-door meetings, keeping people talking. Nashville mayor Phil Bredesen says Foster's quiet style worked.

PHIL BREDESEN, Mayor of Nashville, Tennessee: He has a very nice, low-key way of getting things done. What I found was that- that in a very political environment, which things like this merger were, he had a way of getting things done without being overtly political, that his kind of quietness and conservatism and competence was a very- it just was just a very politically effective approach.

JOANNE SILBERNER: For the merger to proceed, Meharry had to prove that highly qualified doctors would want to come to work here. John Mauppin [sp], head of Meharry, says it wasn't easy.

JOHN MAUPPIN, Meharry Hospital: Dr. Foster led that recruitment and brought some outstanding physicians from around this country who were dedicated to the mission of Meharry to serve the underserved and were willing to come to Nashville, Tennessee and work at General Hospital, even in the old facility. Most people didn't believe that we would be able to recruit people like that.

JOANNE SILBERNER: There are lots of reasons doctors might not want to come to Meharry. Some of the patients can't pay their doctors' bills at all, and many patients' bills are paid at low government rates. The medical school doesn't own a lot of fancy machines and didn't have enough patients to maintain accreditation for some of its teaching programs, and the emphasis here is on primary care, not the highly-specialized medicine that many doctors find more interesting. But Foster was able to meet the city's requirement of 56 doctors. One of the doctors who came was obstetrician-gynecologist Elwin Grimes [sp].

ELWIN GRIMES, Obstetrician-Gynecologist: First of all, he told me that he was going to present me with a challenge that would be one of the most difficult of my whole life. All right, and then he described the need that existed here, and from there, we got into discussions that have to do with what's important in regard to the contributions that we make as physicians. What are the things that we all do that make a difference?

JOANNE SILBERNER: What Foster is most known for in Nashville and what was supposed to sell him to the Congress is a local program called 'I Have a Future.'

JOE JENKINS, 'I Have a Future' Instructor: OK. Once again, welcome to family life education. Once again, for those who may have forgotten from week-to-week, I'm Joe Jenkins.

JOANNE SILBERNER: Twenty-five teens are sitting, boy-girl-boy-girl, in a classroom in a Nashville high school. It's an after school program Foster started eight years ago for teenagers from two city housing projects. Every day Joe Jenkins starts the class the same way.

JOE JENKINS: OK. Everybody understand this is a teen pregnant prevention program? Everybody understand the best way to prevent pregnancy is-

STUDENTS IN CLASS: Abstinence.

JOE JENKINS: Abstinence. Once again, always understand, no matter what you hear from everybody else, there are more people not having sex than there are having sex.

JOANNE SILBERNER: It's not just abstinence, the program also teaches birth control methods and sexual responsibility, something that conservatives raised concerns about the first day after Foster's nomination. But the focus of the program is life skills; teaching the teens how to conduct themselves in job interviews and on the job, having them run a small business, tutoring, taking them on trips, that sort of thing. The idea is to teach the teens that there are better ways to get attention than having a baby.

Tanya Rutledge [sp] is 17. She's been in the program eight years.

TANYA RUTLEDGE, 'I Have a Future' Student: I plan to graduate this year and go to college, and I want to own my own beauty shop.

JOANNE SILBERNER: If you hadn't been in the program, what do you think your life would be like?

TANYA RUTLEDGE: I think I would probably be like my other friends which have children or they're about to have a child.

JOANNE SILBERNER: What would that kind of life be like?

TANYA RUTLEDGE: It would be awful because I wouldn't be able to go to college and make the kind of money that I want to make.

JOANNE SILBERNER: More than 800 teens have gone through the program since Foster started it. There are no hard statistics on how well the program is doing, but during one 30-month period, only one girl got pregnant - much lower than in the past. In some circles, like the housing projects and the local medical community, Henry Foster is a hero. But citywide he is not that well known. Frank Gibson, political editor of one of Nashville's newspapers, The Tennessean, didn't expect even the nomination or what followed.

FRANK GIBSON, Political Editor, The Tennessean: I would- I would say that I was surprised, but only because I- I would not have thought about it. You know, he just did not have a very high profile in this community. No, you know- no controversy, certainly that this newspaper has known about and written about.

JOANNE SILBERNER: The national controversy over abortion, that started after the president named Foster, hasn't cost him support here. Gibson says the local community

is continuing to back Foster. There were no major questions about the hysterectomies Foster performed on retarded women. The only opposition in Nashville to Foster's nomination seems to come from people who don't know him personally. They, like some national leaders, strongly object to the abortions he's done. Bill Bomgardner [sp] leads the local chapter of an anti-abortion group, the Christian Action Council.

BILL BOMGARDNER, Local Leader Christian Action Council: I certainly have no personal ill will to Dr. Foster. I just think it's a poor decision to put a pro-abortionist on as the top doc. There are certain things that disqualify you, and this is one of those issues. Killing people is sort of permanent.

JOANNE SILBERNER: But not all abortion opponents feel that way. Avon Williams III [sp] is the son of the first African-American state senator in Tennessee, and has known Foster his whole life. Foster nursed Williams' wife through a tough pregnancy and delivered his daughter. Williams is a Republican, a member of the Christian right. He thinks abortion should only be considered when the mother's life is at stake. Williams says Foster shouldn't have done any abortions, but that all the other things that he has done would make him a good surgeon general.

AVON WILLIAMS III, Acquaintance of Dr. Foster: If you're going to make this a referendum on abortion, and on doctors who perform abortions, Hank Foster is probably the worst choice you could possibly make. I mean, from a standpoint of political strategy, as a pro-lifer, Hank Foster is not- would not be the guy I'd be trying to bring down. Hank Foster has not been an abortionist. He's been promoting life most of his career. Why would we choose somebody like Hank Foster to vilify? It just doesn't make sense to me.

JOANNE SILBERNER: On a cold and rainy Wednesday evening, the male chorus at the First Baptist Church on Nashville's Capitol Hill is rehearsing. Down the hall, the pastor Reverend Sherman Tribble [sp] has gathered a few people together to talk about Henry Foster. This is Foster's church. He's been a member since he arrived in Nashville in 1973. The congregation strongly supports him. Inez Crutchfield [sp] is a church member and a patient of Dr. Foster's.

INEZ CRUTCHFIELD, Patient of Dr. Foster: Because of him, I frequently say, 'I am alive today.' Because it was Dr. Foster who discovered that I had cancer at a very early stage, and it was Dr. Foster who did the surgery.

JOANNE SILBERNER: Crutchfield says she was thrilled when she heard her doctor had been nominated as surgeon general. But the political battle that began soon after upset her.

INEZ CRUTCHFIELD: I was very angry. I was just furious, to be very frank with you. That anyone would question- having known him as well as I did, I could not imagine persons questioning his professionalism, his reputation here, in Tennessee, in this city, was without blemishes, far as I- I would know.

JOANNE SILBERNER: Foster came back to the church last weekend. Reverend Sherman Tribble says he's in good spirits, his faith challenged, but not shaken.

Rev. SHERMAN TRIBBLE, Pastor, First Baptist Church: Sunday when we looked at our New Testament lesson, one of the verses from Luke, Chapter 12 said that, when persons come before the authorities to be tried, don't spend a lot of time concocting answers. Rely on the spirit, or the Holy Spirit to guide you. And as he looked at that particular verse, when we were leaving the service, he just kept pointing to it. He'd say, 'Reverend, that's it. That's it. That's it.' And, I guess, for him it said that, when I get a chance to present my views in the public forum, it'll be all right.

JOANNE SILBERNER: Foster began presenting his views this week. He spent two days on Capitol Hill in Washington, talking to senators, looking for the same kind of support he's gotten from his community. This is Joanne Silberner reporting.

The Charlotte Observer

Foster treatment angers Charlotte woman

Profile of her former doctor 'one-sided,' she says

By RICKI MORELL
Staff Writer

Jeannette Hight was 3 1/4 months pregnant when she began bleeding in the middle of the night. Frantic, she called her obstetrician at home.

"He met us in the hospital in his bedroom slippers," Hight recalls.

With her doctor's careful help, Hight averted a miscarriage. That was more than 25 years ago. The boy who was born that December 1969 is now grown and married.

The place was Tuskegee, Ala. And the doctor was Henry Foster, President Clinton's nominee for surgeon general.

Hight, 57, who has lived in Charlotte for 19 years, wants the nation to know that the man who saved the life of her only child is no "abortion doctor."

She remembers Foster as a compassionate man committed to ushering in new life.

"What I've heard is a one-sided story," says Hight, director of Charlotte's Plaza Presbyterian Church day care center. "I haven't heard anything about all the lives that came into this world because of him. He is a man of great integrity."

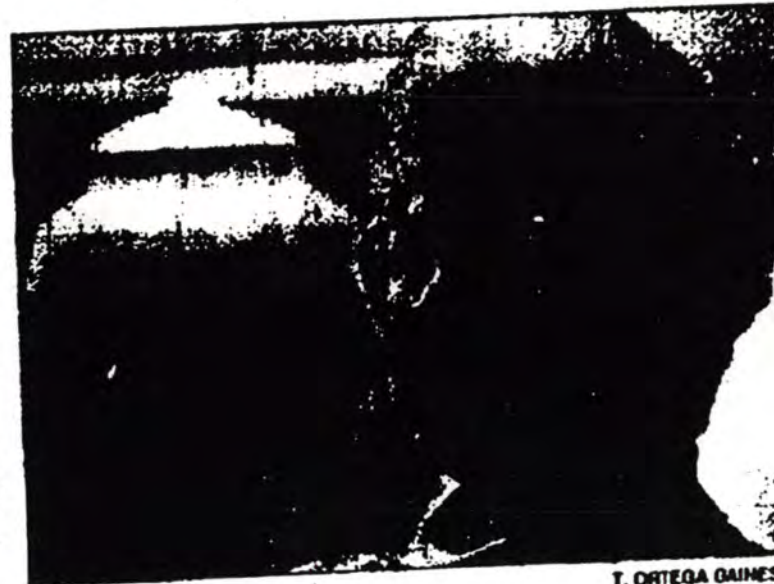
Foster, 61, former acting president at Meharry Medical College in

Nashville, worked at John A. Andrew Hospital in Tuskegee from 1965 to 1973.

Jeannette Hight and her husband moved to Tuskegee in 1965 from Baltimore. Charles Hight had been asked to start the architecture school at Tuskegee Institute. He is now dean of UNC Charlotte's school of architecture.

"My husband and I have both been very angry about what has been happening to Dr. Foster," Hight says. "My husband has con-

Please see Foster/page 14.



T. ORTEGA GAINES

Jeannette Hight remembers surgeon general nominee H. Foster as committed to ushering in life. He was her doctor in Alabama 25 years ago and saved her from a miscarriage.

CRITICS OF FOSTER AREN'T EASING UP/PAGE 2A

Treatment of surgeon general nominee angers Charlottean

Foster

Continued from page 1C

tacted all of our legislators. I've told everybody I know."

Clinton administration officials chose Foster because of his moderate views and impeccable medical reputation. But soon after they announced his nomination Feb. 2, anti-abortion activists attacked Foster because he had performed abortions. Clinton promises to stand by his nominee despite growing opposition.

Foster has defended a woman's right to an abortion and stressed that most of the abortions he performed were in cases of rape, incest or medical necessity.

Hight hadn't thought about Foster in years until she saw his picture in the paper 10 days ago. "I was just so excited for him," she says.

As the days passed, Hight says she watched the image of her doctor turn into a caricature of an "abortion doctor."

"That wasn't the doctor that I knew," Hight says. "I knew him as a doctor who would work as hard as he could to save a life. He was always available. He was easy to talk to. He didn't rush you in and out of your appointment. He was reassuring. And very calm."

Hight isn't a Clinton supporter — she's a registered independent who voted for Ross Perot. She supports Roe vs. Wade and a woman's right to choose an abortion. But she says, "I'm a pro-life person myself. For me, I could not have an abortion. For me I believe it is taking a life."

Hight is a member of St. Peter Catholic Church and worries she might be condemned for supporting abortion rights because the church opposes abortion.

"But I feel like it's the right thing to do," she says. "I don't care. I just feel like somebody had to say something for Dr. Foster."

Hight cared for Foster's children when she ran Tuskegee's preschool program. Her husband designed Foster's house in Tuskegee. When the Hights found out they were going to have a child, they asked Foster to be their doctor.

It was a difficult pregnancy. At six months, Hight went into early



T. ORTEGA GARCIA/STAR

Jeannette Hight of Charlotte says surgeon general nominee Henry Foster is "a man of great integrity." He was her doctor in Alabama 25 years ago and saved her from a miscarriage.

On Dec. 27, 1969, Hight went to see him for her regular checkup. After he examined her, he said, "Woman, don't you know you're in labor?"

Her husband was home working. "Call Charlie," Foster told her. "You're not going home."

Three hours later, Christopher was born.

"He was a healthy boy. I was so excited we had a child," Hight says. "Dr. Foster had given us so much joy."

Until the abortion controversy, Foster was known for his efforts fighting teenage pregnancy. He founded a national program — "I Have a Future" — that was recognized by the American Medical Association and by President George Bush as one of his "thousand points of light."

On Friday, Foster noted to a group at George Washington University that his nomination fell on Groundhog Day and that he feels "a little bit like that groundhog."

"Ever since Feb. 2 ... the descriptions of myself and my work that I have read in the papers and seen on TV have cast an unrecognizable shadow of the man I really am. Yes, I see a shadow, but it's not my shadow."

"A nomination like this should be above politics," she says. "I hope Dr. Foster will stick with it. I hope he will actually be our surgeon general. But I wouldn't hold it against him if he didn't want to be it anymore."

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SECTION: Section A; Page 15; Column 3; National Desk

LENGTH: 798 words

HEADLINE: White House Releases Papers That Defend Foster

BYLINE: By LAWRENCE K. ALTMAN, Special to The New York Times

DATELINE: WASHINGTON, Feb. 12

BODY:

In the face of mounting furor over Dr. Henry W. Foster Jr.'s performing abortions, as well as hysterectomies on severely retarded women, the White House issued documents over the weekend portraying Dr. Foster, President Clinton's nominee for Surgeon General, as a devoted medical educator dedicated to improving the health and welfare of the poor.

In one document, a scientific report published in 1976, Dr. Foster said he performed an unspecified number of hysterectomies on severely retarded women for sterilization and "hygienic" reasons at a hospital in Tuskegee, Ala.

The selected documents the White House made public on Saturday night included articles from scientific journals, speeches, Congressional testimony and book reviews. But they were not a complete set of his writings.

Among the documents made public by the Administration were some showing that Dr. Foster had spoken out about the need to expand the national health service to provide more care to poor people and to those in rural areas. In May 1994, he asked Congress for \$24 million to help Meharry Medical College in Nashville, of which he was acting president.

Another document showed that as he completed a year as president of the Association of Professors of Gynecology and Obstetrics in March 1994, Dr. Foster gave a speech that was sharply critical of medical education's main organization, the Association of American Medical Colleges. He criticized what he called the group's flawed logic in recommending that obstetrics and gynecology be abolished as a required course for American medical students.

The surgical sterilizations were the latest disclosures about Dr. Foster's 38-year career to fuel criticism. But the White House maintains that Dr. Foster was very much in the mainstream of medical practice when he performed them, in the 1960's and 1970's.

Some experts in obstetrics and gynecology as well as medical ethicists interviewed today

agreed with the White House. They said those were times when doctors had little medication to protect severely retarded women against pregnancy and to help them avoid monthly periods. But some conceded that while the practice was in the medical mainstream, it was still disputed.

"Clearly it was very controversial, but well within the scope of standard practice around the country at the time," said Dr. Kenneth Ryan, chairman of the department of obstetrics at Harvard Medical School, who headed a national commission for the protection of research patients.

But Dr. Ryan noted that the practice was certainly less disputed then than now.

Dr. Luigi Mastroianni Jr., a professor of obstetrics and gynecology who heads the division of human reproduction at the University of Pennsylvania, said such procedures "were the most humane method we had to allow people with severe mental deficiency to have any comfort at all."

"It was not just a matter to provide pregnancy protection, but also hygiene," he added. "In the course of menstruation, they would not be able to care for themselves and you would have to restrain in order to put a tampon in, if you could get one in."

Today, he added, drugs can help.

But Dr. Mastroianni said he did not recall any dispute over the procedure at the time beyond the standard sensitivity to unnecessary surgery and undue risk. Indeed, he said he had performed such procedures after going through the difficult process of obtaining informed consent.

"Even now, the issue of sterilization is hotly debated, and among people who are retarded and who cannot make decisions for themselves, it is very hard to get a consensus on what to do," Dr. Mastroianni said.

Dr. Foster discussed his use of hysterectomies for severely retarded patients in an article in The Southern Medical Journal in 1976 where he reviewed 485 hysterectomies at the John A. Andrew Memorial Hospital in Tuskegee from 1963 to 1973.

Recognizing that hysterectomy for sterilization "is not a universally accepted practice," Dr. Foster said that he had "begun to use hysterectomy in patients with severe mental retardation." Dr. Foster did not specify the number of these hysterectomies he performed or for how long.

Dr. Arthur Caplan, who heads the Center for Bioethics at the University of Pennsylvania, said that in the Southern Medical Journal article Dr. Foster seemed keenly aware of the long history of abuse of surgical sterilization dating at least to the 1920's.

Dr. Caplan said that for its time, Dr. Foster's paper "represents an enlightened and

cutting-edge opinion about the need for caution and care with respect to that form of surgical sterilization."

By the 1970's, Dr. Caplan said, there was "a shift in thinking in the profession that you ought not do this without proxy consent and probably court review."

LANGUAGE: ENGLISH

LOAD-DATE-MDC: February 13, 1995

The American College of Obstetricians and Gynecologists

STATEMENT OF THE AMERICAN COLLEGE OF OBSTETRICIANS AND GYNECOLOGISTS

PRESS CONFERENCE: "MEDICAL COMMUNITY SUPPORT OF HENRY W. FOSTER, M.D.,
NOMINEE FOR SURGEON GENERAL"
NATIONAL PRESS CLUB -- WASHINGTON, D.C.
FEBRUARY 10, 1995 -- 9 A.M.

RALPH W. HALE, M.D., F.A.C.O.G.
ACOG EXECUTIVE DIRECTOR

The American College of Obstetricians and Gynecologists (ACOG), representing over 35,000 physicians specializing in women's health care, is here today to wholeheartedly and unequivocally support the nomination of Dr. Henry W. Foster as Surgeon General. And we are joined by other organizations representing thousands of doctors across this country.

We are here today to applaud Dr. Foster's accomplishments, not to apologize for them.

His career should be celebrated, not defended.

His knowledge should be shared with the nation, not silenced.

Dr. Henry Foster's career achievements are well-known. He has been on the faculty of Nashville's Meharry Medical College since 1973, where he has served as Dean of the School of Medicine and as Acting President, and as Vice President for Health Affairs. He is a Professor and past Chairman in the Department of Obstetrics and Gynecology at Meharry. He is currently on sabbatical as a health policy fellow at the Association of Academic Health Centers in Washington, D.C. He has served as Chief of Ob-Gyn at Larson Air Force Base. He has been President of the Association of Professors of Gynecology and Obstetrics, an examiner for the American Board of Obstetrics and Gynecology, and he is a member of the prestigious Institute of Medicine.

Dr. Foster is a widely-known, popular, and respected member of the College, which represents over 90 percent of all the board-certified ob-gyns in this country. He has served with distinction on numerous College committees, dealing with issues ranging from education in family life to ambulatory care, maternal health, and resident education.

I personally know Hank Foster. Let me tell you what makes him special. He is the kind of compassionate, caring, and committed doctor that we all want as our personal physician, and that America will value as the nation's physician.

-- more --

Dr. Foster has chosen for his life's mission to work with people who need help the most, those who might not otherwise have access to health care. He is exceptionally qualified to take on the health challenges that face our nation -- from infant mortality, to sexually transmissible diseases, drug and alcohol abuse, violence in our cities' streets, and teen-age pregnancy.

Dr. Foster's widely-acclaimed "I Have a Future" program encourages young people to delay sexual activity and to develop job skills and self-esteem. Reducing teen-age pregnancy has been a stated goal of Congress and the President for some time now. It is a major public health issue. Who better to lead the nation's dialogue on this question than someone who has worked on this problem successfully on a day-to-day basis for many years?

Dr. Foster has dedicated his life to caring for women and their babies -- delivering over 10,000 of them -- and to promoting the health of their families.

In spite of Dr. Foster's illustrious record, there are some who would deny him a hearing before the nomination process has even begun. The key word here is "process," that is, a full-fledged discussion of his qualifications before the United States Senate.

A hearing does not mean one editorial, or a thirty-second sound bite. A hearing means a deliberative process before the duly-elected representatives of the American people.

What's right about this process is the choice of Dr. Foster for Surgeon General; what's wrong is how we set our public servants up to fail before they are allowed to speak for themselves.

There are some who would use the abortion issue as a litmus test for judging a doctor's capacity for public service. Those of us here today -- even with our differences in personal views -- do not share that belief. We represent different types of doctors, treating different types of patients, in a variety of settings -- from public health clinics and pediatric offices to emergency rooms. We judge Dr. Foster on the totality of his career.

Within our own specialty of ob-gyn, for example, about 13 percent of our members oppose abortion. Many of them have called me this week, to say that Dr. Foster is a fine man who deserves a fair hearing. One of them, Dr. James Youngblood of Kansas City, whose statement we hand out today, says clearly, "He should be the Surgeon General -- we need him!"

That is the point. We do need Dr. Henry Foster. His gift to this country is his life's work, and he will serve us well.

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EXCERPTS OF MEDICAL COMMUNITY SUPPORT FOR THE FOSTER NOMINATION

Press Conference with The American College of Obstetricians and Gynecologists
Feb. 10, 1995

"Dr. Foster's commitment to public health, his dedication to the challenges of teen pregnancy, drug and alcohol abuse, violence and infant mortality demonstrate his qualifications to be the health guardian of the American people."

American Medical Association

"American academic medicine knows Dr. Foster extremely well and has benefitted over many years and in many ways from his enormous talents. He richly deserves the reputation he has earned as a nationally renowned medical educator and clinician."

Association of American Medical Colleges

"He enjoys widespread respect among his peers, who to a person perceive him as a physician with the integrity, personal and professional characteristics that make him an exemplary candidate to be the chief doctor in the land for all the people."

Association of Academic Health Centers

"As an advocate for children, he will bring hands-on experience in battling some of our most important health problems, like infant mortality and teen pregnancy."

American Academy of Pediatrics

"The nomination of Henry W. Foster, M.D., an outstanding member of the Tennessee Medical Association, for the position of U.S. Surgeon General came as no surprise to physicians in Tennessee."

Tennessee Medical Association

"Private decisions made by physicians and their patients should not and cannot serve as political fodder for any viewpoint -- liberal or conservative.(...) Dr. Foster's nomination should be considered on his record as a distinguished physician and educator."

American College of Physicians

Other organizations supporting the Foster nomination: American College of Preventive Medicine, American Medical Women's Association, American Psychiatric Association, American Society for Reproductive Medicine, Association of Minority Health Professions Schools, Association of Professors of Obstetrics and Gynecology, Association of Teachers of Preventive Medicine, Council on Resident Education in Obstetrics and Gynecology, Council of University Chairs of Obstetrics and Gynecology, National Medical Association.
