

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

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

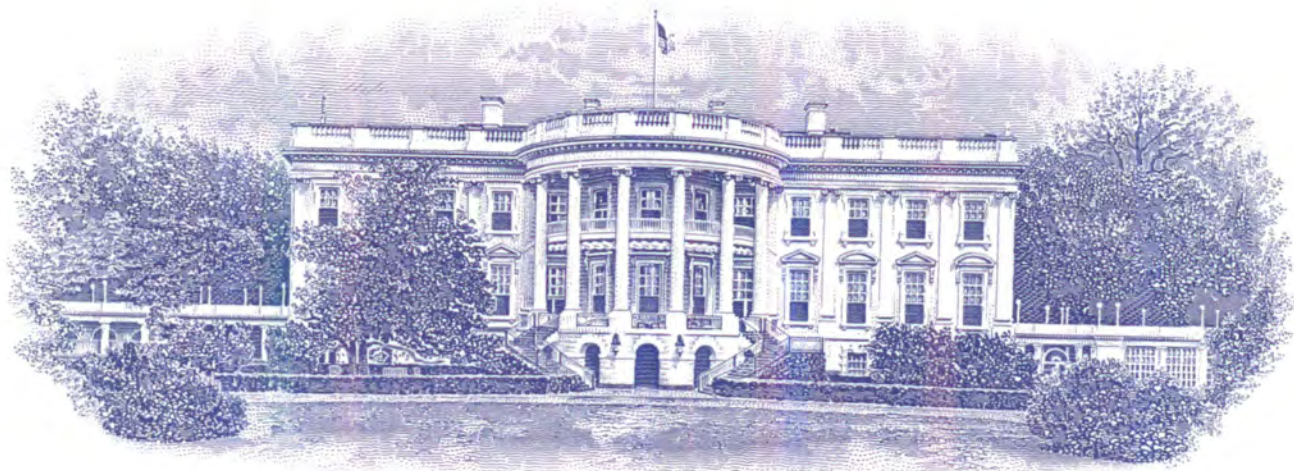
National Abortion and Reproductive Rights
Action League
National Association for the Advancement of
Colored People
National Association for Equal Opportunities in
Higher Education
National Association of Black Cardiologists
National Association of Public Hospitals
National Association of Social Workers
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

FEB. 15

GROUP BRIEFING ON FOSTER



The White House



PHOTOCOPY
PRESERVATION

AGENDA

**BRIEFING ON DR. HENRY FOSTER
SURGEON GENERAL NOMINEE**

Wednesday, February 15, 1995

474 OEOB

1:00 P.M.

WELCOME AND INTRODUCTION

**Ben Johnson
Associate Director,
Office of Public Liaison**

OVERVIEW OF SURGEON GENERAL NOMINEE

**Dr. Phil Lee
Assistant for Health,
Department of Human and Health Services**

**Avis LaVelle
Assistant Secretary for Public Affairs,
Department of Human and Health Services**

GRASS ROOTS STRATEGY

**John Podesta
Assistant to the President,
Staff Secretary**

CLOSING REMARKS

**Ben Johnson
Associate Director,
Office of Public Liaison**

Speakers at ~~FF~~ Thursday Groups Press Conference on Foster.

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American Medical Women's Assn.
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Fax: 703/549-3864

Keith Geiger
President
National Education Assn.
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Fax: 822-7741

Kate Michelman
President
NARAL
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Fax: 202/973-3096

Reed Tuckson, MD
President
Assn. of Minority Health Professions Schools
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Executive Director
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Arthur Kropp
People for the American Way
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Fax: 293-2672

Bishop Fred James
AME Church
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Fax: 202/289-1942

Alan Rosenfeld, MD
President-Elect
Assn. of Schools of Public Health
202/842-4668 (Mike Gennel)
Fax: 202/289-8274

ORGANIZATIONS SUPPORTING THE NOMINATION OF

DR. HENRY FOSTER AS SURGEON GENERAL

Advocacy 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
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Center for Reproductive Law and Policy
Clara Bell Duvall Education Fund
Delta Sigma Theta
The Endocrine Society
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Human Rights Campaign Fund
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Medical Students for Free Choice
Michigan Abortion and Reproductive Rights Action League
→ National ~~Abortion~~ Federation
National Abortion and Reproductive Rights Action League
National Association for the Advancement of Colored People
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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 Organization of Women
National Organization of Women Legal Defense and Education Fund
National Urban League
National Women's Law Center
People for the American Way
Planned Parenthood Federation of America
National Progressive Baptist Convention
Sexuality Information and Education Council of the United States
Tennessee Medical Association
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.

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.

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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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HHS NEWS

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

ROLE OF THE SURGEON GENERAL

The Surgeon General holds a major--and historic position within the Public Health Service acting as the "people's doctor," as some have described it. The SG has been the national spokesperson to promote good health activities, alert the nation on things that are harmful or potentially harmful. It was Surgeon General Luther Terry who issued the first Surgeon General's Report on Smoking and Health. More recently, it was Surgeon General C. Everett Koop who wrote the report on AIDS that was mailed to every household in the United States in a major effort to educate the public on the AIDS issue.

The efforts of the Surgeon General to keep this country informed on a variety of health issues is a key responsibility of the office. However, to call the Surgeon General the principal health official/officer of the United States is a misnomer. The Surgeon General serves at the pleasure of the President and under the direction of the Secretary of Health and Human Services, reporting directly to the Assistant Secretary for Health, who also holds the title, Director of the U.S. Public Health Service.

The organizational changes that placed the overall authority for the Public Health Service in the office of the Assistant Secretary, was initiated in the 1960's, in response to the increasingly complex development of the PHS, which has grown to eight separate agencies. Section 201 of Title II of the Public Health Service Act specifically required that the overall leadership and direction of the Public Health Service reside with the Assistant Secretary for Health under the supervision of the Secretary of Health and Human Services.

The Surgeon General's current duties and responsibilities include the direction of the active Commissioned Corps, the component of the Public Health Service that provides medical and allied health professionals for a variety of public health duties throughout the U.S. and overseas.

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 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 with sacrifice, and God willing, I'll have that opportunity.

The writer is a nominee for U.S. surgeon general.

Dr. Foster At-A-Glance: Henry W. Foster M.D., 61, is an eminent scholar and academic administrator, a practicing physician, and a community leader. In 1972, he was one of the youngest members ever inducted into the Institute of Medicine of the National Academy of Science. In 1991, the "I Have A Future" program he developed was named a "Point of Light" by President Bush for its pioneering work in preventing teen pregnancy and building self-esteem among at-risk youth.

EDITORIAL SUPPORT FOR HENRY W. FOSTER, JR., M.D.

"Instead of fixating on the number of abortions performed by Foster, how about answering the most pertinent question: Is he qualified to be the nation's public health spokesman? Yes, if you judge Foster on his medical credentials and community service.

"A dean and acting president of Meharry Medical College, Foster has been endorsed by the American Medical Association and ACOG. He's won national recognition and awards for his campaign to reduce infant mortality and to curb teen pregnancy and drug abuse. His *I Have a Future* program encourages young people to delay sexual activity, develop job skills and improve self-esteem. As Surgeon General, Foster says he will continue working to reduce out-of-wedlock pregnancy."

-- USA Today, Feb. 7

"Dr. Henry Foster has an excellent background to be the next surgeon general. ... Foster's commitment to reducing teen-age pregnancy and its rippling effects on children is longstanding and deeply felt. ... While practicing in Massachusetts and Alabama as well as Tennessee, Foster was committed to reducing teen-age pregnancy, drug abuse and smoking. His work has generated support from many directions; the Bush Administration referred to him as one of its "thousand points of light."

-- Los Angeles Times, Feb. 7

"Foster appears to be the right person to speak to the nation about public health. He has been nationally recognized for his *I Have a Future* campaign to persuade teen-agers to forgo teen sex ... and develop job skills."

-- Philadelphia Daily News, Feb. 8

"Ultimately, what matters most is the totality of Foster's medical practice and his service to his community. From all accounts, he has been a conscientious physician, a respected educator and the originator of an admired program to reduce teen pregnancies in Nashville. ... A medical professional with Foster's credentials deserves a fair confirmation hearing, not a witch hunt arranged by abortion foes."

-- **Atlanta Journal-Constitution, Feb. 8**

"[T]he Tennessee obstetrician-gynecologist, whom President Clinton picked last week to replace Dr. Joycelyn Elders, made a name for himself by delivering babies -- thousands and thousands of them -- and by preaching abstinence to teenagers in two Nashville housing projects.

"Members of the Senate, where the Foster nomination will survive or die, ought to withhold judgment until after hearings. They should weigh the doctor's total record, too, including the I Have a Future program he started in Nashville to urge teenagers to delay sexual relations and childbearing."

-- **Chicago Tribune, Feb. 7**

"[President Clinton] should stand behind what seems like a well-qualified candidate. Foster is no apologist for teen-age sex, as his predecessor, Dr. Joycelyn Elders, was sometimes accused of being. Indeed, he has effectively preached sexual abstinence as by far the wisest and safest choice for teenagers. ... Foster's work to curb teenage pregnancies caused him to be honored as a "Point of Light" by former President George Bush."

-- **Denver Post, Feb. 9**

"Instead of narrowly focusing on a single issue, Foster's detractors ought to consider his many qualifications. Foster is widely known for his *I Have a Future* program to reduce pregnancy among teens in public housing in Nashville. Preventing teen pregnancy, research shows, is critical to help reduce associated problems, including welfare dependency, child abuse and neglect.

"We urge President Clinton to hang tough on Foster's nomination. Whatever one may think about abortion, fact is it's legal. A qualified professional ought not be rejected for public service simply because he provided a legal medical procedure."

-- **Chicago Sun-Times, Feb. 7**

"It's up to the rational members of Congress to seize control of the discussion about Foster's qualifications. So far, he looks like a good fit for the job of fighting the teen pregnancy epidemic."

-- San Jose, Calif., Mercury News, Feb. 6

"Foster appears to be well qualified and well suited for the job. His program in Nashville directed at teen-agers is named "I Have a Future." It operates in two housing projects and advocates delaying sex and childbearing as important to the development of successful lives. There have been few pregnancies among the teens in the program, which began in 1987, and many have finished high school and gone on to higher education. With teen-age pregnancy among the nation's most serious problems, Foster's leadership in this troublesome area would be welcome indeed."

-- Seattle Post-Intelligencer, Feb. 8

"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, 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."

-- The Tennessean, Feb. 7

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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Remarks as prepared for delivery by
Dr. Henry Foster
Nominee for U.S. Surgeon General
at
George Washington University -- School of Public Health
February 10, 1995

Thank you, Alan Weingold for that gracious introduction. It is a pleasure to be here at this prestigious university.

You guys gave me a lot of inspiration.

Nobody expected your men's basketball team to beat the number one team in the country last week, but you did.

So I know you understand what it feels like to have a tough battle ahead of you.

It is fitting that the President announced his intent to nominate me for the position of Surgeon General on February the second, Groundhog Day.

That's the day when, 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 the second -- when President Clinton and Secretary Shalala publicly called me to service -- 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.

And that means Spring is just around the corner.

In his announcement of my nomination, the President thanked me for taking on the difficult task of public service at a time when public service sometimes has a high price.

I thought I knew what he meant at the time.

But after the past week -- I really know what he meant.

So you might be wondering, why do I want this job?

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, I became one of the youngest people ever inducted into the Institute of Medicine of the National Academy of Sciences.

I am the founder of the award-winning "I Have a Future Program," which was recognized as one of this nation's "Thousand Points of Light" in 1991 by President George Bush.

I am also a husband of 35 years and the father of a daughter and a son.

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 Medical College, I taught more than 1500 students. Founded 119 years ago, Meharry is among the nation's finest teaching institutions.

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...

It is difficult to look around America today and see so much needless suffering because of a 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 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.

I believe that I can help empower more people to reclaim the power over their own health ...

... 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 confronting 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 we have the power to eradicate this scourge and prevent its recurrence.

At least 2.2 million Americans are victims of violent injury each year.

In 1992, there were more than 37,000 firearm-related deaths in this country.

Escalating violence in America causes not only unnecessary injury and death;

It is also a major cause of the 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 of existence.

I know we can -- but it's going to take entire 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 adulthood.

Recent surveys by the Department of Health and Human Services confirm that for three years in a row, the use of marijuana and other drugs by 8th, 10th, and 12th graders 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, aged 25 to 44 in the United States.

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: the key is to commit ourselves not only to talking the talk -- but 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 national spotlight on this unacceptable problem.

All of the afflictions that I've 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 8,400 teenagers become sexually active.

And every day, 2,781 teenagers get pregnant: This translates into 116 pregnancies per hour.

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 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 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.

That's a dead-end dream and we've got to replace it with a dream of hope and unlimited achievement.

That's the philosophy that embodies the "I Have a Future" 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.

Our program is anchored in Nashville's public housing projects. With respect to sexuality, the emphasis first and foremost is always placed on abstinence.

The program involves entire families and the total social matrix of the surrounding community.

Everybody from parents, grandparents to politicians, volunteers, and from the 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. In some cases, that means access to birth control -- with a very strong emphasis on parental and community involvement.

And third, and most important, we help young people enhance their life-options through activities that improve their job skills, self-reliance, values and self-esteem.

For example, the youth entrepreneurial component of our program helps teenagers learn more about themselves and about the world of work by empowering them to start businesses in their communities.

This kind of skills-development and character-building is not only important for girls and young women -- but, as research is showing us, it is also critically important for boys and young men.

We have to take the time to understand all the unique aspects of young peoples' lives:

Building up their self-esteem, telling them we believe in them, but not simply treating them as collections of problems.

That is what we have done in "I Have a Future" -- and it works.

We know of only one of the program's participants from 1988 to 1991 who became pregnant -- compared to 59 teenage pregnancies in the two other demographically similar Nashville housing projects where "I Have a Future" is not offered.

And just last year, 16 of the 24 program participants who graduated from high school went on to college. Eight of them were male and 8 were female.

It has not been easy -- and results don't happen overnight.

In fact, it's a difficult process, and requires great dedication by many people -- but it is working.

This shows you what one community can do when it makes teenage well-being a real priority -- and I believe this kind of success is possible in every community.

But let me be clear:

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 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 medical career to taking all appropriate medical steps to meet the health needs of my patients, and that includes performing legal abortions.

I 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.

To do this, we have to put life's possibilities within reach of all our young people.

One of the reasons I have hope is because there are so many positive trends out there:

Like the steady decline in smoking over the past 20 years, the steep decline in the numbers of people drinking and driving, and the steady increase in the use of seat belts.

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 I appreciate your support.

One thing I know -- my fight is no tougher than the one I'm asking all of you to join:

That's the fight to improve the health of all Americans and to prevent teen pregnancy.

I am eager to get to work, because there is so much work to be done.

I won't hesitate to call on each and every one of you for help.

These are all our children. And they need all of our help. Thank you.

THE WHITE HOUSE
Office of the Press Secretary

For Immediate Release

February 2, 1995

REMARKS BY THE PRESIDENT
AND DR. HENRY FOSTER, NOMINEE FOR U.S. SURGEON GENERAL

The Oval Office

2:10 P.M. EST

THE PRESIDENT: Thank you very much, Madam Secretary, and let me say it's a pleasure to have Mrs. Foster and Senator Frist, Congressman Clement here.

The Surgeon General of the United States has enormous responsibilities. As the public face of our public health service, he or she really is the people's doctor, the person responsible for promoting good health practices and alerting the nation when health threats exist.

To fill this post, I wanted someone who is both a top-flight medical professional and a strong leader and effective communicator. Dr. Henry Foster is such a person. And I am pleased today to announce my intention to nominate him as the Surgeon General of the United States.

He is widely respected in the world of medicine and science. After serving his country for two years as an Air Force medical officer, he became Chief of Obstetrics and Gynecology at Andrew Memorial Hospital at Tuskegee University.

For the past 21 years, he has worked at Meharry Medical College in Nashville, Tennessee. As the Dean of the School of Medicine and its acting president, he helped Meharry to lead the way to meeting the health needs of the poor and the underserved. At the moment, he is a visiting senior scholar at the Association of Academic Health Centers here in Washington.

In the communities he's served, Dr. Foster has won hearts and minds for his innovation and his dedication to saving the lives of young people and vulnerable people. He's received numerous honors for his work in obstetrics and dealing with sickle cell anemia and, very notably, in the prevention of teen pregnancy.

He has shown us how one person can make a difference. Eight years ago he developed and directed the "I Have a Future" program at Meharry to help stop teen pregnancy. It has been an unqualified success. Working with young people that others might think beyond help, he built up their self-esteem. He taught them job skills. He encouraged them to stay in school. Most important, he told them to be responsible for themselves. Thanks to Dr. Foster, these young people have a chance to live a good, full life.

I want Dr. Foster to use what he's learned to help America attack the epidemic of teen pregnancies and unmarried pregnancies. We know government can only do so much. So large a part of Dr. Foster's job obviously will be to use his enormous skills of persuasion to reach out to people in the private sector -- in the religious, education, entertainment, sports and other communities in this country.

MORE

birthweight, illicit drug use and the myriad of other issues which we will grapple with in the coming years.

Lastly, I wish to say again, thanks to my wife, St. Clair, my daughter, Myrna and my son Wendell, who have supported me so stoutly in all of my professional and personal endeavors.

Thank you very much. (Applause.)

THE PRESIDENT: You just hit the high point. Now you have to answer questions. (Laughter.)

Q Dr. Foster, do you think that at the -- your programs about teen pregnancy in Nashville can be applied on a national scale?

DR. FOSTER: I certainly do, and there have been efforts already to replicate the program; there is no doubt about it. It can be --

Q I hear a lot about personal commitment, but I don't hear anything about official commitment.

Mr. President, does your plan to combat teen pregnancy carry any new money with it? How do you intend to do that, or is it going to be primarily by the private sector?

THE PRESIDENT: We have a whole plan we've been working on for months, and Dr. Foster and I are going to get together and go over the outlines that we had worked on before he agreed to come on, and we will finalize that. I expect we'll be announcing it sometime in the very near future, and we'll talk about then how we intend to do it.

Q Will it take more federal money?

THE PRESIDENT: Well, I think the main thing we have to do is to galvanize the resources that are there now, spend the money that's there now better, and get -- I have been led to believe by many people all across this country that there will be an enormous amount of support for this effort in the private sector if they have confidence that it's a serious, disciplined, organized effort that is likely to work.

I might let Dr. Foster say more about that.

DR. FOSTER: No, the only thing I would add that didn't come out -- we are going to also utilize greatly the volunteer efforts. There is an emerging middle and upper black class that's doing everything now to give back. This has only developed among African Americans since World War II. And I'm surely certain that the same sort of emergence is occurring with Hispanics and other ethnic groups in this country.

Q Mr. President, does he have same license to be as outspoken and blunt as Dr. Elders did, or some areas -- did you caution him that there are some areas that he shouldn't be talking about?

DR. FOSTER: No comment. (Laughter.)

THE PRESIDENT: I can't do better than that. (Laughter.)

Q Mr. President, some conservatives have already said that they plan to oppose your nomination because of Dr. Foster's support for distribution of contraceptive devices in public schools

Thank you very much.

Q How are the baseball talks going? Have you gotten feedback?

THE PRESIDENT: We just -- we're in it. That's all I can say. Not up, not down -- we're in it.

THE PRESS: Thank you.

END

2:24 P.M. EST

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.

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.

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.

DR. HENRY FOSTER: *Questions and Answers*

Page 2

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.

BACKGROUND: As Chairman of the Department of Obstetrics and Gynecology at Meharry Medical College, Dr. Foster was the principal investigator 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.*" [continued]

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.

MEHARRY MEDICAL COLLEGE
(FOUNDED 1876)
NASHVILLE, TN 37208

CONTACT: Ben Haimowitz
212-742-0456

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. ###

NEWS FROM

SENATOR CAROL MOSELEY-BRAUN

OF ILLINOIS

FOR IMMEDIATE RELEASE
February 9, 1995

Contact: Joanna Slaney
202/224-8538

MOSELEY-BRAUN SUPPORTS FOSTER NOMINATION

(WASHINGTON, D.C.)--U. S. Senator Carol Moseley-Braun (D-IL) spoke today at a press conference in support of the nomination of Dr. Henry Foster to be Surgeon General of the United States.

Dr. Foster has a distinguished record as a physician. He is the Dean of the School of Medicine and acting president of Meharry Medical College, where he has worked for the last 21 years.

Dr. Foster developed the "I Have a Future" program to work with teens on education, job skills, responsibility and abstinence to avoid teen pregnancy. This program was one of President Bush's Thousand Points of Light.

There will be a hearing on Dr. Foster's qualifications to be the Surgeon General of the United States as there has been with every other nominee for the post. The Senate and the American people will have the opportunity to examine his record and have their questions answered.

We should not disparage the career of a distinguished doctor who performed his duties throughout his career. If we have questions to ask him, they should be asked in the hearing room.

Dr. Foster is the President's nominee. His job will be to serve the public well and carry out the President's public health agenda.

Dr. Foster must be given the opportunity to offer his vision on improving the public health of the American people.

46PM FROM SEN FRANK LAUTENBERG TO 99733096

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STATEMENT BY SENATOR FRANK R. LAUTENBERG
On Nomination of Henry Foster
February 9, 1995

Last week, the President recommended to the Senate Dr. Henry Foster to serve as the Surgeon General of the United States. We are here today to say that Dr. Henry Foster should not be disqualified by the Senate to serve as Surgeon General because he performed legal medical procedures.

Dr. Foster is a distinguished physician who appears to have the professional qualifications to discharge the responsibilities of the Surgeon General. He should not be dismissed because, in the course of his long career, he has provided medical services to women faced by problem pregnancies. As far as we know, he has acted well within the confines of the law. We urge all Senators to keep an open mind on this nomination, and permit Dr. Foster to participate in impartial and fair hearings before the Senate Labor and Human Resources Committee.

Anti-choice groups have attempted to create a firestorm around this nomination, and make the issue of abortion services a litmus test for public service. This is wrong headed and we are here to speak out against this narrow, ideological criterion for evaluating a nominee for high office in this country. The Supreme Court has ruled that abortion rights are protected under the Constitution and this ruling has the broad support of the American people. An ideological minority should not have veto rights over Administration appointments.

It is ironic that anti-choice groups are trying to destroy a nominee who appears to have spent much of his career trying to prevent teenage pregnancies -- thus reducing the prospect of abortion as a means of dealing with an unintended or problem pregnancy. Those who oppose abortion should be Dr. Foster's strongest supporters.

And at a time when we are confronted by the grim statistics of teen pregnancy, Dr. Foster founded a program in Nashville called "I have a Future." This program tries to reduce the problem of teenage pregnancy by encouraging abstinence, hard-work, college preparation and job training. It has been so successful that President George Bush recognized it as one of his "thousand points of light" in 1991.

Abortion is a legal medical procedure in this country. If anti-choice groups want to criminalize abortion - make it illegal - they should make their case through the legislative process. Several constitutional amendments are and will be proposed for consideration in this Congress. Anti-choice Senators who want to prohibit abortions should pursue that route, and not

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conduct a witch hunt on an apparently dedicated and qualified nominee.

If Dr. Foster's nomination is defeated solely for this reason it will send a chilling signal throughout this country.

It will say to any health professional in our country who has performed abortions or is considering becoming a gynecologist -- you will never work for the Department of Health and Human Services. You will never be confirmed by the United States Senate. You cannot serve your country.

We have yet to review Dr. Foster's entire record, nor has the Senate. But when we do so, I hope we will concentrate on relevant criteria and not focus on one ideological issue. In the best of our medical traditions, Dr. Foster counselled his patients privately and provided them with medical treatment arrived at jointly between patient and doctor. He acted entirely appropriately and within the law.

If Dr. Foster is not permitted a fair and impartial hearing, focused on his professional qualifications to carry out the duties of the Surgeon General, we will have politicized a critical public health function in this country and degraded the reputation of a man who has spent 40 distinguished years in public health.

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NEWS from U.S. Senator **PATTY MURRAY**

Washington • Democrat

STATEMENT BY U.S. SEN. PATTY MURRAY (D-Wash.)
ON
DR. HENRY FOSTER, NOMINEE FOR SURGEON GENERAL
February 9, 1995

Dr. Foster is entitled to a full and fair hearing. He is one of the nation's leading experts on reducing infant mortality, and preventing teen pregnancy and drug abuse. President Clinton has nominated him to be the United States Surgeon General.

He has strong bipartisan support. His supporters include the American Medical Association, the National Medical Association, and the American College of Obstetricians and Gynecologists. His accomplishments have been recognized by former President George Bush, former HHS Secretary Dr. Louis Sullivan, and Tennessee Governor Lamar Alexander.

But it seems that those who seek to serve the public in an appointed position are no longer afforded the luxury of a public hearing.

Abortion is a legal procedure. Every woman has a constitutional right to choose whether and when to bear a child. However, abortion should not be the determining factor in the selection of a Surgeon General.

Why aren't we discussing the thousands of babies delivered by Dr. Foster? Or, his ideas regarding teen pregnancy prevention?

I am concerned because so many dedicated and talented people are going to be discouraged from serving in government. This process is appalling.

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For more information, contact Rex Carney, (202) 224-0229.

from the office of
Senator Edward M. Kennedy
of Massachusetts

For Release: February 9, 1995
Contact: Theresa Bourgeois
(202)224-4781

**STATEMENT OF SENATOR KENNEDY ON THE NOMINATION OF
DR. HENRY FOSTER TO BE THE SURGEON GENERAL OF THE UNITED STATES
FEBRUARY 9, 1995**

Dr. Foster has had an extraordinarily distinguished career in medicine and public health, and I believe that the forthcoming hearings on his nomination will demonstrate that he is well-qualified to be Surgeon General.

First and most important at this stage of the debate, I reject the view that Dr. Foster's participation in abortions should disqualify him from this high position. Abortion is not a numbers game. It is a legal medical procedure and a constitutionally-protected right.

Second, the American Medical Association enthusiastically supports Dr. Foster's nomination, because of his distinguished service as Dean of Meharry Medical College, his record of achievement in medical research, and his impressive leadership on issues such as preventive health care for women and children, reducing infant mortality and teenage pregnancy, and fighting drug abuse.

Third, Dr. Foster has had -- and deserves to continue to have -- strong bipartisan support. As recently as 1991, he was honored by President Bush as one of the President's "Thousand Points of Light" for his innovative "I Have a Future" program to reduce teenage pregnancy.

I look forward to the consideration of Dr. Foster's nomination by the Senate Labor Committee.

Congress of the United States

House of Representatives

Washington, DC 20515

February 3, 1995

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

Dear Mr. President:

We would like to take this opportunity to applaud you on, and to lend our full support to, your nomination of Dr. Henry Foster, Jr. as the United States Surgeon General. As you know, for several years, Dr. Foster served as interim president at Meharry Medical College, one of the Nation's premier and most distinguished black medical schools. The country will certainly benefit from Dr. Foster's expertise and leadership. Not only has he earned the respect of his colleagues, but the rest of the health care community as well.

Dr. Foster's unique expertise in the fields of public health, prenatal care, and prevention will serve to maximize his ability to champion a health care system that benefits all Americans. Like you, we are certain that Dr. Foster will apply his comprehensive knowledge and leadership to implement the Nation's health agenda. In particular, he has developed effective solutions that successfully foster self-esteem, responsibility, and job development skills for our Nation's teenagers.

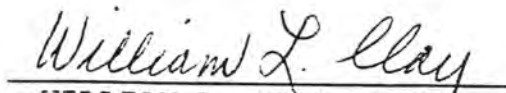
Again, we commend you on Dr. Henry Foster's nomination and pledge our full support in securing his confirmation. We will also strongly encourage our colleagues to join us in this important effort.

Sincerely,

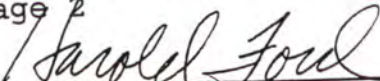

LOUIS STOKES, M.C.

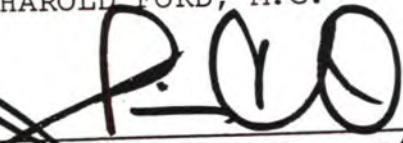

DONALD M. PAYNE, M.C.

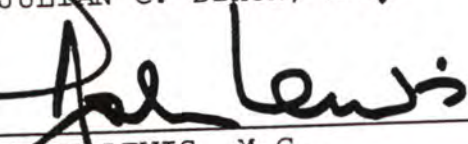

RONALD V. DELLUMS, M.C.

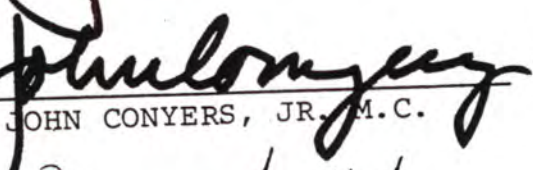

WILLIAM L. CLAY, M.C.

Honorable William Jefferson Clinton
February 3, 1995
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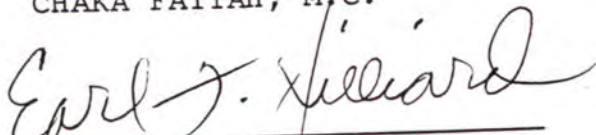

HAROLD FORD, M.C.

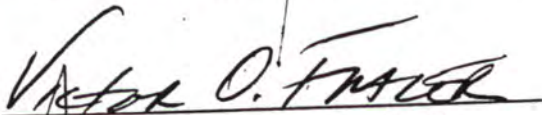

JULIAN C. DIXON, M.C.

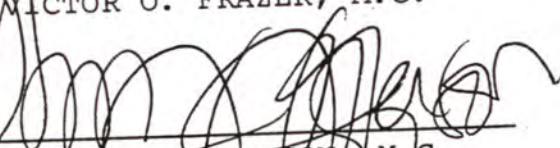

JOHN LEWIS, M.C.


JOHN CONYERS, JR., M.C.

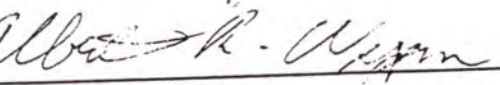

CHAKA FATTAH, M.C.

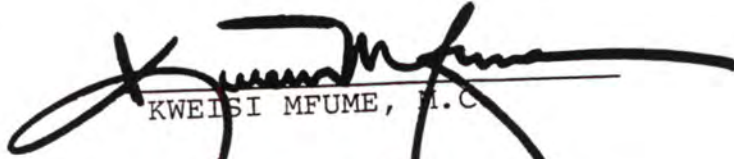

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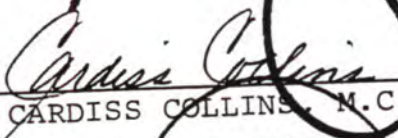

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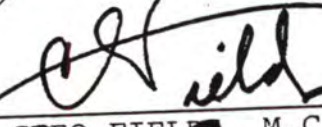

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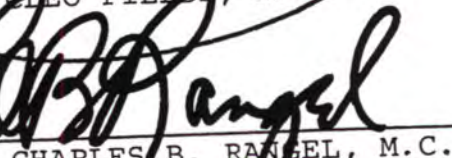

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ALBERT R. WYNN, M.C.


KWEISI MFUME, M.C.

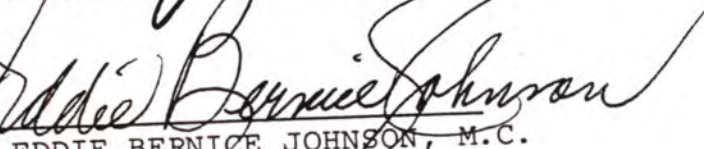

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CLEO FIELD, M.C.


CHARLES B. RANGEL, M.C.

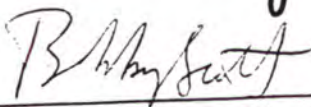

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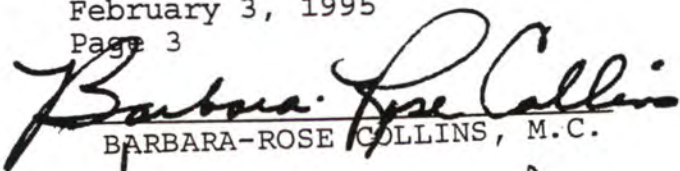

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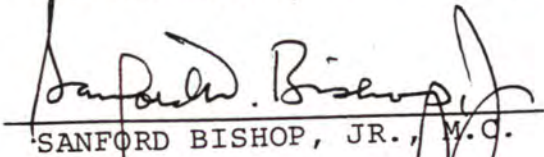

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CYNTHIA MCKINNEY, M.C.

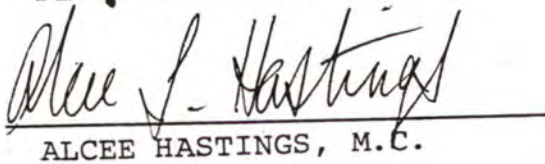

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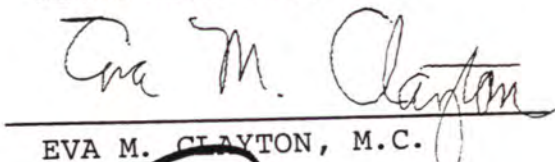

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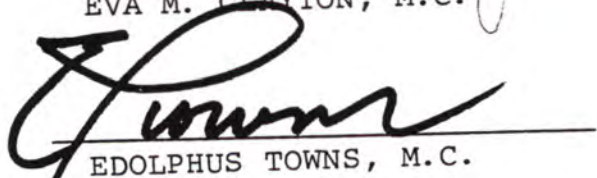

BARBARA-ROSE COLLINS, M.C.


SANFORD BISHOP, JR., M.C.


FLOYD H. FLAKE, M.C.


ALCEE HASTINGS, M.C.


EVA M. CLAYTON, M.C.

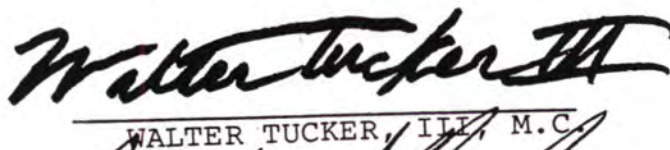

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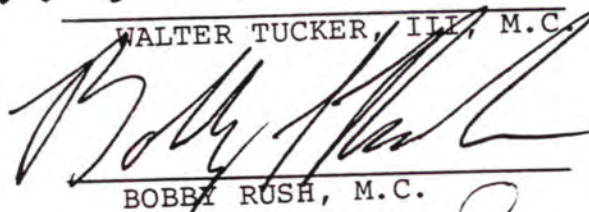

CAROL MOSELEY BRAUN, U.S.S.

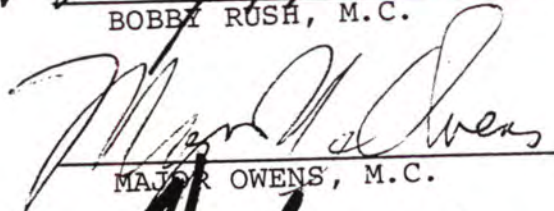

CARRIE P. MEEK, M.C.

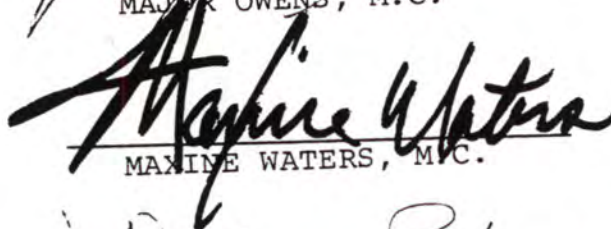

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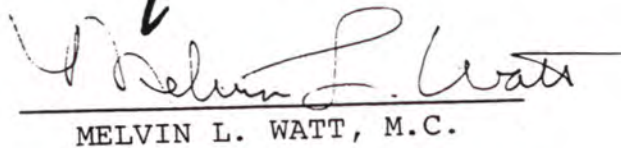

ELEANOR HOLMES NORTON, M.C.


WALTER TUCKER, III, M.C.


BOBBY RUSH, M.C.


MAJOR OWENS, M.C.


MAXINE WATERS, M.C.


MELVIN L. WATT, M.C.

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Enclosed please find a sampling of articles from newspapers and magazines around the country about Dr. Henry "Hank" W. Foster, Jr. As the articles indicate, Dr. Foster is a practicing physician, a medical scholar, and an academic administrator of national stature who has spent his career serving inner-city and rural neighborhoods. We hope this information provides some valuable insight into Dr. Foster's life, a life dedicated to serving the health needs of Americans.

For more information, please contact _____.

(Proposed cover page. Please indicate who the contact person should be.)



Photo by Ross D. Franklin The Washington Times

Dr. Henry W. Foster Jr., facing a tough confirmation fight for his nomination as surgeon general, finds support at a lunch with Democratic senators, including Tom Daschle and Patty Murray, at the Capitol yesterday.

Foster wows Democrats over lunch

By Nancy E. Roman
THE WASHINGTON TIMES

Henry W. Foster Jr., President Clinton's nominee for surgeon general, lunched yesterday with members of the Democratic Policy Committee, who later raved about the doctor.

Senate Minority Leader Tom Daschle of South Dakota said he was "extraordinarily impressed" with Dr. Foster and called for confirmation hearings soon.

Sen. Frank R. Lautenberg of New Jersey described the lunch in the Capitol as "enriching" and Dr. Foster as "eloquent and knowledgeable."

He said the Foster nomination will succeed if the "American peo-

ple have a chance to get to know Foster better, in front of a hearing committee."

Dr. Foster's nomination has been in trouble since he and the White House released conflicting reports on how many abortions he has performed during his career as an obstetrician-gynecologist.

Mr. Daschle said that once the public is exposed to Dr. Foster's position on public health issues, support for him will consolidate.

Dr. Foster made two brief comments. He asked for "open and fair, objective hearings" and said, "Health care is a nonpartisan issue."

Sen. Patty Murray said she differs with those who say that, because abortion is such a divisive

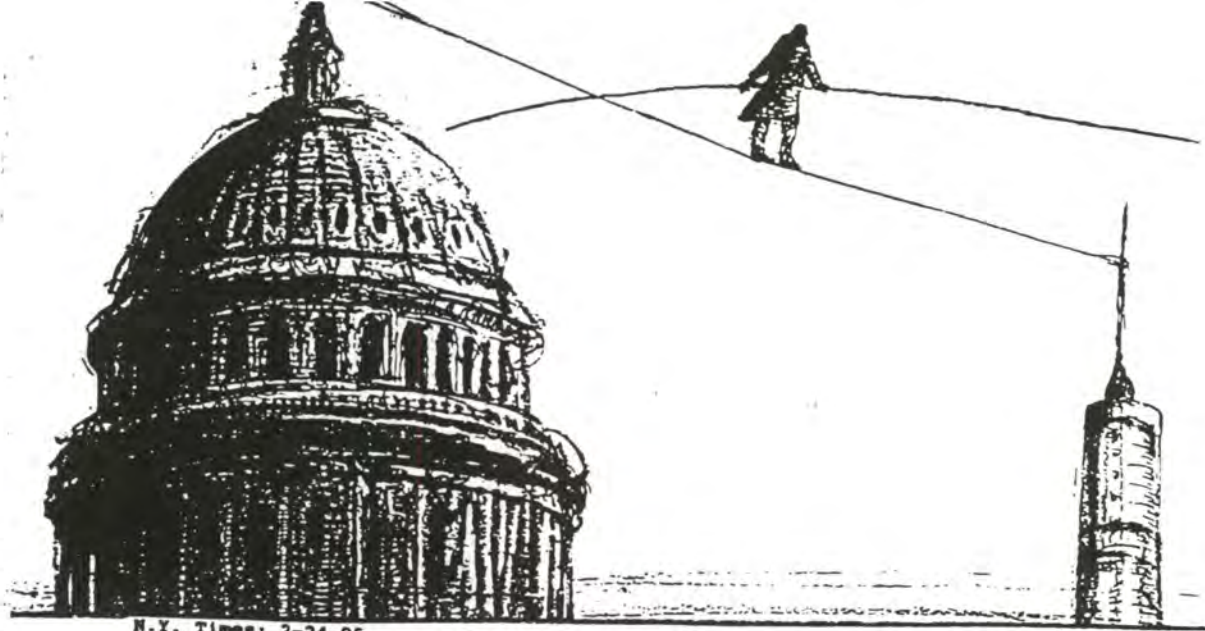
social issue, no obstetrician should serve as surgeon general.

"It's the right time for an ob-gyn who can speak to women's health issues," the Washington Democrat said.

Sen. Nancy Landon Kassebaum, Kansas Republican and chairman of the Senate Labor and Human Resources Committee, which will review the nomination, has said hearings likely will be held in April.

Dr. Foster said his meetings with Mrs. Kassebaum and Sen. Arlen Specter, Pennsylvania Republican, were "cordial and objective." He declined to comment further.

"I can't even whisper about it," he quipped.



N.Y. Times; 2-24-95

Searching for a Surgeon Politic

By Melvin Konner

As Republican Presidential hopefuls began their initial forays into the New Hampshire woods this week, most were clamoring to prove their impeccable pro-life credentials. Abortion will again be at the center of the battle for the White House, and the first skirmish will be next month's confirmation hearings on Dr. Henry Foster, President Clinton's choice for Surgeon General.

So forget that Dr. Foster has had a distinguished 40-year career in medicine. Forget also that he was the youngest person ever elected to the Institute of Medicine of the National Academy of Sciences, America's most prestigious medical organization. That for many years he has managed the astounding balancing act of running a medical school clinical department while practicing hands-on community medicine. That George Bush praised Dr. Foster's teen-age pregnancy prevention program as one of his own "thousand points of light."

No, let us concentrate on something really important: Henry Foster has done abortions. What a revelation! Does anyone think that you can become an obstetrician without doing abortions? Abortion is, among other things, a life-saving emergency procedure that every obstetrician, and indeed most emergency room physicians, must be prepared by training to do.

If you or your daughter suddenly begin bleeding uncontrollably in the midst of a natural miscarriage, you had better hope that the doctor on call has been well trained in therapeutic abortion and can complete the spontaneous abortion nature has botched. Because if the doctor has not been so trained, you or your daughter may well die.

Yes, Dr. Foster also performed some non-emergency abortions. They were not only legal, they were standard medical practice. Dr. Foster believes, properly, that abortion should

be safe, legal and rare. In his career they have been astonishingly rare — fewer than 40 in over 40 years.

A similar sort of political test was applied to a previous nominee for Surgeon General, Dr. C. Everett Koop, but fortunately for the nation, that appointment was not derailed. Dr. Koop was appointed by Ronald Reagan for his dyed-in-the-wool conservatism, period. Before the 1980 election, his name was circulated by an aide to Senator Jesse Helms, Republican of North Carolina, and then by the Heritage Foundation, before he came to the attention of the Reagan-Bush campaign.

He was nominated because of the pro-life stands he had repeatedly taken in public. And during his long pre-confirmation process, he was savaged by liberals as badly as Dr. Foster is now being savaged by conservatives.

But the conservatives had not thought clearly enough about one

Centers for Disease Control to continue collecting data on abortion. He published a report on the psychological effects of abortion that did not support claims of lasting damage.

Worst of all, he never viewed his office as a bully pulpit for damning elective abortion. He personally opposed elective abortion, but he did not see ending it as a major public health priority. The result was that most of his former friends became his enemies. Dr. Koop liked to joke about the medals on his uniform: "The top row is for what the liberals did to me; the bottom row is for what the conservatives did to me."

This politicization of the office goes back to the Founding Fathers. A physician named Benjamin Waterhouse served Presidents John Adams and Thomas Jefferson in a public role that combined medical supervision and disease prevention — similar to that of the Surgeon General today. He successfully pursued policies requiring vaccination, quarantine at immigration and other methods of infection control necessary in the high-mortality world of early America. But such efforts were viewed as radical, and when James Madison became President in 1809 he dismissed Dr. Waterhouse, bowing to conservative medical opposition.

Ever since, the position of the nation's most visible doctor has been filled, at best, by people who combine a knowledge of medical science with moral leadership. For much of its history, the office holder has kept a low profile, but there have been controversies.

In 1935, Dr. Thomas Parran canceled a radio speech because CBS executives refused to let him use the word syphilis on the air. In 1964, Dr. Luther Terry made waves by releasing, for the first time, Government reports linking cigarettes to cancer and other diseases. Dr. Julius Richmond, Jimmy Carter's Surgeon General, was criticized for a report that emphasized prevention over traditional "fix-it" medicine.

Dr. Joycelyn Elders's forced resignation, over a sensible if poorly timed remark about masturbation, hurt the prestige of the office, but it is not she who should be blamed. When President Clinton caved in, he paved the way for Dr. Foster's difficulties. By comparison, Adams and Jefferson

stood by Benjamin Waterhouse when it would have been much easier to set him aside and mollify his critics. Ronald Reagan did the same with Dr. Koop. If liberal leaders continue to beat their early retreat on Dr. Foster, they will hurt the prestige of the office, perhaps irreparably.

It is hardly surprising that Dr. Foster did not remember exactly how many abortions he has done. He does not remember how many emergency Caesarian sections or forceps deliveries he has done either. He has also been criticized for performing hysterectomies on women with severe mental handicaps in the 1970's; they were compassionate acts, valid within the medical and ethical guidelines of that era. His patients were suffering and he helped them as best he could.

Dr. Koop was qualified. Dr. Foster is qualified. That, in a halfway intelligent world, would be the beginning and end of it. But the Surgeon General's reputation is now a political football, and every time it gets clumsily kicked it veers further from the goalposts — on the one side, the nation's public health; on the other, the quality of all our medical care. We should let Dr. Foster, and all the Surgeons General who will follow him, go about their medical work and leave the politics to the politicians. □

Henry Foster is
the latest pawn
in a 200-year-old
game.

item on Dr. Koop's résumé: he was a doctor. He was a compassionate care giver who felt and thought deeply about difficult questions, and who used science as a basis for his decisions. And almost as soon as he took office he began doing something the conservatives couldn't fathom: he acted like a doctor.

Dr. Koop outraged the right by calling for sex education and condoms as part of the fight against AIDS, while opposing mandatory HIV testing as counterproductive for public health. He brought passive smoking to the forefront as a threat to health and thus lost the friendship of Senator Helms. He called violence a public health issue, angering those who saw it solely as a moral one.

But his most disappointing performance, from the viewpoint of conservatives, was on abortion. Over conservative protests, he told the

Melvin Konner, a physician who teaches anthropology at Emory University, is the author of "Becoming a Doctor."

—USA Today; 2-21-95—

Clinton: No reason to disqualify Foster

President Clinton again defended his surgeon general nominee in an interview broadcast Monday, saying Henry Foster has done nothing that disqualifies him. On *CBS This Morning*, Clinton blasted "the extreme right wing of the Republican Party who believe that all abortions should be criminalized and that anybody who ever did one for any reason should be disqualified from holding high office."

Foster's nomination ran into trouble after the Nashville obstetrician-gynecologist said he'd done more abortions than the White House first revealed. Senate Majority Leader Bob Dole, R-Kan., said Sunday that Senate Republicans are counting votes to see if the nomination can be rejected. "I'll pass the information on to the president," Dole said. "If he doesn't have the votes, I don't see any reason to bring up the nomination."

But White House officials say a vote count is premature. Senior adviser John Podesta said Monday: "We believe that when senators have a chance to hear Dr. Foster and understand what he's been able to accomplish as a doctor, an educator and a recognized leader in the fight against teen-age pregnancy, he'll have the votes to be confirmed — notwithstanding the belief of some that performing any legal abortions disqualifies him."



USA TODAY
FOSTER: Fought
teen pregnancy

Specter Expects GOP Support in Senate for Foster

From Reuters **A13**

WASHINGTON—Sen. Arlen Specter (R-Pa.) said the majority of Republicans in the Senate would not consider the legal abortions performed by President Clinton's nominee for surgeon general, Dr. Henry W. Foster Jr., to be grounds for rejecting him.

"I think when we come down to the narrow question about whether he's disqualified for having done something which is legal, that a majority of Republican senators will support him," Specter said on CNN's "Newsmaker Saturday."

Foster, who has come under fire because he's performed abortions during his 38 years as an obstetrician-gynecologist, must be confirmed by the full Senate.

While Specter stopped short of endorsing Foster, he said that he should be given a fair hearing.

"I think we believe he's entitled to be heard," said Specter, who supports abortion rights.

But asked whether he was prepared to vote for Foster, the senator said, "Oh, absolutely not. I want to hear him testify."

Countering comments by conservative Phyllis Schlafly of the Eagle Forum, who said Foster should not be confirmed for the sake of "morality," Specter said Foster's whole record should be considered.

"How about the work that he did on teen-age pregnancy? How about the work that he did in giving respectability and self-reliance to so many young people?" he said.

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 kept 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."

Foster and Abortion

Register your opinion about the nomination of Dr. Henry W. Foster Jr. to be surgeon general. Sign on to the TimesLink on-line service and "jump" to keyword "Speaking Out." Select the topic "surveys."

Details on Times electronic services, A6

Dr. Foster for U. S. Surgeon General

With many decades of total commitment as a caring, compassionate and sensitive physician, who has made matters of public health a primary concern, Dr. Henry W. Foster Jr., scarcely needs the type of vicious mud slinging by right wingers and abortion foes that took place this week.

Nominated by President Clinton as surgeon general to replace Joycelyn Elders, Dr. Foster seemed the picture of an ideal candidate for the post until the fringe groups--which would probably oppose anyone the president nominated, even if he or she walked on water--went to work to discredit him.

They certainly could not challenge his credentials. As an obstetrician-gynecologist, he has delivered thousands of babies, and been involved in teenage pregnancy prevention programs where abstinence was recommended. He has also been involved in Planned Parenthood programs and, as a practicing physician, he is obviously in touch with the reality of patient care.

He has also performed some abortions--which are legal--and these are what seem to have aroused the wrath of the right-to-lifers who obviously have zero tolerance for anyone who does not walk their straight and narrow party line.

Dr. Foster has not broken any law, or violated any medical standard. In fact, by all indications he is the epitome of integrity, a man much honored by his patients and colleagues.

The right-to-lifers have a right to their opinion, but we believe that it is highly improper and just wrong-headed to use the issue of abortion as a litmus test of an individual's fitness for office.

We urge that President Clinton not buckle under to the growing pressure, but continue to give his full support to a supremely qualified individual, Dr. Henry W. Foster.



By Web Bryant, USA TODAY

USA Today; 2-16-95

'Roe vs. Wade' dead? Foster debate says so

Battle for abortion rights has been won in the courts but lost in the streets.

LOS ANGELES — If Dr. Henry Foster cannot serve as surgeon general because he performed 39 abortions, then *Roe vs. Wade* is dead regardless of what the Supreme Court says.

The battle for abortion rights has been won in the courts and lost in the streets. Two decades after *Roe*, access to abortion is increasingly difficult and dangerous.

Last year, 20,000 medical students received a mailing that asked: What would you do if you found yourself in a room with Hitler, Mussolini and an abortionist, and you had a gun with two bullets?

Answer: Shoot the abortionist twice.

A week later, a doctor was killed in Florida.

In 1976, over a quarter of the residency programs in gynecology required that doctors learn to perform abortions; another 66% at least offered it as an option. By 1992, the number requiring training had dropped to 12%; in nearly one-third of the programs, it no longer is offered even as an option.

No doctor should be required to perform abortions if doing so conflicts with his or her moral beliefs. But you shouldn't have to risk your life to practice gynecology.

And you shouldn't have to

give up on public service because you help women exercise their constitutional rights.

Over one-fourth of all abortion clinics reported death threats last year. The Massachusetts clinics where two receptionists were killed had been targets of daily picketing for over a year. Many clinics routinely issue bulletproof vests to doctors who perform abortions. Some fly

doctors in from out of state because no one locally will do the procedures. In much of the country, there are no clinics and no hospitals where abortions are performed.

What message does it send to young doctors if 39 abortions cost Dr. Henry Foster his chance to serve his country? Here is a man whose program to reduce teen-age pregnancy was one of George Bush's points of light, who has done more to reduce the need for abortions than most of his critics combined. If he is vulnerable, so is every doctor once he performs his first abortion.

And what message does it send to the women Foster helped, many of them victims of rape and incest? Did he do the wrong thing? Was respecting their choice a mistake? If not, why is he being punished?

Access to abortion

► In five states and the District of Columbia, the number of abortion providers increased between 1982 and 1992. The states: Delaware, Hawaii, Nebraska, Rhode Island and South Carolina.

► The other 45 states saw a decrease.

► Nationwide, the number of abortion providers decreased 18% during that period.

► Eighty-four percent of counties have no provider.

Source: National Abortion Rights Action League

No one likes abortion, least of all the women who make the difficult choice to terminate a pregnancy. Most Americans, like Foster, believe abortion should be safe, legal and rare. But most don't participate as actively in politics as do the minority who oppose abortion rights does.

The religious right may not control the Republican Party. But it wields enormous power within it, power with a clearly religious objective.

In 1994, one-third of the electorate identified themselves as white, evangelical born-again; 69% of them voted Republican. Religious con-

servatives claim they made the difference in 25 House races and at least six Senate campaigns. The Christian Coalition distributed 33 million voter guides to churches. It ran a massive Election Day operation.

It'll do even more in 1996. Presidential politics rewards intensity. In each party, activists tend to dominate the nomination process. Who else goes to caucuses? Who else works in primaries? That's why the coalition's demand that the GOP presidential and vice presidential nominees both be anti-abortion carries so much weight.

Religious conservatives have every right to participate in the political process. The challenge they pose is not to the system but to the rest of us.

COUNTERPOINTS' four columnists provide diverse perspectives on today's issues. **Mondays:** Tony Snow. **Tuesdays:** Michael Gartner. **Wednesdays:** Linda Chavez. **Thursdays:** Susan Estrich.



COUNTERPOINTS

By Susan Estrich

Why this prolife physician sympathizes with Foster

By Steve Calvin

If the performance of abortions is a disqualification for government service, then I am excluded along with Dr. Henry Foster. The separate question of whether his career abortion total is one, 12, 39 or 700 is important because it raises concern about his candor.

However, the controversy over his nomination is more fundamental: whether the American people really support an unrestricted right to abortion. To abortion rights supporters, what initially seemed to be the perfect nomination has led to a national debate that is shedding unwelcome light on reproductive options that will become increasingly difficult to defend.

Like President Clinton, Foster has stated that abortion should be safe, legal and rare. Although he is not one of the small number of physicians who perform most of the more than 1 million elective abortions each year, he is a supporter of the unrestricted right to abortion. In light of the legislative gains made by prolife forces in the November election, this certainly weakens the chances for Foster's confirmation. Nevertheless, President Clinton has voiced strong support and has shown no inclination to abort Foster's nomination. There is encouraging recent historical precedent.

In 1981 the prolife views of C. Everett Koop jeopardized his confirmation to the same position. He faced a level of intense opposition that we are bound to see again this time around, with the voices coming from the other side. Koop served admirably in a maddeningly independent fashion. Fos-

ter could do the same, but he will certainly have to answer some tough questions about the role of abortion in our society. The Senate hearings themselves will be a tremendously helpful exercise in our ongoing process of national education about abortion.

The most important questions should probe what Foster and Clinton really mean by safe, legal and rare. Though at the moment abortion is legal, how can something be rare when it is allowable in any and all circumstances? Is repetitive elective abortion so safe that it never affects the ability to carry a future pregnancy to term? Is it just to provide abortion for Down's syndrome and other nonlethal genetic abnormalities? These are legitimate concerns that have particular relevance in Minnesota, where the question of Medicaid funding for elective abortions currently rests with the state Supreme Court.

My own career includes a small number of abortions performed when pregnancy was a clear threat to the mother's life or when the fetus had fatal uncorrectable abnormalities. Most of these medically indicated abortions were done in teaching institutions. The physicians in training who assisted me benefited by seeing the awful surgical finality of those procedures. Since limiting my practice to high-risk pregnancy care, I have often attended the delivery of previable fetuses when treatment for preterm labor was unsuccessful. Helplessly watching these desperately desired children die has strengthened my opposition to the 100,000 midtrimester abortions performed each year in the United States.

I sympathize with Foster's abortion predic-

ament, though I have arrived at a vastly different conclusion. My willingness to oppose the injustice of unrestricted abortion at any gestational age has pitted me against many of my colleagues. But we have been civil in our disagreement. On the other hand, my support for the use of abortion for rare, legitimate medical reasons usually makes me suspect to those of a more partisan prolife persuasion. This points out the societal uncertainty about abortion. I am convinced that as the terms of this public debate are more clearly defined, opinion will continue to swing back toward respect for fetal life.

As a fellow specialist in obstetrics and gynecology, I strongly disagree with Foster. However, even prolife senators have stated that his position on abortion does not automatically disqualify him for service as our next surgeon general. The nation has an array of important public health matters that need immediate attention. If the Senate decides to confirm Foster, abortion advocacy should not be on his list of priorities.

It is increasingly apparent that when the discussion turns specific, some reproductive options cannot withstand public scrutiny. Ultimately the abortion question will not be resolved by judicial fiat or by violence. Until a majority of Americans reach consensus on the appropriate use of abortion, the loud discord will continue. A great deal of time and energy will be consumed in the process. The controversy over Foster's nomination is just another necessary step on the road to that consensus.

Steve Calvin, of Minneapolis, is a physician.

Hear Dr. Foster out at Senate hearing

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Dr. Henry W. Foster Jr., President Clinton's choice for surgeon general, deserves his day in court, in this case a confirmation hearing before the Senate, if only to address several vital points. Among them: validating what is supposed to be a democratic process in this country — not a witch hunt — and affirming that abortion is a legal procedure in this country that physicians' careers should not rise and fall on.

Yes, the hearing also would likely air why the White House and Foster himself fumbled in earlier accounts of the number of abortions he performed — 39 instead of 12. Far more importantly, however, that misstep would finally be put in perspective against Foster's 38-year career of delivering more than 10,000 babies and making strides with successful teen pregnancy prevention programs.

Not only does Foster deserve that opportunity — future nominees and other physicians in this country would be assured that those who support Roe vs. Wade will not be abandoned in the face of guerrilla warfare that tries to intimidate and humiliate those who would perform a legal procedure.

After a history of regularly bailing out on its so-called "troubled" nominees, the Clinton administration this time has decided to be aggressive in standing by the Foster nomination, with Vice President Al Gore, for one, repudiating efforts to trounce the nomination before it ever gets to the Senate.

"There are people in this country who want to criminalize a woman's right to choose, and they are trying to make Dr. Foster a victim... in order to make an ideological political point and win on behalf of the extremists," Gore said this week. "We are not going to let the extremists defeat this man."

The Foster nomination will be a very tough fight, particularly in the face of sentiments like those of Sen. Joseph R. Biden Jr., D-Del. The former chairman of the Judiciary Committee has said of the nomina-

At issue

► The nomination of Dr. Henry W. Foster Jr. to become the nation's 16th surgeon general faces a tough battle in the Senate because of controversy over his performing abortions, even though they are legal medical procedures.



Dr. Henry W. Foster Jr.

► Foster, who says he wants the job to "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," deserves to defend his reputation and his career.

► The administration should stand by the nominee, and the process should go forward.

tion: "They should have taken the finest doctor they could find in the country, someone near retirement without any controversy. It's not like this is the only doctor in the world."

Is that the criterion for a surgeon general, especially in a nation where there is universal agreement that teen pregnancy is at a crisis point? With a Congress hammering out welfare reform that will penalize unwed teen mothers while doing little to prevent teen pregnancy in the first place?

It will be about six weeks before the Foster nomination is expected to come before the Senate. Let the debate between now and then focus on his credentials. Then, at the confirmation hearing, let Americans not only hear Foster out — let them hear what their senators have to say.



RHETA GRIMSLEY JOHNSON

Don't let bully intimidate you

The bully is stalking the national playground once again, sending decent but cowardly folk into hiding, sometimes rendering the majority speechless.

It is a pathetic sight to watch as Dr. Henry Foster Jr. — whom peers describe as a distinguished, seasoned and even selfless healer — takes public abuse for performing what the U.S. Supreme Court decided decades ago was a legal and ethical medical procedure. Often a life-saving procedure.

The court based its decision on the U.S. Constitution. And — though it is neither here nor there, nor proof of any right or wrong — the majority of citizens happen to agree with that ruling and depend on its authority.

So why the ruckus about Foster, who acknowledges that during the 38 years of his obstetrician-gynecologist practice he sometimes aborted babies? He far more often delivered or doctored them. Why the scattering of political support that he badly needs to become the new surgeon general since the old one was driven from office for candor?

Would the same shrill critics be questioning the behavior of a nominee if he were a veteran defense lawyer who had represented murderers? A dentist who had done root canals? Has the Contract With America become a higher document in this land than the Constitution?

The anti-abortion fanatics oppose educating our children about birth control. They oppose distributing birth control devices. They oppose ending unwanted pregnancies, no matter the circumstance, no matter the law.

Then some have the unmitigated gall to oppose helping the children of poverty once they are here amongst us. Out of the womb, on your own.

The numbers in endless polls from opposite political camps show that the American public by and large believes in a woman's choice. But politicians have a hard time reacting to anything but the squeakiest wheel, or hearing above the din of a talk radio blunderbuss. (Moreover, it must be hard for them to ignore the image of abortion doctors being gunned down on their way into the clinics. With spineless politicians, intimidation works.)

Abortion is not the only issue that refuses to be melded by public opinion or law or fact. It has been truly amazing, for instance, to watch Bill Clinton's presidency come unhinged by taunts from the right about his opposition to the Vietnam War. Never mind that, by its end, the majority opposed it, too.

The death last week of former U.S. Sen. J. William Fulbright was a poignant reminder, for those who seem to have forgotten, that Vietnam was a war that divided the nation, with the opponents finally outnumbering the supporters. And opponents were not only the young, targeted for cannon fodder. Older, cooler heads as well saw the folly for what it was.

Where, then, are those like-minded people when Bill Clinton is portrayed as a coward and a traitor? Where are the pro-choice voices now to remind Congress that abortion is a settled issue? Are we so intimidated that we've become a nation of toadies, hoping the bully won't look our way?

There may be a good reason to defeat the nomination of Foster. His legal, ethical practice of medicine is not it.

SURGEON GENERAL NOMINEE

Abortion foes should back Foster, Gore says

By Charles Seabrook
and Scott Bronstein
STAFF WRITERS

Vice President Al Gore stepped further into the battle over the White House's choice for surgeon general Tuesday, saying that those who want fewer abortions should support the nomination of Dr. Henry Foster Jr.

"He has done more to reduce the number of abortions in this country than practically any other person I know of," Gore said in a meeting with editors and reporters of The Atlanta Journal-Constitution.

Foster is under attack by abortion opponents and other critics for his record in performing abortions. Although the obstetrician-gynecologist first said he had performed fewer than a dozen such procedures, the administration now says that Foster, during a 38-year career, has performed 39 abortions and supervised a drug trial in which 55 women terminated pregnancies.

Braced for battle, the White House is accusing anti-abortion "extremists" of pushing Senate Republicans to reject Foster, as a political payoff for their help in last November's elections.

Gore said the intertwining between Republicans and abortion foes "is now so complete that many elected Republicans feel they really have no choice; they have to do whatever those groups tell them to do."

Gore said the opposition to Foster is "ironic," because of the nominee's successful efforts to deter teenage pregnancies.

He was referring to the "I Have a Future" program, founded by Foster in a Nashville housing project. Gore, who was in



W.A. BRIDGES JR. / Staff

Nashville on Monday, called the program the best effort in America for reducing the number of teen pregnancies by preaching abstinence and goal-setting to young people, as well as providing information on contraceptives.

"We have a chance to win the battle against the wave of teenage pregnancy in America," Gore said. "Dr. Foster will take this successful crusade against teen pregnancy nationwide, with the full backing of the government and the American people."

Several Washington officials, including House Speaker Newt Gingrich (R-Ga.), have suggested abolishing the surgeon general's office, contending that it serves no necessary function.

Gore disagreed. "I think people listen to the surgeon general . . . especially for health education."

In other matters, Gore also:

► Disputed the notion that health care reform is a dead issue until after the 1996 elections. Although many Washington officials regard universal coverage as a pipe dream, Gore said, "It is not an impossible issue."

► Criticized the proposed overhaul of environmental laws introduced by Republicans as part of their Contract With America.

"Certainly some of the ideas being kicked around in committee now are nuts," Gore said.

He said a new so-called "takings" law, which would authorize payments to landowners when government places a restriction on the use of their land, would be a "budget buster."

Staff writer Bill Hendrick contributed to this article.

Defending nominee:

"Dr. Foster will take this successful crusade against teen pregnancy nationwide, with the full backing of the government and the American people," Vice President Al Gore told Journal-Constitution editors.

Editorial

CHICAGO DEFENDER - Wednesday, February 15, 1995 11

Stop using Foster as political football

It's time for Congress to judge Dr. Henry Foster Jr. on what he has done and what its value is to the American public, not on how his past actions fit into the conservatives', liberals' or moderates' political agendas.

The surgeon general is the chief medical officer of the federal government — not just of the Democrats, Republicans, other political parties or any sector of their organizations — but of the *whole* national government.

Congress is currently wrestling with the exact number of abortions Dr. Foster

made and some senators and representatives are using the issue to stonewall his being considered for the position. As a result, the whole situation is being kicked around like the proverbial political football. This is doing a great disservice to the American people.

Dr. Foster has already received the endorsement of the American Medical Association, one of the country's most prestigious health organizations. He has a remarkable history in that he is a former acting president of Meharry Medical College in Nashville, Tenn., one of the

four historically Black medical schools in America and, while there, founded the "I Have a Future" program. It reportedly has a very successful record of limiting teen pregnancies by urging youngsters to delay sexual activities, develop employment skills and build self-esteem.

He has said that he wants to make a campaign against teen pregnancies a central point of his tenure as surgeon general. That credible goal is definitely in the best interest of all Americans.

As the nation's main health advisor, the surgeon general is expected to pro-

tect Americans' health, spearhead research on major health concerns, issue warnings to the public on dangers to health and direct the U.S. Public Health Service (a division of the Dept. of Health and Human Services). These are things that Dr. Foster seems to have the abilities, history and demeanor to perform in an excellent manner.

America needs a qualified surgeon general. Dr. Foster seems to fit the bill. That being the case, it's time to stop the political gamesmanship and get the confirmation hearings started.

Specter's Profile in Courage

WHILE MOST congressional Republicans are cowering in fear before the anti-abortion lobby, Senator Arlen Specter of Pennsylvania deserves great credit for political courage in taking a tough stand on the nomination of Dr. Henry Foster to be U.S. surgeon general.

"I don't like seeing a person railroaded before the person has a chance to express himself," Specter

***Foster's foes
have
engaged in
a deplorable
form of New
McCarthyism***

told New Hampshire voters at a forum for GOP presidential hopefuls on Monday night. "I am prepared to go to the mat on the Foster nomination on the issue that no one ought to be disqualified from being surgeon general of the United States for performing abortions, which is a medical procedure legal under the U.S. Constitution."

With that clear and candid comment, Specter has precisely framed the issue at stake in the Foster nomination. And while he may alienate many of the right-wing

activists who dominate GOP primary politics, Specter also captured the beliefs of a majority of Americans who, whatever their personal feelings about abortion, believe in a woman's legal right to choose to have one.

Foes of President Clinton's nomination of Dr. Foster have engaged in a deplorable form of New McCarthyism, in which for days they have dragged his honorable reputation through the mud by seeking to compile a body count of how many abortions he has "committed" in his career. They smear Foster as "an abortionist" who "is not morally qualified to stand in the bully pulpit as surgeon general," in the words of Patrick Buchanan, chief hatchet man of the Religious Right.

Shame on them. Dr. Foster is a distinguished obstetrician, who has devoted his life to the care of pregnant women, delivering 10,000 babies and performing abortions when called for — according to his professional judgment and the personal, private decision of his patients. Despite the tirades of the Buchanan ilk, abortion is not a political crime, but a legal, safe and constitutionally protected medical procedure. Specter deserves credit for having the guts to remind his GOP colleagues of that simple fact.

Sticking with Foster

It's hard to imagine how the Clinton administration could have handled anything more poorly than it has the nomination of Dr. Henry Foster, an obstetrician/gynecologist, to the post of surgeon general. His specialty, and the political sensitivity of many of the tasks that ob/gyns perform, was bound to render him controversial.

Yet where it should have been up-front about Foster's record, the White House twice misstated the number of abortions he had performed — first it was one, then no more than a dozen, now it's 39 — and behaved as though it wanted to hide the facts of a career about which the doctor has no reason to be ashamed, making him an easy target in a pointless numbers game. If having performed abortions over the course of one's medical career renders a doctor unsuited to be surgeon general, then the Clinton administration, or any other, may as well forget about ever trying to name an ob/gyn to the post.

Most ob/gyn's of Foster's generation were trained to perform abortions. That Foster

performed 39, or that in the 1970's he performed a handful of hysterectomies on profoundly retarded women, or that he supervised trials of an abortion-inducing drug should not earn him the scarlet letter that many Republicans, and some Democrats, seem determined to pin on him.

Now the controversy generated by the mishandling of the nomination threatens to obscure the useful qualifications he could bring to the post: years of experience trying to reduce infant mortality, teenage pregnancy and the spread of sexually transmitted diseases, counseling young people to delay sexual activity and dispensing sensible advice about birth control.

Those are complex issues in a country where opinions differ so widely on how to address teen sexuality. But surely there's no sense in jettisoning a nominee who has spent a 38-year career examining them. If it stands for anything, the administration should stick with him now.

The Wrong Target

SAN FRANCISCO

For the first couple of days, the issue seemed quite clear — and the adversary.

The anti-abortion movement is using all its power to kill the nomination as Surgeon General of a respected physician because he has carried out a medical procedure not only legal but constitutionally upheld by the Supreme Court.

So I reacted simply against the anti-abortionists for using their political clout to block Dr. Henry W. Foster Jr. Where would it leave us if a nominee were blocked for acting completely within the law?

My mind was poised for the key-board when it struck me that I had the wrong target.

Like most Americans I'm not "pro-abortion" but I am pro the right of women to make their own decisions, whether or not the reason or the social esthetic coincides with my tastes.

The unrelenting pressure by the pro-life movement disgusts me. I do not mean only the murders at clinics. I think they come from a fringe for whom the only answer is life imprisonment, at least.

But blocking access to the clinics, thrusting disgusting posters, shouting threats and hounding clinic employees — that is a deliberate tactic of the anti-abortion movement itself.

Have we forgotten when blockade, vilification and harassment were the weapons of the left, particularly in the universities? They brought the same results the pro-lifers now bestow upon the country — contempt for law, hatred as a substitute for civil discourse and ugliness, mean indelible ugliness.

But thinking through the Foster case I realized that like pro-life Americans there are acts and beliefs, however legal, that would make me oppose a nominee and fight his election or confirmation.

I would fight anybody with a Fascist, Stalinist or racist record. And I suggested the ouster of Dr. Joycelyn Elders as Surgeon General because I thought she was helping open the door to drug legalization.

To the pro-life movement the act of abortion itself, not just the Supreme Court's opinion, touches passions. Anti-abortionists are no more likely to change than I am to support a PAC for Louis Farrakhan.

So the target of those who support Dr. Foster — particularly in the White House — should be not just the unconvertible pro-life movement but

members of Congress who were pro-choice when they contemplated the women's vote at election time but now edge away from Dr. Foster because the anti-abortionists are showing how hard they will fight.

There is nervous hoo-ha among some pro-choice people about how many abortions Dr. Foster performed and whether he gave an accurate accounting in the beginning.

The only worthwhile answer is that he performed as many as he thought he had to. But the goal of his professional life was getting young

Fighting for Dr. Foster.

women to understand the theory, once grasped in this country, that for youngsters the way to avoid pregnancies is not to have sexual intercourse. Failing that — condoms.

The remarkable thing is not his own teaching on abstinence but that he got many young women to agree. He should get a medal for that silly Surgeon General's uniform.

Dr. Foster denies he said he performed only one abortion but that he remembers one most — for a woman with AIDS. Of course he does. One day I walked through a pediatrics ward in a New York hospital and saw two babies, brother and sister about a year apart. Both were dying of AIDS. I think still about the mother and wonder if by now she had a third AIDS baby, as the ward pediatrician thought she would.

So let the hearings decide whether he should be Surgeon General or that an abortion audit is more important than his life's work.

Let's hope Dr. Foster has the courage to refuse any suggestions that may come from the Administration or elsewhere that he should withdraw before or during the hearings.

President Clinton has promised to stick by him. Mr. Clinton has several times failed to stay the route on issues ranging from nominations to human rights. So he has to pay the reasonable price of lingering skepticism about his promises.

The hearings are as much about the constancy of pro-choice politicians, including the President of the United States, as about Dr. Henry W. Foster Jr. — more. □

Pastor praises Foster's postnatal priorities

While political pundits took to the airwaves Sunday to vilify the Clinton administration's nomination of Dr. Henry W. Foster Jr. for surgeon general, the Rev. Wallace Smith, pastor of the Shiloh Baptist Church in the District, took to the pulpit to vindicate his longtime friend's reputation.

"Dr. Foster is an honorable guy who's been dealt an unconscionable blow by the religious right," said Mr. Smith, adding that the embattled doctor is "one of the finest Christians I've ever known."

Mr. Smith developed a friendship with the "warm, tender, soft-spoken" physician and "well-known civic leader" when he was the minister of the First Baptist Church Capitol Hill in Nashville for six years before coming to Washington two years ago.

An angered Mr. Smith told his parishioners the Foster nomination is being cloaked in a debate by the religious right, which is using "abortion as a smokescreen" to "spearhead a movement to undermine African-American leadership."

"Unless you are a narrow-minded Uncle-Tom-type who



speaks the narrow-minded, fundamentalist language they approve of, you will be discredited," Mr. Smith said. "The African-American community is shocked by the meanness of the crowd in Washington now."

"We don't have to fear a lynch mob coming to pull us out of our houses in the middle of the night," Mr. Smith said. "But there are other kinds of mobs."

Dr. Foster is not known as "anybody who is pro-abortion," he said. Neither the minister nor the doctor support abortion on demand but recognize "there can be limited, extenuating circumstances" where it is acceptable, he said.

"I'm pro-life," said Mr. Smith. "I believe in celebrating life from beginning to end, not just when it's a fetus and then forget about it once it's born. I have

yet to see the right come up with a strategy for what to do with a life once it's here."

Mr. Smith will encourage Dr. Foster to continue to seek the post as the nation's public-health advocate. As part of an effort to mobilize support for Dr. Foster, he asked his congregation to participate in a letter-writing campaign to support the nomination. The Progressive National Baptist Convention, which represents 2.5 million people, including those at Shiloh Baptist, has already prepared a letter to be sent to the White House.

Mr. Smith is also organizing a coalition of Protestants, Catholics and Jews to counter Dr. Foster's critics and "to demonstrate that the religious right does not speak for all Christendom."

Mr. Smith, whose inner-city

church provides a variety of community-oriented programs at its Shiloh Family Life Center, said that when he learned of Dr. Foster's nomination he was "generally enthusiastic and giddy at the possibilities" of working with him on local problems.

While in Nashville, Mr. Smith remembered how church members wanted to assist a recently-separated woman with six children. Unbeknownst to them, Dr. Foster voluntarily started mentoring her teen son, who was beginning to misbehave. The doctor, a Tuskegee Airman, got the 13-year-old interested in flying.

Mr. Smith is correct about one thing: Dr. Foster is the latest sacrificial lamb in the never-ending abortion debate. This nomination is no longer about this physician or his qualifications to serve as the nation's health-care advocate beyond a single issue. Nor is it about one man's attempts to make a positive difference in the lives and futures of young people who face incredible odds.

Who cares if the waffling President Clinton and his minions lose another political vic-

tory?

What about troubled teenagers who need an experienced and empathetic adult to champion their cause and address their needs? Who cares about the proliferation of AIDS and the rise of teen pregnancy, drug use and violent deaths among youth? Apparently, Dr. Foster cares, with his "I Have A Future" program that's helped countless teens and their families in the Nashville housing projects.

Which brings us to the larger issue: When are we going to invest as much time and energy in the thousands of children who are literally dying daily as they attempt to survive in sub-human conditions as we invest in the unborn?

While this political furor over the Foster nomination and abortion rages on, community workers like Vera Johnson-Bowling, associate director of the Sasha Bruce Youthworks Inc., must struggle with massive cutbacks in programs such as the discontinued Turning Points program.

"We are in a state of emergency as it applies to kids," she said. "We need to deal with the children who are alive."

Comment

ON THE NATION
L.A. Times; 2-14-95

Nomination Is Latest Battle in Abortion War

By Susan Estrich

The nomination of Dr. Henry W. Foster Jr., President Clinton's choice for Surgeon General, is in trouble. It is in trouble for only one reason: abortion. Over the course of a 38-year career, Foster delivered 10,000 babies. He founded a nationally recognized program to curb teen-age pregnancy. And, yes, he performed abortions.

Last week, the distinguished doctor, in an effort to save his nomination, was forced to detail on national television just how many abortions he performed—was it fewer than a dozen, as he originally thought; or closer to 39, as a later review of decades of practice suggested.

This debate is a disgrace. It shouldn't matter how many abortions Foster performed. He is a gynecologist. Abortion is legal. It is a patient's choice.

This is a witch hunt, and the real target is women's rights. Twenty years after the U.S. Supreme Court's decision in *Roe vs. Wade* making abortion legal, it has become increasingly difficult and dangerous to have an abortion in America. The religious right may have lost the battle in the courts, but they are fighting it out on the streets—and they're winning.

The current attack on Foster may hurt the Republicans politically—by exposing their dependence on the religious right. It may end up helping the President politically—by giving him a popular fight to take to the Republicans. Speaker of the House Newt Gingrich (R-Ga.) doesn't need this fight—it doesn't further his "contract with America"; it doesn't help him with the middle class; in short, it doesn't make much sense for the GOP in traditional partisan terms.

But it makes perfect sense as part of the religious right's guerrilla war against abortion. This is how they win. Foster is today's foil. Even if he is ultimately confirmed, the damage is done.

A constitutional right to choose abortion doesn't mean much if you can't find a doctor who'll perform one. No doctor should be required to perform abortions if it conflicts with his or her beliefs. But you shouldn't have to be a hero—or a martyr—to be a gynecologist. You shouldn't have to give up hopes of public service when you per-

form your first abortion.

The message being sent by the attack on Foster is unmistakable. Doctors beware. Performing abortions may expose you to political indignity and humiliation. It is dangerous to your career, as well as your health. Depending on the number you perform, and the circumstances, providing women a medical service that is protected by the Constitution may disqualify you from serving your country.

It is the last message that responsible leaders should be sending.

In 83% of America's counties, there are already no clinics or hospitals willing to perform abortions. Second-trimester abortions are even harder to come by—even if the mother is seriously ill, or the fetus could not survive. The number of hospitals offering abortions dropped 50% from 1977 to 1988. In 1976, more than 25% of residency programs in obstetrics and gynecology required that doctors learn to perform abortions. In 1992, only 12% of the programs trained doctors to do first-trimester abortions, and only 7% trained them to do second-trimester abortions.

One-third of the programs in this country train doctors to provide reproductive care without even being offered the option of learning how to perform abortions.

Bulletproof vests have become a routine item in the budgets of abortion clinics. The costs of security push up the costs of abortion. The routine harassment drives doctors away and forces patients to go through hell just to get in the door. In a recent study by the Fund for a Feminist Majority, more than one-fourth of the nation's abortion clinics reported receiving death threats. There are not enough federal marshals to protect them.

Foster's nomination should have been easy. There is a national consensus that teen-age pregnancy is a major threat to our future. Until the anti-abortion forces started up, Foster had the support of both his home state's Republican senators—including one who is himself a physician.

If the anti-abortion forces can do this to Foster, if they can put him on the defensive, force him to defend quotes out of context, embroil him in a fight over just how many abortions he performed and why, they can destroy anybody.

Foster is a distinguished doctor, and no one has raised any serious objection to his qualifications other than his track record on abortion. It is time for the majority in this country that supports *Roe vs. Wade* to stand up to those who would turn that constitutional right into a hollow promise. If not now, when?

Susan Estrich is a law professor at USC.

Let senators know the right choice is to vote to confirm Foster

More than one-third of America's children are born to single mothers. Among black mothers the number exceeds three in five; among whites it is nearing 30 percent.



Dr. Bill Roy

Commentary

As the number of single-parent families goes up, our society becomes less and less like we want it to be, and more and more an unskilled, dependent society. None of this is news.

Everyone should contribute to solving this problem; both private and public sector should be involved. But one person has a unique responsibility: the surgeon general. An ideal surgeon general should

have a track record of addressing the problem of unwed motherhood. He or she should be highly respected among colleagues. Because it is a big job, proven administrative experience is highly desirable.

It helps if the surgeon general has first hand experience with individual patients, so he knows something of the myriad of circumstances which lead to unwanted pregnancies and single mothers who want to bear children out of wedlock.

President Clinton has identified such a person and sent his name to the Senate for confirmation. Dr. Henry W. Foster Jr. has headed a program that has decreased teen-age pregnancies and births to unwed mothers. He has administered a medical school, Meharry Medical College in Nashville, Tenn. He has done clinical research. And he has provided full spectrum reproductive care to thousands of women, including 10,000 deliveries.

Foster is focused on one of the most important issues facing America: out of wedlock births. By any logical reasoning he should get 100 votes in the U.S. Senate.

But Dr. Foster has done abortions — lawful, voluntary abortions.

If Foster is the compassionate, conscientious physician his colleagues at the American College of Obstetricians and Gynecologists believe him to be, he has spent hours urging patients to seek alternatives to termination of their pregnancies. He has referred them to others who might help with support and/or adoption. But there are many pregnant women whom no parent, no doctor, no priest can dissuade from abortion.

Today women seek legal medical care rather than resorting to coat hangers, potassium permanganate or other life-endangering procedures. Because of harassment and fear, few physicians are available to perform abortions today. But nearly all physicians refer desperate women to doctors brave enough to risk their lives to protect women from the risk of back-alley abortions.

Since Roe vs. Wade was decided in January 1973, there are Americans who in good conscience will not vote for a political candidate who does

not at least give lip-service to making abortions illegal.

A few senators are morally opposed to abortions. Others simply see votes they cannot lose. Either way, they stand between Foster and confirmation. This is the time for

concerned, compassionate Kansans to write their senators. To do less is to permit a small number of determined voters to thwart the national will and the nation's best interest.

It makes a lot more sense to avoid

unwanted pregnancies and unwanted births than to punish the children and their mothers by punitively denying them welfare and medical care after they are born. Sens. Bob Dole and Nancy Kassebaum know this. Help them do the right thing.

OUR PERSPECTIVE

Surgeon general

Playing a numbers game with Foster

Quick: How many times in the last decade have you been in a doctor's office? Perhaps you think the number is around 40. But after a few days' reflection, you might admit that an accurate count would be closer to 80; all those ear checks during the preschool years do tend to add up. It might be amusing, but certainly not embarrassing, if an official tally revealed an even higher count: After all, there's nothing criminal about seeking medical services — and nothing underhanded about underestimating. And since the number is irrelevant anyway, what's the point in fretting over it in the first place?

There's no more point, really, than in playing a similar numbers game with the new nominee for surgeon general. When Dr. Henry Foster was first asked how many abortions he'd performed in three decades of gynecological practice, he put the number at "fewer than a dozen." The next week, Foster said a review of hospital records indicated the correct count was 39. Now he's being pilloried as a liar and a sneak — all because of a miscalculation so trivial it can't even be called a mistake. Republican critics are clucking about Foster's "credibility problem," insisting that his nomination is dead. Even Sen. Joseph Biden momentarily joined the lynch mob — recanting his nasty cracks only after the damage was done.

But why the clucking and the cracks?

Where's the credibility problem? As a horde of physicians have argued in Foster's defense, any doctor asked to pinpoint the number of times he'd performed a particular procedure — especially over a 30-year period — would probably guess wrong. Of course, no one would object if Foster had underestimated the number of laparoscopic exams he'd performed or babies he'd delivered. Abortion is just as legal — and, to many women, just as indispensable — as other medical services.

Which brings us to the bitter truth about the sabotage attempt now underway. The people firing spitballs at Dr. Foster are doing so not because his memory is imperfect, but simply because he's a gynecologist and has offered the services gynecologists typically offer. Any such specialist who'd performed abortions would fail the spitballers' test. And because they're not sure they can sink Foster on that issue alone, they're searching for other millstones to throw around his neck. So far, they've had little luck.

Give President Clinton credit for shunning the extremists and standing behind Foster. His firmness disputes the obstructionists' insinuation that there's something disgraceful in supporting abortion rights or performing abortions. Practicing medicine should never be a reason to disqualify a surgeon general nominee.

Put an end to drive-by smearers

As in Foster, Rutgers president cases, we go after careers with impunity.

AMES, Iowa — By all accounts, Francis Lawrence has had a distinguished academic career and has been a fine president at Rutgers University.

By all accounts, Henry Foster has had a distinguished career as an obstetrician and a medical administrator in Nashville.

Yet Lawrence is in danger of being fired by Rutgers, and Foster is likely to be rejected by the Senate for a job he is well-suited for.

It's all because of sound bites and instant analysis.

Not sound bites on TV, which at least knows the ethics of sound bites. Not instant analysis by anchor-men, who at least know how to analyze instantly.

No, these are the sound bites of gossip, the instant analyses of placards. They are the quotes, misquotes and twistquotes passed along by those unyielding in their cause or unforgiving in their person.

It is unfair, and it has gotten out of hand.

If you read everything Lawrence said that day in November and if you look at his accomplishments in



COUNTERPOINTS
By Michael Gartner

bringing minorities to Rutgers, you will see he is a champion of equality. He is not a racist. He has said one dumb thing, and he has apologized.

If we are to debate whether he is suited to run Rutgers, should we not debate his full record?

But a debate carried on by placards and demonstrations and quotes out of context doesn't allow for that. It is not a debate; it is an inquisition.

If you look at the record of Foster, you will say this is a man who cares about the health of America, who wants young mothers to thrive and their babies to survive. If you look at his record over three decades, you will say this is a man who has made a difference.

You will also say this is a doctor who performed 39 abortions — operations that are legal, that have been performed by thousands of doctors more than 1 million times a year for the past 20 years.



FOSTER



LAWRENCE

Yet the debate is not whether Foster would be a good surgeon general, not whether he would help nurture and nourish the men and women and children of America, not whether he is a good administrator or a good doctor or a good man. If you're just tuning in, you'd think Foster was some back-alley operator who did nothing but abortions all his life.

That's the way this debate is being framed — it's about Henry Foster, abortionist, not about Dr. Foster, intellect and innovator and caregiver.

We've become a nation of drive-by smearers — going after reputations and careers with the recklessness and randomness with which we shoot people on freeways. The media may be abetting — or, depending on your outlook, simply reporting — but it's not the media stirring the pot.

In the case of President Lawrence, it's the young, who know no better. In the case of Dr. Foster, it's the Christian right, which should know better.

This piling-on is out of hand. Now is the time to stop it. The Rutgers board must explain to the young that no one is perfect. That they, too, will make mistakes as they grow older. But that a life cannot be judged by a sound bite. And the board must stand by its man.

The president, too, must stand by his man. He must explain that this is not a one-issue country, that there are good and decent people on all sides of debates.

At Rutgers the young must learn, in Washington the right must learn, and across the nation we all must learn: There's a difference between democracy and mobocracy.

COUNTERPOINTS' four columnists provide views from diverse perspectives on today's issues. Wednesday: Linda Chavez on another affirmative-action debate. Thursday: Susan Estrich. Monday: Tony Snow. Tuesday: Michael Gartner.

► Foster nomination, 12A

White House Releases Papers That Defend Foster

By LAWRENCE K. ALTMAN
Special to The New York Times

WASHINGTON, Feb. 12 — 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 Profes-

sors 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

A nominee's writings in the 70's are called 'enlightened.'

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 steril-

ization 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."

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



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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 had 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.

Don't dump Dr. Foster

By performing abortions, Clinton's nominee for surgeon general has committed no crime, despite his McCarthy-esque critics

JOSEPH MCCARTHY is risen from the grave. "Are you now, or have you ever been, a doctor who performs abortions?" This is the unspoken test that's being applied to the candidacy of Dr. Henry Foster to be U.S. surgeon general.

His nomination is an unfortunate battleground on which to re-fight the right to abortion, which was established 22 years ago in *Roe vs. Wade* and reaffirmed by the U.S. Supreme Court in June 1992. But the fanatic right has infected the confirmation debate, and, to their shame, moderates are wavering. Even Democratic Sen. Joe Biden and *The New York Times* have felt compelled to speak out against Foster.

President Clinton shouldn't listen. He must continue to stand up for Foster.

Whether Foster performed one abortion, fewer than a dozen, 39 or hundreds is irrelevant. Perhaps White House staff is guilty of felony stupidity, but in this country, it is no crime for a doctor to perform an abortion.

Yet, the witch hunt continues. A news report says, "Dr. Foster now admits to performing 39 abortions." — as if evidence of his guilt were mounting daily.

As an obstetrician, Foster has delivered 10,000 babies. It would be remarkable if he had never performed an abortion. In his 38 years of practice, he has averaged one abortion a year. As the respected acting director of Nashville's Meharry Medical College, Foster has worked hard to prevent teenagers from becoming pregnant.

"I believe in the right of a woman to choose," Foster told medical students at George Washington University on Friday. "And I also support the president's belief that abortions should be safe, legal and rare. The irony of the debate is my life's work has been dedicated to making sure that young people don't have to face the choice of abortions."

Rep. Dan Coats, R-Ind., says the litmus test isn't abortion but the truth. Well, Foster has gone to great lengths to tell the truth, researching thousands of hospital records to get an exact count of abortions he performed. He also acknowledged presiding over a study of an experimental drug that induced abortions in 55 of 60 women.

This numbers game wouldn't be necessary except some extremists still want to convince us that abortion is the new communism. Hardly. It's a right protected by the Constitution.

OPINION

Rekha
BASU

Insidious attack on Foster

By now we've seen enough higher appointments be cynically torpedoed that the siege upon Henry Foster should come as little surprise. Yet the attempts to demonize President Clinton's newest surgeon general nominee, merely for practicing his profession, tests even the most hardened skeptic's sense of political fairness. It just doesn't get much more insidious than this.

Twenty-two years ago the U.S. Supreme Court ruled that women have a constitutionally guaranteed right to end unwanted pregnancies. That right has withstood harassment, intimidation and the murders of doctors. It has weathered gag rules, parental-notification laws and clinic blockades.

Globally, it has endured despite attempts to export U.S. hypocrisy by withdrawing funds to family-planning programs. Locally, it has survived a corporate divestiture of funds from women's health clinics where abortion wasn't even an issue.

It has also — so far — survived Republican administration attempts to pack the Supreme Court with ideologues who would rescind that right. Yet in flagrant contempt of that time-tested law, members of Congress last week were piling on in a frenzied attempt to sully the reputation of an eminent medical school dean and president, obstetrician and gynecologist because, in the course of an outstanding medical career, he performed abortions, amniocentesis and clinical trials on abortion drugs.

Although Foster did them in accordance with the laws and code of his profession, his opponents have managed to make an issue out of *how many* abortions he performed, as if they had an acceptable number in mind.

Never mind that Foster, who has received a string of excellence awards, in 1991 was designated as one of President Bush's Thousand Points of Light. Never mind that he has been one of the leading authorities on reducing infant mortality, preventing teen pregnancy and drug abuse, and promoting abstinence — all benchmarks of a conservative agenda. The sharks are now circling to get Foster disqualified.

It's one thing for newly emboldened conservatives in the new Congress to try to make Foster their first target. But even pro-choice moderates are said to be wavering in their support for him. On the air last week, the Christian Coalition's Ralph Reed was boasting of making political deals with economic conservatives for whom abortion isn't even an issue.

What's more, some liberals who should be rallying to Foster's side are said to be afraid of being abandoned by a president who has proved to be easily swayed into selling out his nominees. Even if he stands by Foster, Clinton has so undermined his own authority when it comes to making and sticking by appointments that the damage may be irreversible.

Let's not forget why we need a new surgeon general in the first place: Because the last one, answering a question in the context of teen abstinence and pregnancy and disease prevention, had the temerity to suggest discussing masturbation in school sex-education classes. Lani Guinier got torpedoed for attorney general because opponents distorted her views on the Voting Rights Act; Kimba Woods because she legally employed someone who had been an illegal immigrant. Paradoxically, though the whole nation heard testimony accusing Supreme Court Justice Clarence Thomas of illegal sexual harassment while he presided over a federal agency for equal opportunities, that wasn't, in the end, deemed serious enough grounds to reconsider him.

Thoughtful people can disagree ad infinitum over when life begins, but the right to abortion remains the law. Would it be appropriate for those of us who are morally opposed to the death penalty to try to disqualify from higher office every judge and juror who ever imposed it in a death-penalty state?

Why stop there? Perhaps Congress should also have called for Supreme Court Justice Harry Blackmun's resignation, before his retirement last year, for authoring *Roe vs. Wade*?

"President Clinton is once again showing America that he has nothing but contempt for America's children and families . . ." said a press release put out by Iowans for LIFE the day after Henry Foster's nomination. "Now he has the gall to nominate a man who killed preborn children for a living to the nation's top medical post! When will he stop?"

Some of us are wondering when the witch-hunts and the bullying and the harassment will stop.

We are waiting for this "moral" crusade to show some moral authority in its tactics.

REKHA BASU is a *Register* columnist.

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 easygoing manner have made him

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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

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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."

Conservatives out to stigmatize M.D.'s

No matter how much Capitol Hill conservatives try to sugarcoat it, their attempts to block President Clinton's nominee for surgeon general amount to a dangerous stigmatization of every doctor who has ever performed an abortion.

Sen. Phil Gramm (R-Texas), a possible presidential candidate, was pretty upfront about why he didn't like Henry W. Foster Jr. He said he does "not believe a doctor who has performed abortions as a matter of routine practice could bring Americans together" on issues of medical policy. Oh? He could hardly do worse than Sen. Gramm.

Since when is a surgeon general supposed to be free of controversy? Reagan's quite popular surgeon general, C. Everett Koop, shocked fellow conservatives with some of his views about sex education for children, yet, most people appreciated his candor.

Foster is being criticized for his alleged lack of candor in disclosing how many abortions he has performed during almost 40 years of medical practice. At first he said fewer than a dozen, but, after checking his records, revised the number to 39. Organized anti-abortion activists alleged he performed many more. Is one enough? Is 500 too many? Even if Foster's original estimate had been correct, it would not have silenced the rage from the radical right, or calmed Clinton's nervousness.

Others claim the question is "credibility" or "morality." Sen. Orrin Hatch (R-Utah), chairman of the Senate Judiciary Committee, says the nation doesn't want a surgeon general who advocates "permissiveness." Yet, Foster received a "Point of Light" award from President Bush for his "I Have A Future" youth program, which innovatively and effectively encouraged young people to postpone sex until they have taken care of life's more important steps, like career and marriage.

Hatch does not care for Foster's advocacy of condom distribution in school-based clinics, but Foster has more agreement in the medical community and, as near as I can tell, in mainstream America on this issue than Hatch does.

Much has been made of how Clinton's staff members stumbled, and they have apologized. But, what about the bigger question: Why should Foster's having performed abortions be an issue at all?

Clinton ran as a pro-choice candidate in a pro-choice party in a year when moderate Republican leaders tried unsuccessfully to prevent their own extremists from pushing an anti-abortion plank so Draconian that it allowed for no exceptions, even for rape and incest.

Clarence Page

Capitol Hill Republicans would prefer that Americans not think too much about that. Most Americans tell pollsters they do not like abortion (Who would?) but they also do not want to see it made illegal again. We abhor it, yet we want it.

We would also would like young people to practice abstinence outside marriage. But, as one Atlanta mother said on CNN, "If it was your kid who came down with AIDS, wouldn't you wish they had used a condom?"

Let's hear it for good ol' American common sense.

We Americans are like Bill Clinton. We want to have the tough questions both ways. We want life and we also want choice. We want freedom and we also want control. We look to Washington for leadership and guidance and, instead, see politicians of both parties running to hide in the tall grass of political rhetoric.

On this issue, they can run, but they can't hide. If Clinton caves in to pressure from the anti-abortion anti-condom extremists, he will only enhance their credibility and discredit those who hoped his administration would represent a reasonable middle ground.

Worse, the Foster flap stigmatizes a man of high character and a long record of impeccable public service simply because he performed some abortions. That is not a pleasant thought, but, there are a lot of procedures doctors perform that are not pleasant to talk about at the dinner table.

A decent society will always feel a certain moral discomfort with abortion. But it should also feel considerable discomfort about driving those women and, in too many cases, girls who are going to be seeking abortions anyway, into the hands of back-alley abortionists.

A decent society should also feel considerable discomfort about stigmatizing a doctor simply because he or she has performed abortions. That's just a short step away from stigmatizing all doctors who perform abortions, which, when you think about it, is just a "lite," clean-hands version of the criminal logic that drives certain self-appointed baby-savers to shoot abortion doctors and clinic workers.

Most of Foster's tormentors will deny they would have anything to do with outlaw violence. That's basically true. They only help provide the atmosphere for it.

Surgeon Generals Attract Criticism

KNIGHT-RIDDER WASHINGTON BUREAU

Washington — The controversy that threatens to shoot down Henry W. Foster Jr., President Clinton's nominee for surgeon general, begs the question: Just what is a surgeon general anyway? And why do they wear that uniform?

Much of the power of the often-beleaguered office has been stripped since it was formed a century ago. It runs on a budget of slightly more than \$1 million. And, aside from special projects, the surgeon general manages only about seven or eight employees.

Still, past surgeons general have combined the power of personality with the position to become the health conscience of the country. They have issued ground-breaking reports on smoking, preventing teen pregnancy, nutrition, water fluoridation and the AIDS epidemic.

Surgeon General Luther Terry rocked the country in 1964 when he issued the first report linking smoking with lung cancer. C. Everett Koop tackled the growing AIDS epidemic head-on in the 1980s, before anyone else in the Reagan administration.

And has public rancor always surrounded the nation's top doctor? In a word, yes.

Koop was dismissed by his critics as "Dr. Kook" for encouraging the use of condoms to prevent AIDS. And long before Joycelyn Elders mentioned anything about legalizing drugs or teaching about masturbation as part of human sexuality, Walter Wyman, surgeon general between 1891 and 1911, infuriated San Francisco city officials around the turn of the century. He sent his health corps doctors to control a plague outbreak, but the city fathers would have preferred that no one know about the epidemic.

Thomas Parran, Franklin Roosevelt's surgeon general in the 1930s and 1940s, scandalized modest Americans by being one of the first to utter the words "venereal disease" on the radio.

Concerned about the men returning home from war and about a population that was increasingly mobile, Parran made VD prevention and treatment the mainstay of his agenda. His campaign led several states to



AIDS FIGHTER: C. Everett Koop sounded an early alarm on AIDS.



FIRED: Joycelyn Elders was dismissed for her outspoken views.

require blood tests for syphilis before granting marriage licenses.

"At a time when people didn't even use the word 'syphilis' in newspapers, he insisted on raising the issue," said Dr. John Parascandola, Public Health Service historian. "So he became somewhat controversial. But com-

pared to our controversies today, this would be minimal."

In fact, the office of surgeon general was born out of a controversy.

What has now become a largely ceremonial bully pulpit started for a very different reason in 1798. Congress decided the government should look after all the friendless merchant seamen who sailed to exotic locations and came back to U.S. ports carrying diseases like cholera, yellow fever and typhoid.

The U.S. Marine Hospital Service was formed, but it soon became a vipers' nest of corruption. Fed up, Congress decided in 1870 to federalize the service and give it strong central authority in Washington.

The first surgeon general, Dr. John Woodworth, modeled his operation on the military, replete with rank, uniform, discipline and, he hoped, respect. The members of the surgeon general's staff were — and still are — called the Commissioned Corps. The president can militarize the 6,300-strong corps and send them to war, although that hasn't happened since the Korean conflict. Thus, the uniforms.

The U.S. Marine Hospital Service soon evolved into the U.S. Public Health Service, responsible for quarantines, checking the health of newly arrived immigrants and federal prisoners and investigating various outbreaks.

Up until the late 1960s, the surgeon general was the head of the Public Health Service. But, in 1967, Lyndon Johnson stripped the surgeon general's position of its power. He wanted a controllable political ally, not a medical doctor, to keep a close eye on his just-passed pet programs: Medicare and Medicaid.

From that time on, the surgeon general has served as an advisor to higher-ups in the Public Health Service and as titular head of the Commissioned Corps.

The surgeon general, who is paid \$90,000 to \$100,000, has evolved into the top spokesperson on health issues. Koop used to say all he had was "moral suasion." And Elders, in her short tenure, gave more than 300 speeches.

The Nation

N.Y. Times; 2-12-95

When Bad Things Happen To a Logical Nomination

By JERRY GRAY

WASHINGTON
ON most points, Dr. Henry W. Foster Jr., the man President Clinton would have as the next Surgeon General of the United States, the minder of the nation's medical health and frequently its morals, could be called a font of family values.

On sex education in the schools: "I think that these issues have to be addressed at the family level. I do not feel schools or the health department can unilaterally do this without the involvement of parents."

On distributing condoms to teen-agers: "I favor abstinence. Abstinence, that's what I favor. We teach people abstinence. That's our first route."

Dr. Foster was at first glance the perfect replacement for Dr. Joycelyn Elders, Mr. Clinton's first Sur-

Abortion accounting was an issue for a prospective Surgeon General.

geon General, whom he fired in December after her outspokenness created one political problem too many.

So how is it that the 61-year-old, soft-spoken obstetrician-gynecologist from Tennessee has engendered such a political firestorm?

Sterling Reputation

Mr. Clinton settled on Dr. Foster because of his moderate views and sterling reputation — in 1972, when he was elected to the National Academy of Sciences at the age of 39, he was the youngest person ever admitted. Dr. Foster became a leader in combating teen-age

pregnancy, founder of a national program — "I Have a Future" — that earned a citation from President George Bush as one of his "thousand points of light."

But since President Clinton nominated Dr. Foster 10 days ago, the issue of abortion — and, much more specifically, the number he performed — has clouded consideration of much of the rest of his career. In recent years, the job of Surgeon General has been held by pediatricians, and never by a gynecologist, who by the very nature of his specialty would be likely to have performed abortions.

How Dr. Foster became potentially an even greater political liability than Dr. Elders, whose legacy looked like a potential problem in next year's Presidential race, is more a course in political arithmetic than political calculus, but no less baffling.

The White House apparently did not anticipate the scope of its problem, even though the abortion issue has taken on talismanic importance. Worse, the bumbling cost the support of some Senators who suddenly claimed that the issue was one of "credibility."

"It was a political blunder in the extreme," Senator Joseph R. Biden Jr., Democrat of Delaware, said in a fit of pique and candor. At one point on Friday, the Senator announced his opposition to the nomination, only to back off after a talking-to from the White House.

Despite attempts to tout Dr. Foster's overall record, the Administration let its critics set the terms of the discussion. As the controversy intensified, the nominee recalled in a series of public appearances, including an interview on the ABC News Show "Nightline," how it all began:

"The day before the President announced his intention to nominate, I was asked by someone in the Administration had I done abortions, and I said yes, and the one I remembered most was a woman who had AIDS, and that was the end of that conversation."

It was the innocent start to a week of confusion.

The Administration swiftly but quietly told Senate Republicans that the abortion issue would not complicate the confirmation process. Dr. Foster, the Administration officials said, had performed only one abortion.



David Scott/The New York Times

Dr. Henry W. Foster Jr., after a perilous week as a Clinton nominee, acknowledged applause at a speech.

"Shortly thereafter," the nominee said, "someone said, 'Have you done more than one abortion?' I casually said, 'Yes, most obstetricians have done more than one abortion.' And they said, 'How many have you done?'"

Even as a political outsider, Dr. Foster immediately sensed that there was a problem.

"Washington is a fast town, but I'm becoming a quick study," he said. "I should have refused to answer that question until I knew the exact number."

He did not. Instead, with the help of the White House, Dr. Foster released a carefully crafted statement that he had performed "fewer than a dozen" abortions in his 38-year medical career.

Anti-abortion groups quickly weighed in with evidence that they said showed that Dr. Foster had performed or supervised many more abortions than he had acknowledged, perhaps hundreds.

"It was a guess and I should not have made it," Dr. Foster said. And then he gave a third accounting:

"All of my patient records, and all of the operative logs from the time I went to Meharry in 1973 until

tonight, have revealed that I was listed as the physician of record on 39 of those cases in 38 years in practice."

On Friday, Dr. Foster said he would fight back. He told a group of medical, science and public health students at the George Washington University: "I have dedicated my entire career to taking all medical steps to meet the health needs of my patients, and that includes performing legal abortions."

"I believe in the right of a woman to choose," he said. "And I also support the President's belief that abortions should be safe, legal and rare. The irony is that my life's work has been dedicated to making sure that young people don't have to face the choice of abortions."

He noted that his nomination fell on Groundhog Day and that he felt "a little bit like that groundhog."

"Ever since Feb. 2 — when President Clinton and Secretary Shalala publicly called me to service — 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," he said. "Yes, I see a shadow, but it's not my shadow."

Henry Foster owes no apology

In an address to medical students Friday, Dr. Henry Foster Jr., President Clinton's nominee for surgeon general, ably defended his 38 years of medical practice. While his performance was reassuring, it was a defense that should never have been necessary. There is nothing in Foster's record that suggests he should have any explaining to do.

The White House showed its penchant for fouling up even relatively simple appointments when it allowed itself to get caught up in a numbers game with rabid anti-abortionists over how many of the procedures Foster has performed. The numbers do not matter. Foster, an obstetrician-gynecologist, has done nothing illegal or immoral. Abortion is the law of the land and an accepted part of mainstream medical practice.

President Clinton can still act to shore up Foster's nomination. To do so, the president must stand firmly — and publicly — behind the nominee. The president and his aides can also stop attempting to answer questions about the number of abortions Foster has performed.

Equally important, White House aides must stop acting as though Foster somehow misled them when he initially told White House interviewers that he performed a dozen or so

abortions. In nearly four decades of practice in which he delivered more than 10,000 babies, Foster could hardly be expected to remember off the top of his head how many of his medical procedures had been abortions.

Medical experts point out that it is not at all unusual that an obstetrician-gynecologist of Foster's age would have performed abortions; those experts estimate that about half of those of Foster's age have. Particularly in the years immediately after abortion became legal, most were performed in physicians' offices instead of abortion clinics.

The controversy incited by rabid anti-abortionists has not changed three factors fundamental to Foster's nomination. He continues to enjoy the support of the American Medical Association and the American College of Obste-

tricians and Gynecologists. He remains an expert in preventing teen pregnancy, which is one of the things that attracted President Clinton to him in the first place. And the majority of Americans still support legal abortions.

President Clinton, whom many Americans perceive to be weak, ought to welcome the opportunity to stand up to the Republican Party in support of a nominee like Henry Foster.

*It doesn't matter
how many abortions
were performed by
President Clinton's
surgeon general
nominee. Foster has
done nothing illegal
or immoral.*



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.

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

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 teenage 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 teenage 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."

Mary Schmich



CHICAGO TRIBUNE (ILL) :

February 10, 1995

Surgeon general dispute delivers D.C. doublespeak

Way out here in the boondocks, light years from the alien planet called Washington, D.C., a whole lot of us are having a hard time understanding the Henry Foster fuss.

We are not an organized group. We do not have a lobbying office. We have no phone banks or spokespersons or consultants.

We are so removed from Washington that we can never remember whether to use a comma between Washington and D.C.

We are so far outside the Beltway that we assume Beltway is a department store that specializes in discount belts.

We think a pundit is a scrawny bird best roasted on the spit and served with wild rice.

We are just ordinary people sitting out here in the boondocks sadly marveling that once again the rulers of the most powerful nation in the world are engaged in a cockfight.

You know the way they talk:

Did Bill Clinton's staff properly "vet" the nominee for surgeon general?

**In the roar they
have drowned
out the
essential
question. Would
Henry Foster be
a good surgeon
general?**

Will Bill Clinton's failure to properly vet the nominee doom his re-election chances?

Will abandoning the nominee doom his re-election chances?

Why did Clinton nominate an obstetrician, knowing that in this "political climate" a doctor who had done

even one abortion had done one too many?

Once again, they have reduced the debate to a feud. Not a feud over substance. A feud over political process.

And in the roar they have drowned out the essential question. Would Henry Foster be a good surgeon general?

Out here in the boondocks, we didn't used to spend much time thinking about the surgeon general.

Then C. Everett Koop's anti-smoking crusade made him as famous as a rock star. Joycelyn Elders perked up our ears with Latinate words like "masturbate."

So now we notice surgeons general. And just last week, Henry Foster looked like he'd be a good one. Even many Republicans thought so.

Any good surgeon general is a bully, a bully on behalf of the nation's health. The most urgent health issues in this country right now involve young people and sex.

A lot of people have platitudes on these issues. Foster has programs and plans.

In 37 years as an obstetrician and gynecologist, he has fought to reduce teen pregnancy, infant mortality, sexually transmitted diseases and drug abuse. He has delivered more than 10,000 babies.

And in this long career, he has, by his count, performed 39 abortions.

After abortion was legalized but before the proliferation of abortion clinics, an obstetrician was likely to perform some abortions. It was considered, in the words of the president of the American College of Obstetrics and Gynecology, "part of your responsibility to your patients unless you had moral or religious objections."

Ideally, Foster would not initially have claimed to have performed fewer than a dozen. But the discrepancy is a peripheral issue. The heart of the matter is Foster's work to improve the lives of families.

Yet even before they knew Foster had performed abortions, the anti-abortion groups had their arrows aimed. "Elders Lite!" one group screamed.

Now they have been allowed to hijack Foster's nomination. They should not be blamed for that. They are doing what they believe in.

The blame falls on the politicians who have handed control over to a group that represents a minority of Americans. With a helpless shrug, they have turned over the bank keys to the bandits.

Sen. Nancy Kassebaum, the Republican from Kansas, admitted abortion shouldn't be the "litmus test" in Foster's nomination. "But," she added, "whether the White House or myself or anyone else believes it should be, it is."

It is only because the politicians in Washington allow it to be.

As the debate continues, two things should be remembered. One: Abortion is legal. Two: Most Americans want it that way.

Most Americans also wish fewer women had abortions. They wish fewer young people had sex outside marriage, wish fewer teenagers got pregnant, wish more could envision a future in which getting a job seemed as possible as having a baby.

In other words, most of us out here in the boondocks think like Henry Foster.

EDITORIALS

Defending Dr. Foster, women's privacy rights

THE anti-abortion forces attacking Dr. Henry Foster, President Clinton's nominee to be surgeon general, are attempting to turn the confirmation process into an assault on abortion rights.

If they succeed, they will have demonized a well-qualified physician because he has performed a common, legal medical procedure in caring for his patients. Under their litmus test, most doctors who specialize in women's health automatically would be disqualified from the post.

The White House has been blamed for not releasing sufficient details about Foster's abortion record. But the attack on Foster is not about untimely disclosures, it's about the fact that Foster, an obstetrician-gynecologist, has conducted any abortions at all.

In Foster's 38-year career, he has delivered 10,000 babies and carried out, he says, 39 abortions. He has been a leader in the field of teen pregnancy prevention, emphasizing the importance of abstinence and contraception. He was named a "Point of Light" in 1991 by President Bush for contributions to his community.

These facts don't matter to those who want to end legal abortion in this country. Since the Supreme Court has declared that abortion is a privacy right protected by the Constitution, anti-abortion groups have taken to ostracizing and humiliating — if not threatening — the doctors and the women.

The response of pro-choice Republicans has been disappointing. Sen. Nancy Kassebaum, chairperson of the Senate Labor and Human Resources Committee, supports abortion rights. Yet, instead of countering the attack from anti-choice groups, she is criticizing the White House for mishandling the nomination. Likewise, Sen. Arlen Specter, who is pro-choice, says that Foster may be disqualified if he misrepresented his record. But it is the anti-abortion organizations who have distorted the debate by focusing on one aspect of Foster's career.

More is at stake here than Foster's future in public service. The opponents want to impose their values on a public that supports the right to choose. The attack on Foster is part of the escalating war on women's privacy rights, and it is time the White House and the Senate stood up to those forces.

Doctors Identify With Plight Of Surgeon General Nominee

By CHARISSE JONES

Dr. Hakim Elahi does not know Dr. Henry W. Foster Jr., the President's nominee for Surgeon General, but as he watches the attacks on Dr. Foster by anti-abortion groups, he says questions about abortion would also haunt him if he were ever in that position.

"In my dreams it's there," Dr. Elahi, an obstetrician-gynecologist who heads La Guardia Hospital in Flushing, Queens, said reflecting on one of the highest honors for a doctor in this country. "But I don't want to have to defend myself for abortions I've done in the past. I think it's irrelevant. I don't want to have to apologize for what I have done, legally and conscientiously."

Dr. Foster, 61, acknowledged in an interview on Wednesday night that he had performed 39 abortions during his 38-year medical career, more than he or the White House had previously said. But he also said in the interview, on the ABC News pro-

gram "Nightline" that he hated having to do the procedure.

"I abhor abortions; I abhor war," he said.

Dr. Elahi, 60, was not alone in defending Dr. Foster in interviews yesterday. Other obstetricians and gynecologists around the country said that if abortions were the criterion for being chosen as Surgeon General, almost all would be disqualified, particularly those of Dr. Foster's generation. The need to conduct an abortion in cases when a woman is in danger of dying or when she is having a miscarriage is sometimes part of the job, they say. And thus abortion should not be the litmus test nor a barrier to Dr. Foster's being chosen to steer the nation's health agenda.

"Dr. Foster's worth should not be measured based on the number of abortions he may have provided,"

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said Dr. Allan Rosenfield, dean of the School of Public Health at Columbia University and a professor of obstetrics, gynecology and public health. "I think for a person holding public office to be judged on whether they provide a medical service that is part of their specialty is really outrageous."

Dr. Rosenfield said he was not troubled by Dr. Foster's changing estimate of the number of abortions he had performed. "It should never have been a discussion of numbers," he said. "In fairness to Dr. Foster, any of us asked how many procedures we've done in our specialty would probably be wrong trying to guess." The other doctors interviewed yesterday agreed that the number of abortions Dr. Foster performed should not be an issue.

Dr. Foster earned his medical degree from the University of Arkansas in 1958, and a little more than a decade later, in 1973, the Supreme Court handed down its landmark decision in *Roe v. Wade* legalizing a woman's right to abortion nationally and thrusting thousands of doctors into the new arena of being able to legally terminate pregnancy. Several doctors said it would have been virtually impossible for Dr. Foster to have avoided performing or overseeing some abortion procedures in his practice and as head of the obstetrics and gynecology department at

Meharry Medical College in Nashville.

"Being able to do an abortion, or having done an abortion is part of what ob-gyns, particularly in his era, did," said Dr. George D. Wilbanks, president-elect of the American College of Obstetricians and Gynecologists. "That's just part of an obstetrician and gynecologist's training. I think that's really a moot point in that he has credentials from his leadership in health care. He's been

The medical profession objects to the politics of abortion.

a leader in education. He's an outstanding individual, and has all the characteristics I would want to see in a Surgeon General."

Indeed, the American College of Obstetricians and Gynecologists says a large majority of the 35,000 doctors practicing in those specialties have performed abortions, said a spokeswoman, Alice Kirkman.

Some doctors said the focus should be placed on the number of children Dr. Foster delivered in his 30-year career and his accomplishments in stemming the tide of pregnancy among teen-agers rather than the

number of abortions he may have helped perform.

"This doctor has delivered thousands of babies, but they're not asking him that," said Dr. Irving Rust, an obstetrician and gynecologist, who directs the Bronx Planned Parenthood Clinic. "They're asking him how many abortions he's done."

"It's beautiful to deliver a baby, but the reality is not every woman who gets pregnant wants to have a child, or should have a child. And what we're forgetting completely is abortions are legal."

Many doctors said it was precisely the kind of pressure being put on Dr. Foster that is deterring a growing number of obstetricians and gynecologists from performing abortions.

Many medical schools and residency programs no longer train young doctors in how to perform the procedure.

Although many abortions are now done in specialized clinics rather than in doctors' offices and hospitals, many doctors do not perform the procedure because they are afraid of being stigmatized, or physically harmed, for their actions, every doctor interviewed said.

But Dr. Rust of the Bronx Planned Parenthood Clinic said there was no shame in performing a procedure that one has been trained to do and that a patient needed or asked for. And he urged Dr. Foster not to give up.

"You have to stand and fight sometime," he said. "I'd like to see him fight."

GREGORY FREEMAN URBAN VIEW

Foster Exposes Big-Tent Myth

SOMETHING SINISTER is going on in Washington. That in itself is probably not surprising. Seems something sinister's always going on in Washington.

But this seems more sinister than most. It looks as if a perfectly fine nominee for surgeon general is about to get the shaft because of the efforts of some right-wing zealots.

By all accounts, Dr. Henry Foster Jr. would seem to be a good choice for surgeon general. He has a wealth of experience.



He's a former dean and acting president of Meharry Medical College in Nashville. He founded Meharry's "I Have a Future" program. It's designed to delay sexual activity among teen-agers by building their self-esteem, developing job skills, teaching sexual responsibility, self-control and abstinence. The program was named a "Point of Light" by President George Bush.

President Bill Clinton has said that he wants Foster to lead a campaign to sharply reduce teen pregnancies.

Foster has 38 years of practice under his belt. His nomination has been praised by the American Medical Association, Planned Parenthood and Dr. Louis Sullivan, director of Health and Human Services under President George Bush. He's also received the backing of Tennessee Republican Sen. Bill Frist, though Frist has been wavering in that support in recent days.

That sort of backing would seem to say a great deal about Foster. But it's not enough — or perhaps too much — for the zealots. His support by Planned Parenthood makes some anti-abortionists see red. And instead of looking at his nomination rationally, some are actually dismissing Foster as "Elders lite," a reference to the recently ousted and controversial surgeon general, Joycelyn Elders.

In revised numbers, Foster says that he performed 39 abortions in his career. Most of those, he said, were performed in cases of rape or incest or to save the life of the mother. "I abhor abortions . . . To me, abortion is failure; I don't like failure," Foster said in an

interview on ABC's "Nightline" this week.

That seems to make no difference to the zealots, who seem to care only that he performed abortions. I wonder how many Americans would be willing to have a baby who was the result of a rape.

A major smear campaign is being put on by the zealots to defeat Foster's nomination. The spokesman for one conservative, anti-abortion group went on the radio the other day and, in an effort to draw parallels between Foster and Elders, said that Foster encouraged masturbation as part of his "I Have a Future" program. A check with that program indicated that nothing could be further from the truth.

Stampedes of ignorance such as this, filled with suggestions, innuendoes and downright lies, will make fewer and fewer good people willing to consider government appointments.

When he nominated Foster, the president said, "I'm confident that thoughtful conservatives will have the same view of Dr. Foster as Senator Frist does when they have the same opportunity to review his whole record."

That doesn't seem to be the case. Republicans in Washington seem to be leaning against Foster, largely because of the cries of the zealots.

It would be funny if it weren't so tragic. This is the Republican Party that's boasted of having a big tent, a willingness to include people of different points of view. Yet it's considering the rejection of a man who has performed abortions legally, who professes a dislike for abortion and who seems to be more than qualified for the post. That, to me, says volumes about how open the GOP really is.

I'm hopeful — though not optimistic — that Republicans will look at Foster overall and see that he is a good candidate for surgeon general. Just as it's not wise for the electorate to vote for candidates for office based on just one issue, neither is it wise for Congress to confirm or reject a nominee on just one issue.

Congress should confirm Foster, regardless of his position on abortion. That should not be a litmus test on whether he would be a good surgeon general.

After all, the surgeon general's job is not about abortion; it's about improving the health of Americans. The zealots need to stand aside, allow Foster to be confirmed and let him do the job the president wants him to do.

Foster is right for the job

Surgeon-general nominee should be judged on his whole career; Foster's mainstream record on abortion shouldn't disqualify him

As the debate rages over Harry Foster Jr., President Clinton's nominee for surgeon general, it will be easy to get caught up in a numbers game. Did he perform one abortion? A dozen? Thirty-nine?

But the relevant question here is whether performing even one legal abortion should disqualify a distinguished doctor from serving as surgeon general of the United States.

It should not.

Concentrating on the abortions Foster performed focuses attention on one small piece of his background while ignoring the sum total of his long medical career. He won recognition from former President George Bush for his work to prevent teen-age pregnancies. He has specialized in the prevention of infant mortality. His peers describe him as a brilliant and caring doctor who walks "with both feet on the ground." He has the support of the American Medical Association and the American College of Obstetricians and Gynecologists.

Foster's detractors would like people to believe that his record on abortion puts him on the fringe. In fact, it does not. The head of the ob-gyn national association says a typical doctor in a 30-year practice might perform 60 to 100 abortions. Foster fits easily into that "typical" category.

He is in the mainstream in another way. He accepts that abortion should be available, but wants to see fewer performed. Speaking on "Nightline" recently, he said, "I abhor abortions. I abhor war. To me abortion is failure."

Keeping abortion legal but making it rare represents for most Americans the right answer on the abortion debate. The way to do that is to work hard to reduce unwanted pregnancies, not to ostracize doctors who perform abortions.

Not everything about Foster's nomination has been perfect. President Clinton has demonstrated yet again a failure to do his background work adequately, make an informed choice and be willing to defend it with the strength of his conviction and the power of his office.

But whether Clinton did his homework on Foster is a side issue. There are two central issues here:

1. Should a doctor who performs a legal procedure — one that most Americans agree should be available to women — be disqualified from public office?

2. Will the politicization of public health turn the surgeon general's bully pulpit into a useless echo chamber?

Foster deserves to be confirmed as surgeon general because his experience makes him ideally suited to speak with authority and compassion on teen-age pregnancies, AIDS and sexually transmitted diseases — many of the pressing health concerns facing this nation.

Foster might not be in tune with a Congress bent on refighting the abortion war or with an indecisive president. But he is in tune with Americans who understand fully the difficult choices presented by unwanted pregnancies and abortion and do not rest easy with any of them.

Clinton should stand by Foster

Abortion should not be the litmus test for picking the country's next surgeon general.

Critics are circling around surgeon general-nominee Dr. Henry Foster picking over the number of and reasons for the abortions he has performed. Foster initially said the number was less than a dozen, though Wednesday night he said he had performed 39.

But according to recent "revelations" (code word for the rope that may hang him) Foster supervised a test of an abortion-inducing drug in 1981 at Meharry Medical College.

This feverish scrutiny of Foster's career obscures an important point: None of his professional actions was criminal. He is not a bootlegger, a drug runner or an arms smuggler. He's an obstetrician. According to the College of Obstetricians, the majority of ob/gyn practitioners have performed abortions. Using this as a standard to select a surgeon general would mean that almost no obstetrician could get the job.

As for the drug test, it does not make Foster a mad scientist who advocates abortion. Colleges and universities test a wide variety of drugs all the time. Specific doctors test drugs in their area of expertise.

This helps the pharmaceutical companies assess a drug's safety, and it generates revenues for the schools conducting the tests.

The question to ask about Foster is whether he can be the kind of surgeon general that the country needs. Can he get a handle on American public health? Can he talk about tough issues without triggering indignant cries for his resignation? How good is his "I Have a Future" program, and what can it offer on a national level?

One person who can steer the focus back to these issues is President Clinton. Foster's candidacy is a chance for the president to explain why the nation needs a top-notch surgeon general and why Foster is that person. Whatever the nomination's fate, it should have Clinton's continuous, and aggressive support.

Foster is a medical professional who has worked extremely hard to prevent the need for abortion. He has striven to provide comprehensive medical services, reduce teen-age pregnancy, cut the infant mortality rate and promote prenatal care. Implying anything to the contrary would not only be politically manipulative, it would be a lie.

Ellen GOODMAN



This safe choice has become another target in the abortion war zone.

Why Foster is right for surgeon general

In the scheme of things, Dr. Henry Foster is lucky. It's his nomination that's in jeopardy, not his life.

Foster doesn't need a security guard — yet — to go about his daily practice. No one is picketing his house or targeting his family. It's only his chance to become surgeon general that's under attack. The weapons this time are the fax and the phone. The assault is merely political.

A few years ago, Foster was one of George Bush's thousand points of light. A few days ago, he became Bill Clinton's cautious pick for the bully pulpit from which Janyce Elders was so unceremoniously evicted.

Now it appears that this obstetrician-gynecologist — a man who delivered 10,000 babies, a former dean of a medical school and the force behind a teen-age pregnancy prevention program — also performed abortions in his 30-year practice. This safe choice has become another target in the abortion war zone.

Suddenly, Senator Bob Dole doesn't "like what I hear, what I read." Senator Orrin Hatch said there are "some very troubling things concerning his nomination." Now the pro-life movement, on the basis of a dubious transcript, claims he performed 700 abortions. The president has added an "if" to his support for the Tennesseean: "if

the facts are as I understand them to be."

Foster is losing his hold on this job. He is sliding down the verbal slippery slope that is greased so regularly by extremists in the pro-life movement.

On their slope, doctors who perform abortions are "abortion doctors" as if they were a species beyond the medical pale. "Abortion docs" are further marginalized as "abortionists" with the M. D. excised altogether. Finally they are branded as "murderers."

Through this subtle process a doctor is turned into a demon. At the very end of this slope, the bodies of Drs. David Gunn and John Britton are found in Pensacola, Fla., and two women are assassinated in Brookline, Mass.

Others doctors go to work wearing bulletproof vests and go to sleep with rifles by their beds. Many are simply scared off.

But no one has yet called Foster a "murderer." At least not in public. Nor has his name been added to the hit list of the "Deadly Dozen" distributed last month — complete with names and addresses — by the American Coalition of Life Activists.

But the push to disqualify this man from public service because he performed abortions is another attempt to make doctors outcasts. It's part of the effort to make abortion a pariah medi-

cal service, illegitimate if not illegal. It's part of the plan by opponents to target what they see as the "weak link" in abortion rights — the 3,000 or so doctors who perform most of the 1.5 million abortions a year.

If Foster is banned because he performed a legal medical procedure, then what about the others? The doctors, the nurses, the counselors, the clinic workers, indeed, the women who have had abortions? They would all, as pro-choice leader Kate Michelman said, be branded with the same scarlet "A."

I am uncomfortable with those who defend Foster because he only performed a few abortions or because he did them for the "right" reasons — for the health of the mother, for rape or incest. But if he has become a target, it does show the narrowness of this litmus test, the extremism of opponents. What would you think of an ob-gyn who had refused to save the life of the pregnant woman?

As head of the public-health service, the surgeon general is in the business of prevention. Public-health workers aren't satisfied patching and mending; they are the ones who go to the source of the problem.

In this case the source of the problem is unwanted pregnancy, especially teen-age pregnancy. The campaign he's been assigned to wage by the pres-

ident is against teen-age pregnancy. It's where Foster has spent his energy, in a program called appropriately "I Have a Future."

Doctors of Foster's generation are old enough to remember when women died from illegal abortions. They are old enough to have seen both the need for this choice and the sorrow of facing such a choice.

It's not a cliché, but a lifetime of experience, that prompts such a man to say of abortion: "My wish is that it be safe, legal and rare." It's what most Americans wish.

We live in an era when doctors are being threatened and killed. Their names are on wanted posters. Their clinics are on terrorists' maps. Yet politicians still believe they can appease the people in this increasingly radical movement.

Now Foster, a "safe choice," a man who made his mark working to reduce teen-age pregnancies, is under attack. And now we will find out which politicians have the courage to defend one doctor from the folks who make up the hit lists.

ELLEN GOODMAN writes for *The Boston Globe*. Her column is distributed by the *Washington Post Writers Group*.

Clarion Ledger Jackson, MS 2/09/95

Foster

Nominee should be judged fairly

The protest against President Clinton's selection of Henry Foster Jr. as U.S. surgeon general because he performed some abortions plays to the politics of the matter.

He also has delivered some 10,000 babies.

The fact of the matter is, as a working physician, teacher and administrator, Foster is well rounded and can speak with experience on a variety of health topics.

His confirmation should hinge on other criteria than political posturing to vocal anti-abortion groups.

Clinton should stand behind Foster's nomination

The Denver Post 2-9-96

Some anti-abortion groups are mounting a campaign against President Bill Clinton's nominee for U.S. Surgeon General, Dr. Henry Foster Jr., because he has failed their single-issue test. But Clinton should stand behind what seems like a well-qualified candidate.

Foster is no apologist for teenage sex, as his predecessor, Dr. Joycelyn Elders, was sometimes accused of being. Indeed, he has effectively preached sexual abstinence as by far the wisest and safest choice for teenagers.

But the Tennessee gynecologist and obstetrician is also realistic enough to know that not all young people will heed that advice and has also supported making information about contraceptives available to fight teen pregnancy and disease.

Foster has thus doubly shown that he understands that the best way to reduce the need for abortion is to *prevent* unwanted pregnancies in the first place. Indeed, Foster's work to curb teenage pregnancies caused him to be honored as a "Point of Light" by former president George Bush.

Foster, 61, has shown his own dedication to the "right to life" by delivering 10,000 babies. Along the way, he has performed — by his own account — about a dozen abortions, or about one abortion for every 800 pregnancies he supervised.

Some of those cases, according to Foster, were necessary to save the life of the mother. The others involved rape or incest. Those are exceptions permitted by even the most restrictive anti-abortion policies — such as the Hyde amendment, which bars the use of federal funds to pay for abortion *except* in cases of rape, incest or where the life of the mother would be endangered by carrying the fetus to term.

House Republicans, knowing a political minefield when they see it, wisely left the abortion issue out of their highly publicized "Contract with America." Senate Republicans — who must decide whether to confirm Foster — would be equally

wise to judge him on his professional qualifications rather than by an anti-abortion litmus test. But do they really want to put their party on record as wishing to outlaw abortion *even when it is necessary to save the life of the mother*? Does the GOP really plan to argue that even victims of rape and incest should be required to bear the fruit of such brutal attacks to term?

The charges raised against Foster to date do not seem to be convincing. Anti-abortion groups have circulated a transcript from a 1978 meeting of an ethics advisory board to the former U.S. Department of Health, Education and Welfare quoting him as saying, "I have done a lot of amniocentesis and therapeutic abortions, probably near 700."

Foster, while admittedly present at the meeting, denies having said that and suggests the statement may have been made by another participant. But even if he had made such a statement 15 years ago, it would not necessarily refute his own account that he has performed abortions only in the most extreme cases. Amniocentesis is merely a routine procedure to see if a fetus is developing normally. Even if he had supervised 700 such diagnostic tests, it would be quite possible that only a handful of them preceded an actual abortion that he performed.

Likewise, charges by anti-abortion groups that Foster led a study in the early 1980s to test do-it-yourself abortion drugs are not disturbing. He was chairman of the Obstetrics and Gynecology Department at Meharry Medical College in Nashville at the time the college was chosen to supervise the study, which was financed by the Upjohn Co. Far from trying to hide his role in that research, he published articles detailing the study findings in professional journals.

Unless it can be shown that Foster has misrepresented his record in a major way, he seems well qualified by training, experience and temperament to serve as Surgeon General.

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IN OUR OPINION

SURGEON GENERAL

Don't allow anti-abortionists undue influence

The nomination of Henry Foster Jr. as U.S. Surgeon General isn't really in trouble because he has equivocated about how many abortions he has performed in his 30-year career. Nor is it jeopardized by legitimate doubts about his character.

Rather, Dr. Foster's nomination is in trouble because the fundamentalist Right and its allies in the Republican-majority Congress seek once again to force their agenda on the rest of the country — and to force a Democratic president to cede his authority to fill a high-ranking position.

Anti-abortion activists cite documents purportedly showing that Dr. Foster directed a study in the 1980s of drugs that would let women induce their own abortions. The evidence of the extent of his participation isn't as clear as these opponents claim, but the point remains: Abortion may be controversial in this country, but it is not illegal, nor should it be.

So far, President Bill Clinton has stood

by his nominee. He should continue to do so, even if he ultimately loses the nomination battle. Public support for Dr. Foster now would put activists on the Right on notice that the president of the United States won't roll over every time they frown. If, though, the president does plan to waffle, he might as well cut Dr. Foster loose now and spare him further embarrassment.

When President Clinton nominated Dr. Foster to replace Joycelyn Elders — who was shoved aside herself for being too controversial — he selected a candidate with a distinguished record of public service. Senate Republican Leader Bob Dole acknowledges that Dr. Foster has "done a lot of good things," including strenuous efforts to deal with teen pregnancy.

It would be a serious mistake to blow Dr. Foster's nomination out of the water now, because of an over-hyped, over-politicized issue that does not truly reflect on his abilities, his character or his qualifications to become Surgeon General.

Painful process for Foster

IT is flatly agonizing to see one of Nashville's most respected professionals and community leaders, Dr. Henry Foster, become the victim of character assassination.

The day after President Clinton named Foster as his nominee for surgeon general, some anti-abortion groups began picking him apart.

One group said that Foster had performed "nearly 700 amniocentesis and therapeutic abortions." Another said that Foster had been involved with an experimental self-abortion study in the early 1980s.

The White House has maintained that Foster has performed about a dozen abortions in the span of his career, and that most of those pregnancies were the result of rape or incest, or threatened the life of the woman.

Worse yet, the vastly different characterizations of Foster's career have led to questions about this man's veracity and his honor.

Those in Washington and throughout the nation who hear the reports — both pro and con — on Foster may not know whom to believe. There should be no doubt in this state. And there should be no doubt in Tennessee's congressional delegation.

Fred Thompson said this week that he had not met Foster. That's too bad for both of them.

Still, Thompson and the nominee are bound to have scores of mutual friends, people throughout this community who have worked with Foster, who can vouch for his high personal and professional standards.

And Bill Frist, as a fellow physician, has known Foster for years. He is certainly well aware of Foster's contributions to Meharry Medical College, to

Frist, Thompson can play crucial role

health care, and to this community.

These two Tennessee senators have a responsibility to assure their colleagues in the Senate that Foster is an honest man, whose character and integrity are beyond reproach.

Frist could play a particularly crucial role. He now sits on the Senate's Labor and Human Resource Committee — the committee that will hold hearings on the Foster nomination. And as the Senate's only physician, any comments that he might make about the practice of an obstetrician/gynecologist, and the likelihood of an ob/gyn having to terminate a pregnancy would be especially important.

All of the questions about Foster's medical practice should be answered in the Senate committee hearing. But those questions can be asked and answered without impugning the character of this distinguished, gracious and caring man.

Tennessee's two senators can help their colleagues explore Foster's background without subjecting him to ridicule. If they accomplish that, they will have done this entire nation a great service. ■

OUR OPINION

Don't judge Foster on one issue

Social conservatives who are rushing to judgment on President Clinton's nomination of Dr. Henry Foster Jr. to succeed Dr. Joycelyn Elders would do well to pause, take a deep breath and recall a name from the not-so-distant past — Robert Bork.

When he was nominated to the U.S. Supreme Court in 1987, Bork was savaged by liberals who focused on a few of his most controversial legal decisions and writings while ignoring the bulk of what was a distinguished judicial record. His nomination was defeated by a Democratic-controlled Senate that expanded its confirmation role beyond what was intended by the Constitution by rejecting an otherwise qualified nominee on narrow philosophical grounds.

Today, the shoe is on the other foot. There's a Democrat in the White House and the Senate is controlled by Republicans, many of whom seem fixated on the fact that Dr. Foster has performed a number of abortions over 35 years of practicing medicine.

While Dr. Foster's unclear record on abortion is a part of the confirmation equation, it is only a small part. The Senate's 45-member anti-abortion bloc would be better served to look at the totality of Dr. Foster's record and perhaps even celebrate the fact that Clinton is replacing the unfocused, rambling and generally missionless



Foster

Elders with a doctor who actually recognizes a national health problem when he sees one.

Dr. Foster, the acting director of Meharry Medical College in Nashville, has spent a good portion of his career in the trenches of the war against teen-age pregnancy. He is best known for Meharry's successful "I Have a Future" program, which teaches teen-agers in two Nashville housing projects to delay sex and childbearing. President Clinton has asked Dr. Foster to lead the administration's campaign against teen pregnancy.

After two years of Dr. Elders careening from one issue to the next, and all of them being basically inconsequential to the health of most Americans, it would be refreshing to see a Surgeon General who has some credibility on a topic of national importance. There are few problems more vexing than the epidemic of teen pregnancy, which is related to other social problems such as juvenile crime, welfare reform and high-school dropout rates. (See related editorial and Tim Giago's column on this page.)

Not everyone will agree with all of Dr. Foster's stands on abortion, contraceptives or sex education. But at least he would come to the office with a specific mission and credentials to match.

Dr. Foster deserves to be judged on the totality of his medical experience and the strength of his commitment to public health. If that totality is weak, so be it. But don't "Bork" a nominee on a single issue.

Clinton should stand behind Foster's nomination

The Denver Post 2-9-95
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But the Tennessee gynecologist and obstetrician is also realistic enough to know that not all young people will heed that advice and has also supported making information about contraceptives available to fight teen pregnancy and disease.

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Some of those cases, according to Foster, were necessary to save the life of the mother. The others involved rape or incest. Those are exceptions permitted by even the most restrictive anti-abortion policies — such as the Hyde amendment, which bars the use of federal funds to pay for abortion except in cases of rape, incest or where the life of the mother would be endangered by carrying the fetus to term.

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Unless it can be shown that Foster has misrepresented his record in a major way, he seems well qualified by training, experience and temperament to serve as Surgeon General.

If Foster's appointment hinges on the right number of abortions or the right kind of abortions, it is still a litmus test on the right to perform abortions.

Boston Globe; 2-9-95

The demonization of a doctor

ELLEN GOODMAN

In the scheme of things, Dr. Henry Foster is lucky. It's his nomination that's in jeopardy, not his life.

Foster doesn't need a security guard - yet - to go about his daily practice. No one is picketing his house or targeting his family. It's only his chance to become surgeon general that's under attack. The weapons this time are the fax and the phone, the press release and the media. The assault is political.

A few years ago Foster was one of George Bush's thousand points of light. A few days ago he became Bill Clinton's cautious pick for the bully pulpit from which Joycelyn Elders was so unceremoniously evicted.

Now it appears that this ob-gyn, a man who delivered 10,000 babies, a former dean of a medical school and the force behind a teen-age pregnancy prevention program, also performed abortions in his 30-year practice. This safe choice has become another target in the abortion war zone.

Suddenly Sen. Bob Dole doesn't "like what I hear, what I read." Sen. Orrin Hatch says there are "some very troubling things concerning his nomination." Sen. Trent Lott thinks "it is in serious trouble." Now the anti-abortion movement, on the basis of a dubious transcript, claims he performed 700 abortions. The president has added an "if" to his support for the Tennesseean: "if the facts are as I understand them to be."

Foster is losing his footing, his hold on this job. He is sliding down the verbal slippery slope that is greased so regularly by extremists in the anti-abortion movement.

On their slope, doctors who perform abortions are labeled "abortion doctors" as if they were a species beyond the medical pale. "Abortion docs" are further marginalized as "abortionists" with the MD excised altogether. Finally they are branded as "murderers."

Through this subtle process a doctor is turned into a demon. At the very bottom of the slope are found the bodies of two doctors in Pensacola, Fla., and two clinic workers in Brookline, Mass. Now, other doctors go to work wearing bulletproof vests and go to sleep with rifles by their beds. Many are simply scared off.

No one has yet called the dignified 61-year-old Foster a "murderer." At least not in public. Nor has his name been added to the hit list of the "Deadly Dozen" doctors distributed just last month - complete with names and addresses - by the American Coalition of Life Activists.

But the push to disqualify this man from public service because he performed abortions is another way to make doctors outcasts. It's part of the effort to make abortion a pariah medical service - illegitimate if not illegal. It's part of the plan by opponents to win by intimidation. To target what they see as the "weak link" in abortion rights - the 8,000 or so doctors who perform most of the 1.5 million abortions a year.

If Foster is banned from public office because he performed a legal medical procedure, then what about the others? The doctors, the nurses, the counselors, the clinic workers, indeed, the women who have had abortions? They would all, as prochoice leader Kate Michelman said, be branded with the same scarlet "A."

I am uncomfortable with those who defend Foster on the grounds that he only performed a few abortions or that he did them for good reasons - for the health of the mother, for rape or incest. If his appointment hinges on the right number of abortions or the right kind of abortions, it is still a litmus test on the right to perform abortions.

As head of the Public Health Service, the surgeon general is in the business of prevention. Public health workers are the medical people who go to the source of the problem.

In this case the source of the problem at



DOROTHY AHLE ILLUSTRATION

the front of national consciousness is unwed teen-age pregnancy. This is where Foster has spent his energy, in a program called, appropriately, "I Have a Future." It's the campaign he's been assigned to wage by the president.

Doctors of Foster's generation are old enough to remember when women died from illegal abortions. They are old enough to have seen the need for this choice and old enough to have seen the sorrow of facing such a choice. It's not a cliché, but a lifetime of experience, that prompts such a man to say of abortion: "My wish is that it be safe, legal and rare."

This is what most Americans wish. How, then, did Foster become such a tempting target?

We live in an era when doctors are being threatened and killed. Their names are on wanted posters. Their clinics are on terrorists' maps. Yet politicians still believe they can appease the people in this increasingly radical movement.

Now Henry Foster, a "safe choice," a man who made his mark working to reduce teen-age pregnancies, is under attack. And now too we will find out which politicians have the courage to defend one doctor from the folks who make up the hit lists.

Ellen Goodman is a Globe columnist.

Good medicine from Dr. Foster

The antiabortion movement is working to have the nomination of Dr. Henry W. Foster as surgeon general "shot down," an unfortunate term in an era when doctors are being murdered for performing a constitutionally protected medical procedure.

As an obstetrician-gynecologist for 30 years in Nashville, Foster delivered more than 10,000 babies and performed an unspecified number of abortions. He has been active in Planned Parenthood. That's enough to get Gary Bauer of the Christian Right's Family Research Council to call him "Elders Light," after his deposed predecessor, Joycelyn Elders, and to urge Republicans to "go to the mat" to oppose him.

Foster says he wants to use the surgeon general's office as a bully pulpit on the importance of preventing teen-age pregnancies. With all of the bleating from conservatives about unwed teen mothers, the Senate Republicans charged with confirming his nomination should be cheering that idea. Foster's "I have a Future" program in Nashville encourages young people to practice abstinence,

develop job skills and gain some self-respect, but to use a condom if they do become sexually active. These are common-sense alternatives to the unwanted pregnancies that abortion opponents say they want to avoid.

It matters little how many abortions Foster has performed. The current press obsession with the numbers - reports have ranged from one to less than a dozen to perhaps hundreds - is being fanned by opponents who want to trip him up. In a pattern of feeding frenzies we've seen - from whether Bill Clinton inhaled to whether George Bush was "out of the loop" on Iran-Contra - the sin becomes not the action itself but whether the public figure has been "forthcoming" about it.

The Clinton administration is said to be wary about turning the Foster nomination into a "litmus test" on abortion. Why not allow Foster's opponents a chance to stand foursquare against a woman's right to choose? A confirmation battle on those grounds would not place them in the mainstream of American opinion.

Dr. Foster and teen pregnancies

It is encouraging that President Clinton's nominee to succeed the fired Dr. Joycelyn Elders as surgeon general is an obstetrician-gynecologist who has been in the forefront of the nation's fight against teen pregnancies.

In tapping the 61-year-old Dr. Henry Foster Jr., who has been dean and acting president of Meharry Medical College, Mr. Clinton has served notice that a national campaign to combat teen pregnancies, which he mentioned in the State of the Union message, will be one of the appointee's top concerns.

But the nomination is already embroiled in controversy because the White House waited until a day after last Thursday's announcement to reveal that Dr. Foster performed fewer than a dozen hospital abortions, mostly to save the mother's life or in cases of rape or incest. An unspecified number apparently were elective abortions. The White House Tuesday said Dr. Foster was going over his records to provide precise information.

And opponents of his nomination revealed Tuesday that Dr. Foster headed research in the early 1980s on a drug to induce early abortions.

The White House said it was aware when it nominated Foster of his abortion-related work. Yet withholding its knowledge of that work was another example of bad judgment by the Clinton administration. With egg on its face, the White House sought to offset criticism from conservatives by focusing on the 10,000 babies Dr. Foster delivered during a career of nearly 30 years and his work to promote abstinence among teen-agers. But anti-abortion groups and their supporters in Congress mounted a campaign against Dr. Foster.

In the unfolding debate it is important to keep in mind that the main reason he was nominated was the program he founded to fight teen-age pregnancy in the housing developments of Nashville, Tenn. At the heart of his "I Have a Future" program is getting

across to kids that it is in their best interest to delay sexual activity.

The Nashville effort focuses on building self-esteem, developing job skills, learning self-control and dealing with conflicts in relationships. Twice a week, children also can get physical exams, screening for sexually transmitted diseases, pregnancy tests and contraceptives.

Another aspect of Dr. Foster's career being targeted by conservatives is his long ties to the Planned Parenthood Federation of America, which provides abortion counseling. Gary Bauer, president of the conservative Family Research Council, called Dr. Foster "Elders Lite" and said he hoped senators would "go to the mat" in opposing his nomination.

But Senate Majority Leader Bob Dole, while criticizing the White House's handling of the nomination, which he feels is in jeopardy, said Dr. Foster has "done a lot of good things" on teen-age pregnancy and should be given a fair hearing.

In the forefront of those strongly supportive of Dr. Foster are the American Medical Association, Dr. Louis Sullivan, secretary of the Department of Health and Human Services under President Bush, and Sen. Bill Frist, R-Tenn., a Nashville transplant surgeon.

Dr. Foster brings to the high-profile but minor federal post experience in dealing with the problems of pregnant teen-agers in their surroundings. The purpose of the neighborhood clinics he founded in Nashville is to prevent pregnancies by making abstinence the central message.

In the Senate's nomination hearings, such questions as the abortions performed by Dr. Foster and his association with Planned Parenthood must be weighed fairly in the perspective of a medical career marked by decades of community leadership.

2/8/95 Times Picayune

FOSTER NOMINATION

St. Paul Pioneer Press, 2/8/95

Defy the extremists; stand by nominee

The social ultraconservatives assailing Dr. Henry Foster's nomination as surgeon general demonstrate a commitment to the extremism of anti-abortion politics. Common decency, be hanged.

The White House must stand up to this assault and allow the nomination to be considered on Foster's merits to serve the president as a physician, administrator and leader on public health policy.

For its part, the White House could have helped itself and Foster's prospects by talking through his background in absolutely forthright terms with Senate leaders. The White House should have known that Foster, an obstetrician-gynecologist, would draw immediate fire because in the course of his practice he has performed abortions. Once again, the White House underestimated the fervor of its opposition.

Never mind that Foster is noted for working with pregnancy prevention programs or has delivered 10,000 babies during a 30-year medical career. The far right was bound to zero in, demonizing Foster in order to advance a narrow ideological agenda against sexuality education, birth control and abortion for any reason.

In the twisted ways of Washington, the central issue here is something other than Foster or his qualifications to be surgeon general. The issue is whether the hard right will score a guerrilla war victory over mainstream governance. That can be accomplished by continuing to terrorize the administration until it withdraws the Foster nomination before confirmation hearings. Or the extortion plot can play out in the Senate, where other Clinton nominees were chopped to pieces even under Democratic rule.

The Clinton administration must not cut and run this time. It has a basic obligation to govern, an obligation being challenged by the extremists targeting the Foster nomination as surgeon general.

**White House
must stand
up to assault,
allow
nomination to
be considered
on merits.**

Clinton must stand by his choice

The White House ought to be ashamed for fumbling yet another high-profile appointment. Just the same, President Clinton has no reason to be ashamed of his selection of Dr. Henry Foster Jr. to be surgeon general.

Any connection with abortion is bound to attract controversy these days. Clinton's aides should have been sufficiently sensitive to that political fact of life to try to make certain how many times and under what circumstances Foster performed the procedure — so as to avoid any impression they were trying to mislead Congress or the public.

It should have come as no surprise that Foster performed an occasional abortion during his 30-year career of delivering babies. Many obstetricians do.

But White House aides mistakenly told Sen. Nancy Kassebaum (R-Kan.), chairwoman of a committee that will consider Foster's appointment, that he had performed only one abortion.

In fact, when Foster checked his files, he found the correct number was nearly a dozen,

all of them perfectly legal and most of them therapeutic. His record in that regard is no more a disqualification for surgeon general than a lawyer's representation of controversial clients would rule him or her out to be attorney general.

Ultimately, what matters is the totality of Foster's medical practice and his service to his community. From all accounts, he has been a conscientious physician, a respected educator and the originator of an admired program to reduce teen pregnancies in Nashville. The American Medical Association and the American College of Obstetricians and Gynecologists support his nomination.

A medical professional with Foster's credentials deserves a fair confirmation hearing, not a witch hunt arranged by abortion

foes. He also deserves the unstinting support of the White House, which is notorious for abandoning potentially difficult nominees. Clinton, who campaigned for the presidency as a supporter of women's rights to choose, dares not back away from that principle now.



Associated Press

Henry Foster and President Clinton

Balt. Sun; 2-8-95

Winning by Intimidation

By ELLEN GOODMAN

In the scheme of things, Dr. Henry Foster is lucky. It's his nomination that's in jeopardy, not his life.

Dr. Foster doesn't need a security guard — yet — to go about his daily practice. No one is picketing his house or targeting his family. It's only his chance to become surgeon general that's under attack. The weapons this time are the fax and the phone, the press release and the media. The assault is political.

A few years ago, Dr. Foster was one of George Bush's thousand points of light. A few days ago, he became Bill Clinton's cautious pick for the bully pulpit from which Joycelyn Elders was so unceremoniously evicted. Now it appears that this ob-gyn, a man who delivered 10,000 babies, a former dean of a medical school and the force behind a teenage pregnancy prevention program, also performed abortions in his 30-year practice. This safe choice has become another target in the abortion war zone.

Suddenly, Sen. Bob Dole doesn't "like what I hear, what I read." Sen. Orrin Hatch says there are "some very troubling things concerning his nomination." Sen. Trent Lott thinks "it is in serious trouble." Now the pro-life movement, on the basis of a dubious transcript claims he performed 700 abortions. The president has added an "if" to his support for the Tennessean: "if the facts are as I understand them to be."

Dr. Foster is losing his footing. He is sliding down the verbal slippery slope that is greased so regularly by extremists in the pro-life movement.

On their slope, doctors who perform abortions are labeled "abortion doctors" as if they were a species beyond the medical pale. "Abortion

docs" are further marginalized as "abortionists" with the M.D. excised altogether. Finally they are branded as "murderers." Thus a doctor is turned into a demon. At the bottom of the slope lie the bodies of two doctors in Pensacola, Florida, and two clinic workers in Brookline, Massachusetts. Now, other doctors go to work wearing bulletproof vests and go to sleep with rifles by their beds. Many are simply scared off.

No one has yet called the dignified 61-year-old Dr. Foster a "murderer." At least not in public. Nor has his name been added to the hit list of the "Deadly Dozen" doctors distributed just last month — complete with names and addresses — by the American Coalition of Life Activists.

But the push to disqualify this man from public service because he performed abortions is another way to make doctors outcasts. It's part of the effort to make abortion a pariah medical service — illegitimate if not illegal. It's part of the plan by opponents to win by intimidation. To target what they see as the "weak link" in abortion rights — the 3,000 or so doctors who perform most of the 1.5 million abortions a year.

If Dr. Foster is banned from public office because he performed a legal medical procedure, then what about the others? The doctors, the nurses, the counselors, the clinic workers, indeed, the women who have had abortions? They would all, as pro-choice leader Kate Michelman said, be branded with the same scarlet "A."

I am uncomfortable with those who defend Dr. Foster on the grounds that he only performed a few abortions or that he did them for good reasons — for the health of the mother, for rape or incest. If his ap-

pointment hinges on the right number of abortions or the right kind of abortions, it is still a litmus test on the right to perform abortions.

As head of the public health service, the surgeon general is in the business of prevention. Public-health workers are the medical people who go to the source of the problem. In this case the source of the problem at the front of national consciousness is unwed teen-age pregnancy. This is where Dr. Foster has spent his energy. In a program called appropriately, "I Have a Future." It's the campaign he's been assigned to wage by the president.

Doctors of his generation are old enough to remember when women died from illegal abortions. They are old enough to have seen the need for this choice and old enough to have seen the sorrow of facing such a choice. It's not a cliché, but a lifetime of experience, that prompts such a man to say of abortion: "My wish is that it be safe, legal and rare."

This is what most Americans wish. How then did Dr. Foster become such a tempting target?

We live in an era when doctors are being threatened and killed. Their names are on Wanted Posters. Their clinics are on terrorists' maps. Yet politicians still believe they can appease the people in this increasingly radical movement.

Now Henry Foster, a "safe choice," a man who made his mark working to reduce teen-age pregnancies, is under attack. And now too we will find out which politicians have the courage to defend one doctor from the folks who make up the hit lists.

Ellen Goodman is a syndicated columnist.

EDITORIALS

Message to Clinton: Stand By Your Man

MUCH AS Dr. C. Everett Koop led a highly visible national campaign against smoking, Dr. Henry Foster Jr. could effectively wage a battle against teenage pregnancy — if given the chance.

But anti-abortion forces are seeking to reduce President Clinton's laudable nomination of Foster as surgeon general to the single issue of how many pregnancies the physician has terminated.

*Abortion
foes have
reduced the
surgeon
general
nomination
to a single
issue*

They ignore that in an illustrious 30-year career he was the respected dean of Meharry Medical College in Nashville. They ignore that he is one of the nation's leading authorities on reducing infant mortality and teenage drug abuse.

They ignore that he delivered 10,000 babies. They ignore that he spearheaded a model program to deal with the national crisis of teen pregnancy.

The 61-year-old obstetrician and gynecologist has derisively been called "Elders Lite" by Gary Bauer, president of the Family Research Council, a conservative think tank. Bauer referred to Dr. Joycelyn Elders, the ousted surgeon general whose tenure was marked by controversial statements on legalizing drugs, abortion and, finally, masturbation.

Conservative commentator Patrick Bu-

chanan called Foster "a part-time abortionist" who is "de facto, unqualified to ascend the bully pulpit of surgeon general and lecture as a moral teacher."

Buchanan ignores the fact that far from committing a crime, Foster performed a procedure that most Americans believe should be available and that is a protected, constitutional right. Whether he supervised a dozen abortions, as he says, or more, as right-to-lifers claim, abortions were a minuscule, but highly proper, part of his practice.

Although the Clinton administration has handled some aspects of Foster's nomination with characteristic clumsiness, White House staff blunders should not be used to defeat a man of distinction. Foster could serve the country well, especially in employing the surgeon general's office to speak against teenage pregnancy and in replicating the "I Have a Future" program he founded in two Nashville public housing developments. The program, which now serves about 150 teenagers a week, attempts to stem teenage pregnancies by stressing abstinence, responsibility, conflict resolution and job skills.

In Clintonesque fashion, the president in recent days has shown signs of wavering. But, both in terms of policy and of politics, it would be disastrous for him to wilt before the high-pressure tactics of right-wingers and loudmouth talk-show hosts. Dr. Foster is an esteemed physician accused of nothing more than carrying out one of the duties of his profession. If Clinton folds, both he and the country will be the losers.

Today's debate: THE NEW SURGEON GENERAL
USA Today: 2-7-95

Ability, not abortion, is test of surgeon general

OUR VIEW Henry Foster has
done what thou-
sands of good doctors have done
— provided care for his patients.

In 30 years of medical practice, Tennessee gynecologist and obstetrician Henry Foster distinguished himself by combining conscientious patient care with helping the less fortunate to help themselves.

For that, some want to deny him the job of surgeon general.

Opponents of sex education, teen birth control and abortion are flooding Capitol Hill with condemnations of President Clinton's latest nominee. Not only does Foster support all the things they don't, he actually admits performing abortions.

Foster says he performed fewer than a dozen abortions, primarily to save the lives of the mothers or to help victims of rape or incest.

That is no reason to kill the nomination. As long as the abortions were legal and Foster's accounting is truthful, he deserves to be confirmed.

Foster should not be condemned for doing what committed physicians do every day, ministering to the total health needs of his patients. When the patients are women, that sometimes means abortion.

Most of the more than 35,000 U.S. obstetricians and gynecologists have performed abortions, according to estimates from the American College of Obstetricians and Gynecologists.

Instead of fixating on the number of abortions performed by Foster, how about answering the most pertinent question: Is he qualified to be the nation's public health spokesman?

Yes, if you judge Foster on his medical credentials and community service.

A dean and acting president of Meharry Medical College, Foster has been endorsed by the American Medical Association and ACOG. He's won national recognition and awards for his campaign to reduce infant mortality and to curb teen pregnancy and drug abuse. His "I Have a Future" program encourages young people to delay sexual activity, develop job skills and improve self-esteem.

As surgeon general, Foster says he will continue working to reduce out-of-wedlock pregnancy.

Aren't those the very goals of the people now vowing to kill Foster's nomination? And aren't these the critical problems we want a surgeon general to address?

When Republicans were the minority in Congress, they constantly preached that the ultimate litmus test for presidential nominees should be qualifications, not ideology or politics. Now they are poised to let an aggressive minority toss that standard out the window.

If Foster is qualified, make him surgeon general. But don't eliminate him merely because he did his job as a physician and he did it well.

► Foster controversy, 1A

Judge Foster on Qualifications

If the Senate rejects President Clinton's choice for U.S. surgeon general, it should do so on merit—not for the lame excuse that the nominee has performed abortions.

Yet that is the reason for mounting conservative opposition to Dr. Henry Foster Jr., whom Clinton has asked to lead a national campaign against teen pregnancy.

Foster, acting director of the Meharry Medical College in Nashville, Tenn., has delivered about 10,000 babies during a 30-year career as an obstetrician-gynecologist. He also performed "fewer than 12" abortions, mostly on victims of rape or incest, and when the mother's life was in danger.

Anti-abortion forces are rallying opposition to Foster for performing abortions, and for serving on the board of Planned Parenthood. As a result, Senate Majority Leader Robert Dole (R-Kan.) now says Foster will face "some difficulty."

Too bad. Instead of narrowly focusing on a single issue, Foster's detractors ought to consider his many qualifications. Foster is widely known for his "I Have a Future" program to reduce pregnancy among teens in public housing in Nashville. Preventing teen pregnancy, research shows, is critical to help reduce associated problems, including welfare dependency, child abuse and neglect.

We urge President Clinton to hang tough on Foster's nomination. Whatever one may think about abortion, fact is it's legal. A qualified professional ought not be rejected for public service simply because he provided a legal medical procedure.

Good choice for surgeon general

BY ANY reasonable yardstick, Henry Foster is amply qualified to become the nation's next surgeon general. He deserves to be judged on his merits as a physician and educator. Congressional Republicans trying to turn his nomination into a litmus test on abortion do the cause of public health no favor.

Foster's merits appear to be considerable. He's head of Meharry Medical College in Nashville, Tenn.; has been an obstetrician and gynecologist for 30 years; and developed a widely admired program aimed at teaching inner-city teenagers to postpone sex and childbearing.

He has, in short, just the mix of academic credentials and real-world experience needed for this bully pulpit role. Unless some hitherto unknown blot on his record turns up, the Senate ought to confirm him as President Clinton's choice to succeed the controversial Joycelyn Elders.

Some GOP congressional leaders think they have found that blot in reports that Foster performed

abortions. But Foster estimates the number at "fewer than a dozen," compared to the 10,000 babies he has delivered. And those abortions, he says, were primarily in cases of rape or incest or to save the mother's life — the three circumstances for which even the majority of abortion foes usually make allowances.

Perhaps the president can be faulted for not conveying that information to Congress beforehand; where abortion is concerned, nothing is simple. But this seems to be a forgivable omission. Moreover, it is not as if Foster has been engaged in illegal activity; abortion has been recognized as a constitutionally protected right since 1973. And much of the nominee's public health advocacy work has focused on preventing the need for abortions in the first place.

Clinton, who has an unfortunate history of backing away from nominees when the going gets rough, should stand his ground, lest he once again look as if he lacks the courage of his convictions.



HENRY FOSTER

Surgeon general

The sound selection of Henry Foster Jr.

Faced with a firestorm over his choice for surgeon general, President Clinton kept his cool. He needs to maintain that admirable attitude, as he did Sunday and Monday in statements reaffirming support for his nominee.

Opposition to Dr. Henry Foster Jr. was inevitable. Foster's superior qualifications did nothing to lessen the ardor of critics who immediately lashed out at his failure to conform to their particular definitions of family values. When it was later noted that Foster had performed several abortions, opposition grew. The result is that the nomination is in trouble, for no legitimate reason.

In contrast, there are sound reasons to endorse Clinton's selection. Among them is Foster's success in combatting teenage pregnancy in Tennessee. His means to that end is an after-school program that combines medical services and family-life classes with tutoring and job training. The emphasis is on teenage sexual abstinence, but youngsters unwilling to practice it are given contraceptives. By all accounts, the program has been a success.

Applause for Foster's nomination from the likes of Louis Sullivan, secretary of Health and Human Services under President Bush, is therefore as unsurprising as the criticism. Foster's career includes service as president of a pre-

dominantly black medical college and as a member of a Planned Parenthood advisory board, to say nothing of his successful practice of medicine.

Perversely, Foster's distinguished 30-year record in medicine provokes the most virulent of the overheated opposition. Critics seem as appalled that a gynecologist-obstetrician has performed a few of the medically routine, legal procedures called abortion as they would if he had never delivered babies. Foster says he has performed about a dozen abortions and perhaps 10,000 deliveries. If his abortion record has any relevance at all to his appointment, it is in a proportion no greater than that same 12-to-10,000 ratio.

The real relevance is the ability Foster would display as surgeon general, who in Clinton's sensible view should lead the campaign against teen pregnancy. Foster's ability appears impressive. Perhaps confirmation hearings will show unsuspected flaws, but nothing yet known would justify rejecting the nominee or withdrawing his name.

Senate Majority Leader Bob Dole differs with Foster's philosophy but praises his accomplishments. Moreover, "... we shouldn't shoot down somebody before they've even had a hearing," he said. His colleagues should follow Dole's advice.

Let the good doctor be heard

If Dr. Henry W. Foster Jr. had made a career as an abortion clinic operator, the rush to criticize his selection as the next surgeon general would not seem out of the ordinary.

If he were prominent at one end of the abortion-debate spectrum, President Clinton would be taking the heat he'd asked for by forwarding such a vulnerable nominee to a Republican-controlled Senate quite respectful of the fact that abortion remains anathema to many Americans.

In fact, however, the Tennessee obstetrician-gynecologist, whom President Clinton picked last week to replace Dr. Joycelyn Elders, made a name for himself by delivering babies—thousands and thousands of them—and by preaching abstinence to teenagers in two Nashville housing projects.

By all accounts, he is pretty far from a specialist in abortions, having performed, in his words, "fewer than a dozen" in a 30-year career.

Yet it is the abortions and the fact Foster serves on the board of Planned Parenthood of Tennessee that have inflamed anti-abortion groups and a number of Republican lawmakers altogether too eager to rush to judgment on the surgeon general nominee.

Sen. Dan Coats of Indiana, for one, called Foster "a former abortionist" and predicted a battle over his confirmation. Sen. Trent Lott of Mississippi said, "I

do think it is in serious trouble."

Wait a minute here, senators. Let the good doctor have his day in the legislative hearing room first.

And in keeping with custom on such nominations, let the president have the surgeon general of his choice unless strong evidence emerges to show that he is unqualified.

That Foster performed abortions—most of them, he said, in cases involving rape or incest or danger to the mother's life—ought not automatically disqualify him.

Abortion is a legal medical procedure, after all, despite its opponents' ardent wishes to the contrary. It would be unusual for a veteran physician to be free of any experience with it.

Members of the Senate, where the Foster nomination will survive or die, ought to withhold judgment until after hearings. They should weigh the doctor's total record, too, including the I Have a Future program he started in Nashville to urge teenagers to delay sexual relations and childbearing.

"My view is we shouldn't shoot down somebody before he's even had a hearing," Senate Majority Leader Bob Dole said.

Quite right. If they want to do the fair, responsible thing, critics of Dr. Foster who have zeroed in on his "fewer than a dozen" abortions will hold their fire.

Don't rush to judgment

As soon as President Clinton nominated him to succeed Dr. Joycelyn Elders as surgeon general, obstetrician Dr. Henry W. Foster Jr., acting director of Meharry Medical College in Nashville, was under attack for having performed therapeutic abortions. Thirty-five years of practicing medicine seem to count for naught among the Senate's new 45-member, narrowly focused, anti-abortion bloc.

That is a chilling message. It says, in effect, that the national interest in women's health begins and ends with their wombs and that the value of women's lives and health is subordinate to the value of fetal life and health.

Yet by most accounts, Dr. Foster is well qualified to become surgeon general. He is best known for Meharry's successful "I Have a Future" program, which teaches teenagers in two Nashville housing projects to delay sex and

ON SURGEON GENERAL
Nominee Dr. Henry Foster Jr. should be judged on his overall career and thoughts, not just on a few abortions.

childbearing. President Clinton has asked Dr. Foster to lead the campaign against teen pregnancy.

Therein lies the real controversy — the extent to which contraception becomes a part of sex education. In truth, there has been

much more talk about distributing condoms in public schools than there have been programs to distribute them — or even information about contraception. Talk is about all Dr. Foster, or any other surgeon general, can contribute, when — across America — it is local school boards that decide how to deal with sex education.

Dr. Foster deserves to be judged on the totality of his medical experience and the strength of his commitment to public health. He has viewed his women patients as whole human beings, not just a collection of child-bearing organs. That ought to be a testament in his favor.

CONGRESS AND HENRY FOSTER

Cowardice at his convictions

WHAT do you want in a public servant? Someone who is intelligent enough to have strong convictions and courageous enough to act according to those beliefs?

If that sounds good, you had better tell Congress because something is replacing those obvious attributes when it comes to filling high-profile public jobs.

The main requirement for winning Senate confirmation these days is that a person has never said or done anything that might have upset a special interest group. Inoffensiveness is an asset.

Not inoffensiveness in the sense of being able to disagree without being disagreeable. No. The object is to have lived a low-profile, no-paper-trail life. The goal is to have lived without doing, writing or saying anything — ever — that might ruffle the feathers of some politically active group.

Possessing a resume of J.Q. Milque-toast is particularly important when the word "abortion" blazes onto the scene.

As evidence we offer Dr. Henry Foster Jr.

President Clinton's nominee for the post of surgeon general was widely praised last week. If the endorsements of the American Medical Association and the American College of Obstetricians and Gynecologists weren't enough, he also had the tacit smile of the Bush administration, which had named him one of a "1,000 Points of Light."

Foster was best known for a teen-pregnancy prevention program called "I Have a Future." The unassailable logic and morality behind the idea was that kids

should be taught to delay teen-age sex and child-rearing for their own good. Foster says his first priority in counseling teen-agers is to stress abstinence.

That is undeniably a message America needs to hear.

But America may not get that lesson from Dr. Foster. The reason is that during a career in which he delivered more than 10,000 babies, Foster also terminated fewer than a dozen pregnancies. One could argue that the numbers are in line with the nation's attitude toward abortion: that it should be legally available, but rare.

His actions also reflect the actions of a man who was more concerned with providing his patients with complete medical services than in remaining uncontroversial enough to someday be confirmed to a government post. A post, ironically, from which he could preach a message that would decrease the demand for abortions.

Now that the facts have hit the news, Foster is sinking fast. Senators are falling all over themselves trying to back away from a nominee who shows more integrity than they can stomach. Excuses fly like confetti: The Clinton administration should have told us, they say. We should have been warned that we might be asked to take a difficult position.

But that isn't really the point.

Foster's problem is that he did something out of conscience and conviction that some people disagree with.

He no longer fits the narrow definition of what one must be to pass the scrutiny of the pressure groups that make Congress cower.

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. ■

Naming a new surgeon general

The increasing number of out-of-wedlock teenage pregnancies is one of this country's most disturbing trends. President Clinton's decision to nominate as surgeon general a physician who knows the problem, and has years of experience trying to combat it, therefore, makes perfectly good sense.

The nominee, Dr. Henry W. Foster Jr., a practicing obstetrician/gynecologist and acting president of Meharry Medical College in Nashville, is perhaps best known for a program he developed called "I Have a Future," which stresses abstinence and has successfully steered at-risk teens away from harmful behavior. A member of the Institute of Medicine of the National Academy of Sciences, he is one of the nation's leading authorities on reducing infant mortality and teen drug abuse.

The fact that Foster has performed a handful of abortions over the course of a 30-year career shouldn't surprise anybody. According to the White House, he performed "less than a dozen," primarily in cases of rape, incest or where the woman's life was

endangered, and always in hospital settings. But even if it were a hundred – abortion, after all, is a legal procedure – it ought not be a barrier to the appointment.

What is surprising is how clumsily the White House handled the issue. Knowing, as it surely did, especially after the dismissal of Dr. Joycelyn Elders, that some politicians would try to make an issue of it, the administration should have provided full information from the start. Instead, it seemed almost to be hiding it. Not surprisingly, that alienated the very Republican senators, those who support abortion rights, that the White House needs on its side. Sen. Nancy Kassebaum, who chairs the committee that will consider the nomination, was told by a Clinton aide that Foster had performed only one abortion. How dumb.

Foster deserved better; he has a distinguished record as a physician, as a medical administrator and as the creator of a successful community program. And he deserves better now, both from the Senate and the president.

FIRST AND FOREMOST

He's no Joycelyn Elders

HENRY Foster Jr., the nominee for surgeon general, has a fierce commitment to teen-age pregnancy prevention -- just like Joycelyn Elders, the fired surgeon general.

He approves distributing contraception to youths and he supports abortion rights, just like Joycelyn Elders.

He is an Arkansas native, just like Joycelyn Elders.

Although the Family Research Council was quick to tag Dr. Foster "Elders Lite," he is no Joycelyn Elders. That's a distinction that will prove to be more important than the similarities.

Early indications of Foster's philosophy suggest mainstream America will have less difficulty identifying with his message than it did with the combative Elders.

Elders was right to train her sights on the social and public health dilemmas of unintended pregnancy, particularly among juveniles. Problems arose when her Gatling-gun mouth too often shot wide of the target. Public disapproval fired back at her and the Clinton White House, which gave Elders her walking papers in December.

In Foster, there appears to be an opportunity to refocus national attention on the problem, not the individual

championing the cause.

Rather than a point of contention, the obstetrician-gynecologist from Tennessee is the brilliance behind one of President Bush's "Thousand Points of Light" -- a values-based teen-age pregnancy program for low-income children that stresses abstinence, promotes self-esteem and teaches job skills. The "I Have a Future" program offers contraception, but no abortion counseling.

Foster, a longtime medical educator, is going to need all the charm and persuasive powers he can muster to spearhead a national teen-age pregnancy prevention campaign that will get no new federal dollars. He will have to use the bully pulpit of the Surgeon General's Office to convince the private sector to zero in on a teen-age pregnancy crisis that President Clinton called in his State of the Union address "our most serious social problem."

Because of his bombastic predecessor, he likely will have to bowl over senators at his confirmation hearing.

Foster deserves a chance to offer in detail his own views on abortion and pregnancy prevention programs before he gets smeared with the same brush that defined the Elders' legacy.

Surgical decision

Clinton's nominee for surgeon general is a good one

HENRY W. Foster Jr., the president's nominee for surgeon general, is admirably suited to carry out Clinton's top social priority: leading a national campaign to reduce teen pregnancy.

But first he's got to get past the contraception question.

Foster, 61, is an obstetrician-gynecologist on sabbatical from Meharry Medical College, where was medical school dean and acting president. He directed Meharry's "I Have a Future Program" — one of George Bush's official "points of light" — which works with children 10 to 17 in Nashville public housing projects, helping them develop job skills, learn about family responsibilities and avoid drugs, alcohol and premature parenting. One study of the program showed dramatic success in reducing pregnancy.

Foster's other priorities are reducing the incidence of low-birth-weight babies, illicit drug use, AIDS and smoking.

But some conservatives aren't willing to accept any surgeon general who advocates anything other than cold showers and long walks. "I Have A Future"

counselors teach "sexual responsibility" — condoms and contraceptives — as well as abstinence.

Furthermore, Foster serves on Planned Parenthood boards, supports abortion rights, and performed "fewer than a dozen" abortions in 30 years of practice.

In announcing Foster's nomination, Clinton tried to defuse the condom conundrum, saying that "there is no national policy" on contraception use; all that should be decided locally.

Foster's already been called "Elders Lite," but his views are mainstream in the medical community. And unlike the terminally truthful Joycelyn Elders, ousted for saying masturbation doesn't lead to hairy palms, Foster is capable of "no comment."

At this point, the Condoms of Doom crowd wouldn't reappoint C. Everett Koop as surgeon general. He advocated the use of condoms to prevent the spread of AIDS.

It's up to rational members of Congress to seize control of the discussion about Foster's qualifications. So far, he looks like a good fit for the job of fighting the teen pregnancy epidemic.

Hartford Courant; 2-6-95

Dr. Foster is eminently suitable for the job

President Clinton, by nominating Dr. Henry W. Foster Jr. for the post of surgeon general, intends to keep the public health spotlight on preventing teenage pregnancies. The rapid increase of out-of-wedlock births to young mothers has been a major contributor to social problems.

The president has picked someone who has run a highly successful program for teenagers in Nashville, Tenn. Dr. Foster's "I Have a Future" project has dramatically decreased the number of teenage pregnancies while increasing job skills, sexual responsibility and peaceful conflict resolution.

His nomination has raised an instant stir, however. He is being attacked for having performed legal abortions, for his membership on the board of directors of Planned Parenthood of Tennessee. He is being criticized for his program offering free physical exams, screening for sexually transmitted diseases, pregnancy tests and contraceptives at two Nashville housing projects.

The morality police have pledged to wage a

fierce fight against Dr. Foster's confirmation in the Senate.

The Republican majority surely understands that a president is entitled to nominate a surgeon general he agrees with. If the nominee were grossly unsuitable, Senate rejection would be understandable. But Dr. Foster is eminently suitable for the job.

The surgeon general has few direct powers but can use the office as a bully pulpit. The government's campaign against cigarette smoking was launched in 1964 by Surgeon General Luther L. Terry and carried on with vigor and success by Dr. C. Everett Koop, who served under President Ronald Reagan.

Mr. Clinton's first surgeon general, Dr. Joycelyn Elders, offended many people by being strident. Dr. Foster is said to have the diplomatic skill to speak his mind while staying in the mainstream. Those who want to reduce teenage pregnancy and violence should not hesitate to support this nominee.

Assurances Needed From Clinton Nominee

Henry Foster Jr., the doctor whom President Clinton nominated to succeed Dr. Joycelyn Elders as U.S. surgeon general, has been described as a mild-mannered consensus-builder. He also has a background in education and public health. Those qualifications should serve him if he is confirmed for his new position.

Dr. Foster said one of his goals would be to promote sexual abstinence and sexual responsibility among teen-agers. He is the originator of the "I Have a Future" program, founded in 1987 in Nashville's subsidized public housing projects. The program is designed to help teen-agers make wise choices, avoiding pregnancy and continuing their education. It teaches them to believe in themselves and to behave responsibly. It also helps them acquire job skills. It provides tutoring, family life classes and medical services, including the distribution of contraceptives in some circumstances.

Dr. Foster has been a chairman, a dean and an acting president at Meharry Medical College in Nashville. He said that in addition to attacking the epidemic of adolescent pregnancies, his priorities would include assuring "healthier starts for our children," AIDS prevention and discouraging tobacco use, particularly in young people.

Dr. Foster's appointment is being opposed by some conservative groups that don't like his work with Planned Parenthood of America and his support of individual choice on abortion, as well as the contraceptive element of the "I Have a Future" program. Complaints have come from some Republicans in Congress that the White House mishandled the nomination by not immediately disclosing details about abortions that Dr.

Foster had performed. Dr. Foster said Friday that in addition to delivering 10,000 babies over three decades, he performed fewer than a dozen abortions, mostly to save the woman's life or to end a pregnancy caused by rape or incest.

Mainstream medical groups, including the American Medical Association, have praised his selection.

The surgeon general should be a person with a strong commitment to public health and a broad knowledge of the nation's health problems. Dr. Foster shouldn't be condemned for his efforts to reduce teen-age pregnancies nor disqualified for performing a few abortions over a long career. If he can convince the Senate that he understands the major public health issues and is capable of working hard to deal with the health problems of the whole population, his nomination should be looked at favorably.

Medical chief

In recent years, the nation's surgeons general have emphasized preventive health care strategies, from castigating cigarette smoking to halting the epidemic of teen-age pregnancies. It appears Dr. Henry W. Foster Jr., President Clinton's choice to be the new surgeon general, would continue the effort.

When the surgeon general speaks, he or she has a national stage. He or she can set an agenda. It's encouraging that the nominee wants to continue to focus on the tragedy of the nation's teen-age pregnancy rate and related infant mortality. So did Joycelyn Elders, the former surgeon general, who was fired last month after her remarks about teaching children masturbation. Elders' comments were just the latest in a long line of intemperate and confrontational remarks which revealed more about her

lack of political sophistication than her medical expertise.

Foster, 61, will have to display more discipline as he is questioned for confirmation. He will need to convince senators that his already demonstrated strengths can help the country tackle national health issues.

An obstetrician-gynecologist, Foster is acting director of Meharry Medical College in Nashville. He founded the institution's "I Have a Future" program that tries to delay teen-agers' sexual activity and childbearing by teaching them self-control, self-esteem, good relationships and by developing job skills. The program, which is being copied elsewhere, has resulted in fewer pregnancies and more youths continuing their education.

EX-TUSKEGEE DOCTOR MAY GET TOP HEALTH ... 02-02-95

Birmingham News

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Keywords: SURGEON GENERAL NOMINEE, HENRY FOSTER JR.

Correction Date:

Correction:

Image:

EX-TUSKEGEE DOCTOR MAY GET TOP HEALTH POST WOULD REPLACE
JOYCELYN ELDERS

Byline: Jeffrey Hansen News staff writer

Hattie King spoke for much of Tuskegee when she heard that Dr. Henry Foster Jr. was to be nominated by President Clinton today as surgeon general of the United States.

"Oh, fantastic," she said. "That's my doctor. All of Tuskegee knows him."

Although gone from Alabama for nearly two decades, Foster left behind a web of affection and pride.

"Hank" Foster, a native of Pine Bluff, Ark., came to Macon County for his first post after finishing University of Arkansas medical school. He became chief of the obstetrics service at John Andrew Memorial Hospital in Tuskegee - which has since closed - and for 15 years he delivered babies for women from at least a dozen Alabama counties.

Now an obstetrician-gynecologist in Nashville, Foster drew President attention by working to reduce teenage pregnancy in Nashville housing developments. He founded a program that distributes condoms to youths, and he supported an organization that provides abortion counseling.

The administration is convinced that Foster will be far less provocative than the person he is slated to replace, Dr. Joycelyn Elders. Foster's selection, which is subject to Senate confirmation, was expected to be announced today, White House sources told The Associated Press.

He is a former dean and acting Doctor, Page 12A Page 1A president of Meharry Medical College in Nashville, one of four historically black medical schools in the United States.

Foster, 61, founded Meharry's "I Have a Future" program, aimed at delaying sexual activity among teenagers by building self-esteem, developing job skills and teaching sexual responsibility, self-control and how to deal with conflicts in relationships.

The 7-year-old program, operating out of two Nashville housing projects, also offers comprehensive health services, emphasizing primary health care, physical exams, screening for sexually transmitted diseases, pregnancy tests and distribution of contraceptives.

Foster also has been on the advisory board of Planned Parenthood of Middle Tennessee, an organization whose services include abortion counseling.

In Tuskegee, Foster "was a here," said Mrs. King, who was

Tuskegee city cashier and one of Foster's patients when he first arrived in the late 1950s. "Everybody here - I mean by that all the pregnant women - just adored him."

Tuskegee Mayor Johnny Ford especially remembers Foster for one day in 1971 when Ford paced the floor at the hospital, back and forth.

"He delivered our first son, John John," Ford said.

Various people in Tuskegee describe Foster as having plenty of life and vitality, being down-to-earth, personable, good with patients and always professional.

"He had a concern for people of all races, colors, creeds, but particularly for people of poverty," Ford said. "He delivered so many babies into the world."

Foster's uncle, William B. Hill, lives in Tuskegee. Hill said he helped urge Foster, when the time was ripe, to leave Tuskegee and further his career.

"I pushed him to go on, because I had come up (myself) from the extension service and gotten my Ph.D.," said Hill, who earned a doctorate from the University of Wisconsin.

While they lived in Tuskegee, Foster and his wife, St. Clair, were members of Greenwood Missionary Baptist Church. Foster also flew his own Cessna airplane, Ford said.

Mrs. King, who now is Tuskegee city clerk, said she wished Foster all success in his announced goal of reducing teenage pregnancies as surgeon general.

"That's a big problem here," she said. "We have a high percentage of teen pregnancies in Macon County."

The Associated Press contributed to this story.

Foster a wise choice

THE chain of talent in the leadership of Meharry Medical College in recent years continues to gain national attention.

Speculation concerning the imminent appointment of Dr. Henry Foster, former acting president of Meharry, as the nation's next surgeon general is another emphatic statement about the abilities of Meharry's hierarchy.

Dr. David Satcher, former president of the school who first conceived the merger of Metro's General Hospital with Meharry, was selected to head the national Centers for Disease Control in Atlanta. Now, Foster's resume may land him in one of the most important positions in the health-care system nationwide.

If he is indeed chosen, Foster would replace Joycelyn Elders, whose term was marked more by her controversial remarks than actual accomplishment.

Foster, who has been on sabbatical from Meharry since June to serve a fellowship with the Association of Academic Health Centers, would be an inspired choice.

Foster is particularly attuned to the problems of teen pregnancy, one of the principal issues facing U.S. health-care

Excellent physician and effective communicator

leaders. An obstetrician/gynecologist, Foster was dean of the Meharry school of Medicine and began a teen pregnancy prevention program. That project, named "I Have a Future," focused on positive choices for at-risk teens. The country could use Foster's expertise in the bully pulpit of the surgeon general's post.

But beyond those qualifications, Nashvillians know that Foster has attributes beyond just his knowledge of medicine. He is an effective communicator who could be a strong voice in an office that definitely needs one. It's a safe bet he would not stir the kind of controversy that marred Elders' service.

Americans have shown that they care deeply about the state of health care in this nation. The country needs the type of leadership Foster could provide. The White House couldn't go wrong with Foster's selection. What Meharry has benefited from in the past could once again be a boost to the rest of the country. ■

Colleagues, others praise Foster's work

By TAMMIE SMITH
Staff Writer

Dr. Henry Foster Jr.'s experience as a practicing physician and his political savvy make him an excellent choice for surgeon general, colleagues and others familiar with his work say.

"Heak has common sense," said Dr. Nat Winston, who worked with Foster on the McHarrity Hubbard Metro General Hospital merger.

"He's not going to make any stu-

pid mistakes."

Foster, according to White House reports, is the leading candidate to replace Dr. Joycelyn Elders. Elders' controversial statements and her subsequent firing in December have brought the post heightened political sensitivity.

Foster, friends say, will get the job done without ruffling too many feathers. The surgeon general is the nation's chief medical officer, issuing policy statements on public health issues.

"He will speak his mind but with dignity, respect and a great deal of diplomacy," said attorney Aubrey Harwell Jr., a member of the McHarrity board of trustees.

"He will represent us well," said state Sen. Thelma Harper. "He is very well-respected among his colleagues, locally and nationally."

Others welcomed Foster's medical expertise in reproductive

health.

"This is great," said Dr. Fredia Wadley, Tennessee's new health commissioner, when notified of Foster's possible appointment.

"He has always been an advocate for mothers and babies and public health."

Inez Crutchfield, a member of the board of trustees at McHarrity, agreed.

"He is a good researcher in his field."

"He is my personal physician. I think he has proved himself as a person who can do the job."

Clinical psychologist Lorraine Williams-Greene is director of the "I Have A Future Program" at McHarrity that Foster founded. She said the program, which seeks to reduce teen-age pregnancy and drug use and keep kids in school, has had a measurable impact.

"We do know our kids have more life options," she said. ■

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THE WHITE HOUSE
WASHINGTON

February 23, 1995

Dear Editor,

Please find attached a packet of materials highlighting the distinguished career of Dr. Henry W. Foster, Jr., who has been selected by President Clinton for the post of Surgeon General. Dr. Foster is a practicing physician, a medical scholar, and academic administrator of national stature. He has practiced medicine for 38 years, delivering thousands of babies and becoming one of the nation's leading advocates for maternal and child health. He has spent his career serving inner-city and rural communities, which often suffer from a shortage of doctors. For the past 21 years, Dr. Foster has helped train hundreds of young doctors at Meharry Medical College, where he has been a professor, a department chairman, Dean of Medicine, and Acting President.

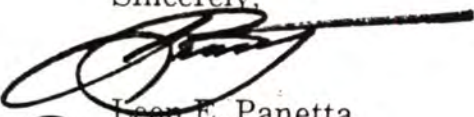
Dr. Foster has been nationally recognized for his *"I Have A Future"* program, a pioneering effort to reduce the number of teen pregnancies by stressing abstinence and improving self-esteem. Dr. Foster established this program in 1987 because he found that most teen pregnancy programs were limited to 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. In 1991, President George Bush named *"I Have a Future"* as one of America's "Thousand Points of Light."

Dr. Foster has earned strong support from the medical community around the country -- including the American Medical Association, the American College of Obstetricians and Gynecologists, and President Bush's Secretary of Health Dr. Louis Sullivan.

In the coming weeks, some will try to make this Surgeon General confirmation debate about issues other than the qualifications of one of the nation's leading physicians. We think that the American people deserve an honest debate about Dr. Foster's qualifications for the position and hope that he will be judged on a 38-year career of singular dedication and achievement -- not on distortions and unfair attacks.

I hope that you will find this information helpful as you examine Dr. Foster's record of accomplishment.

Sincerely,



Leon E. Panetta
Chief of Staff

DOCTOR HENRY W. FOSTER, JR., M.D.

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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>I Have A Future</i> " 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
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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

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 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.

THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release

February 2, 1995

REMARKS BY THE PRESIDENT AND DR. HENRY FOSTER, NOMINEE FOR U.S. SURGEON GENERAL

The Oval Office

2:10 P.M. EST

THE PRESIDENT: Thank you very much, Madam Secretary, and let me say it's a pleasure to have Mrs. Foster and Senator Frist, Congressman Clement here.

The Surgeon General of the United States has enormous responsibilities. As the public face of our public health service, he or she really is the people's doctor, the person responsible for promoting good health practices and alerting the nation when health threats exist.

To fill this post, I wanted someone who is both a top-flight medical professional and a strong leader and effective communicator. Dr. Henry Foster is such a person. And I am pleased today to announce my intention to nominate him as the Surgeon General of the United States.

He is widely respected in the world of medicine and science. After serving his country for two years as an Air Force medical officer, he became Chief of Obstetrics and Gynecology at Andrew Memorial Hospital at Tuskegee University.

For the past 21 years, he has worked at Meharry Medical College in Nashville, Tennessee. As the Dean of the School of Medicine and its acting president, he helped Meharry to lead the way to meeting the health needs of the poor and the underserved. At the moment, he is a visiting senior scholar at the Association of Academic Health Centers here in Washington.

In the communities he's served, Dr. Foster has won hearts and minds for his innovation and his dedication to saving the lives of young people and vulnerable people. He's received numerous honors for his work in obstetrics and dealing with sickle cell anemia and, very notably, in the prevention of teen pregnancy.

He has shown us how one person can make a difference. Eight years ago he developed and directed the "I Have a Future" program at Meharry to help stop teen pregnancy. It has been an unqualified success. Working with young people that others might think beyond help,

he built up their self-esteem. He taught them job skills. He encouraged them to stay in school. Most important, he told them to be responsible for themselves. Thanks to Dr. Foster, these young people have a chance to live a good, full life.

I want Dr. Foster to use what he's learned to help America attack the epidemic of teen pregnancies and unmarried pregnancies. We know government can only do so much. So large a part of Dr. Foster's job obviously will be to use his enormous skills of persuasion to reach out to people in the private sector -- in the religious, education, entertainment, sports and other communities in this country.

As I said in the State of the Union, when I challenged all sectors of our society to help us deal with these problems that must be dealt with one by one, we have to have help everywhere. I am convinced Dr. Foster is the person to galvanize this help and lead this charge. We want everyone to do their part to find the solution to this problem.

I want Dr. Foster now to say a few words, but as I introduce him, I want to thank him for taking on a task in public service at a time when public service sometimes has prices that are clearer than rewards. I thank him for his willingness to serve, to try to make a difference in the health care of the people of this country, and especially to try to make a difference in the future of the people of this country.

I thank his friends and colleagues for supporting him, the marvelous letter we received from Donna Shalala's predecessor, Dr. Lou Sullivan, the letter we received from the head of the American Medical Association; and, of course, the support you have from your congressman, Bob Clement, and from Senator Frist who just told me that he was the first doctor elected to the United States Senate since before the Depression.

So I would say it is time. Now, I'm going to try to keep from feeling so poorly. I need his help in any way other than a legislative sense.

Dr. Foster, the podium is yours.

Dr. FOSTER: Thank you, Mr. President. Thank you very kindly.

First, I wish to express my appreciation to you, Mr. President, for the opportunity to work on behalf of the American people. In many ways, health care in America is a paradox. We hold some of the world's greatest expertise in health and health interventions. People come from around the globe to be the beneficiaries of this care. Yet, in terms of health care outcomes, we don't do nearly as well as we should as a nation.

In my view, you can judge the character of a nation by the manner in which it deals with its children and the elderly. There is nothing more stifling than a compromised

beginning. We must assure healthier starts for our children.

Another of my special concerns is the epidemic of adolescent pregnancies. We have the highest teen pregnancy rate in the Western world; that is twice that of the next highest nation. Moreover, be assured, this is a problem that cuts across all socioeconomic strata. There are, however, demonstrated ways that this problem can be mitigated. It takes commitment and lots of hard work, but it can be done.

As you have heard, the "I Have a Future" program is making a difference in Nashville, because it has brought together a concerned community that's willing to put into the time and effort that it takes to treat the multiple problems and antecedents of teenage pregnancy.

As your Surgeon General, this will be among my highest priorities. I will also put tremendous emphasis on other pressing health issues for which prevention can be very effective -- such issues as AIDS and tobacco consumption, especially by our children.

In closing, let me say to you, President Clinton, Secretary Shalala, Assistant Secretary for Health Lee and all of those with whom I will be working, I know, that together we can demystify and confront the root causes of teen pregnancy, low birthweight, illicit drug use and the myriad of other issues which we will grapple with in the coming years.

Lastly, I wish to say again, thanks to my wife, St. Clair, my daughter, Myrna and my son Wendell, who have supported me so stoutly in all of my professional and personal endeavors.

Thank you very much. (Applause.)

THE PRESIDENT: You just hit the high point. Now you have to answer questions. (Laughter.)

Q Dr. Foster, do you think that at the -- your programs about teen pregnancy in Nashville can be applied on a national scale?

DR. FOSTER: I certainly do, and there have been efforts already to replicate the program; there is no doubt about it. It can be --

Q I hear a lot about personal commitment, but I don't hear anything about official commitment.

Mr. President, does your plan to combat teen pregnancy carry any new money with it? How do you intend to do that, or is it going to be primarily by the private sector?

THE PRESIDENT: We have a whole plan we've been working on for months, and Dr. Foster and I are going to get together and go over the outlines that we had worked on before he agreed to come on, and we will finalize that. I expect we'll be announcing it sometime in the very near future, and we'll talk about then how we intend to do it.

Q Will it take more federal money?

THE PRESIDENT: Well, I think the main thing we have to do is to galvanize the resources that are there now, spend the money that's there now better, and get -- I have been led to believe by many people all across this country that there will be an enormous amount of support for this effort in the private sector if they have confidence that it's a serious, disciplined, organized effort that is likely to work.

I might let Dr. Foster say more about that.

DR. FOSTER: No, the only thing I would add that didn't come out -- we are going to also utilize greatly the volunteer efforts. There is an emerging middle and upper black class that's doing everything now to give back. This has only developed among African Americans since World War II. And I'm surely certain that the same sort of emergence is occurring with Hispanics and other ethnic groups in this country.

Q Mr. President, does he have same license to be as outspoken and blunt as Dr. Elders did, or some areas -- did you caution him that there are some areas that he shouldn't be talking about?

DR. FOSTER: No comment. (Laughter.)

THE PRESIDENT: I can't do better than that. (Laughter.)

Q Mr. President, some conservatives have already said that they plan to oppose your nomination because of Dr. Foster's support for distribution of contraceptive devices in public schools and his stand on abortion. Do you anticipate a problem -- this confirmation?

THE PRESIDENT: No. I'll tell you, the policy of the administration is that we should have appropriate education policies in schools, that we should encourage abstinence among our young people, that the question of contraception is one that should be resolved at the local level involving all sectors of the local community. There is no national policy on that, and there will not be.

In terms of the other issues that could be raised, I am confident that thoughtful conservatives will have the same view of Dr. Foster as Senator Frist does when they have the same opportunity to review his whole record. I think that we got an endorsement from the head

of the American Medical Association already and from President Bush's HHS Director, Dr. Sullivan, who went to medical school from Dr. Foster, and I think there will be many others coming forward. So I feel good about it.

Q Mr. President, the budget that is going to be released on Monday, are you calling for a smaller deficit decrease than you had originally hoped for?

THE PRESIDENT: A smaller deficit --

Q Are you efforts to decrease the deficit --

THE PRESIDENT: Our efforts to decrease the deficit --let me say this -- I'm calling for twice as much in budget cuts as I am for the cost of the Middle Class Bill of Rights, the tax relief for the middle class. So my tax cuts are paid for, and there is further deficit reduction in our budget. And we will keep a tight rein on the budget deficit.

The one thing that we have no control over in the budget deficit is the impact of higher interest rates on the deficit. The American people should know that whenever interest rates are raised by the Fed, among other things the cost of carrying the nation's debt goes up. So we can't do anything about that. And in that sense, the deficit will not go down as much as I had hoped, because the interest rates have gone up. You can't overcompensate for that; there's nothing to be done about it.

But we're doing a better job in controlling inflation and health care than I thought we would a year or so ago -- the whole country is. I don't mean just the government; the people in health care and the people in business are working harder on it. We have a lot of budget cuts that are very important and significant in this budget, and I'm looking forward to working with Congress to see how we can do even better. And I think that I'm encouraged by what they said, that they want to pay for their tax cuts. So I think that this -- when I submit the budget, I think it'll be the beginning of a very positive thing; I don't have bad feelings about it.

Q What's your reaction to China saying that your human rights report is indiscreet and meddling in their own affairs?

THE PRESIDENT: Well, that's always been their view, and we disagree. I mean, we believe there are international standards for human rights. The Human Rights Assistant Secretary is charged by law with submitting a report every year. All he did was fulfill his legal responsibility to tell the truth as he saw it, and I support what he did. I think Mr. Shattuck's done a good job, and I think it's a very -- it's by far, by the way, the most comprehensive report ever filed by the State Department on human rights, and it covers far more than China. China was not singled out; we evaluated every country in every part of the globe with any issue in this regard.

Thank you very much.

Q How are the baseball talks going? Have you gotten feedback?

THE PRESIDENT: We just -- we're in it. That's all I can say. Not up, not down -- we're in it.

THE PRESS: Thank you.

END2:24 P.M. EST

Remarks as prepared for delivery by
Dr. Henry Foster
Nominee for U.S. Surgeon General
at
George Washington University -- School of Public Health
February 10, 1995

Thank you, Alan Weingold for that gracious introduction. It is a pleasure to be here at this prestigious university.

You guys gave me a lot of inspiration.

Nobody expected your men's basketball team to beat the number one team in the country last week, but you did.

So I know you understand what it feels like to have a tough battle ahead of you.

It is fitting that the President announced his intent to nominate me for the position of Surgeon General on February the second, Groundhog Day.

That's the day when, 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 the second -- when President Clinton and Secretary Shalala publicly called me to service -- 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.

And that means Spring is just around the corner.

In his announcement of my nomination, the President thanked me for taking on the difficult task of public service at a time when public service sometimes has a high price.

I thought I knew what he meant at the time.

But after the past week -- I really know what he meant.

So you might be wondering, why do I want this job?

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, I became one of the youngest people ever inducted into the Institute of Medicine of the National Academy of Sciences.

I am the founder of the award-winning "I Have a Future Program," which was recognized as one of this nation's "Thousand Points of Light" in 1991 by President George Bush.

I am also a husband of 35 years and the father of a daughter and a son.

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 Medical College, I taught more than 1500 students. Founded 119 years ago, Meharry is among the nation's finest teaching institutions.

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...

It is difficult to look around America today and see so much needless suffering because of a 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 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.

I believe that I can help empower more people to reclaim the power over their own health ...

... 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 confronting 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 we have the power to eradicate this scourge and prevent its recurrence.

At least 2.2 million Americans are victims of violent injury each year.

In 1992, there were more than 37,000 firearm-related deaths in this country.

Escalating violence in America causes not only unnecessary injury and death;

It is also a major cause of the 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 of existence.

I know we can -- but it's going to take entire 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 adulthood.

Recent surveys by the Department of Health and Human Services confirm that for three years in a row, the use of

marijuana and other drugs by 8th, 10th, and 12th graders 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, aged 25 to 44 in the United States.

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: the key is to commit ourselves not only to talking the talk -- but 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 national spotlight on this unacceptable problem.

All of the afflictions that I've 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 8,400 teenagers become sexually active.

And every day, 2,781 teenagers get pregnant: This translates into 116 pregnancies per hour.

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 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 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.

That's a dead-end dream and we've got to replace it with a dream of hope and unlimited achievement.

That's the philosophy that embodies the "I Have a Future" 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.

Our program is anchored in Nashville's public housing projects. With respect to sexuality, the emphasizes first and foremost is always placed on abstinence.

The program involves entire families and the total social matrix of the surrounding community.

Everybody from parents, grandparents to politicians, volunteers, and from the 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. In some cases, that means access to birth control -- with a very strong emphasis on parental and community involvement.

And third, and most important, we help young people enhance their life-options through activities that improve their job skills, self-reliance, values and self-esteem.

For example, the youth entrepreneurial component of our program helps teenagers learn more about themselves and about the world of work by empowering them to start businesses in their communities.

This kind of skills-development and character-building is not only important for girls and young women -- but, as research is showing us, it is also critically important for boys and young men.

We have to take the time to understand all the unique aspects of young peoples' lives:

Building up their self-esteem, telling them we believe in them, but not simply treating them as collections of problems.

That is what we have done in "I Have a Future" -- and it works.

We know of only one of the program's participants from 1988 to 1991 who became pregnant -- compared to 59 teenage pregnancies in the two other demographically similar Nashville housing projects where "I Have a Future" is not offered.

And just last year, 16 of the 24 program participants who graduated from high school went on to college. Eight of them were male and 8 were female.

It has not been easy -- and results don't happen overnight.

In fact, it's a difficult process, and requires great dedication by many people -- but it is working.

This shows you what one community can do when it makes teenage well-being a real priority -- and I believe this kind of success is possible in every community.

But let me be clear:

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 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 medical career to taking all appropriate medical steps to meet the health needs of my patients, and that includes performing legal abortions.

I 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.

To do this, we have to put life's possibilities within reach of all our young people.

One of the reasons I have hope is because there are so many positive trends out there:

Like the steady decline in smoking over the past 20 years, the steep decline in the numbers of people drinking and driving, and the steady increase in the use of seat belts.

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 I appreciate your support.

One thing I know -- my fight is no tougher than the one I'm asking all of you to join:

That's the fight to improve the health of all Americans and to prevent teen pregnancy.

I am eager to get to work, because there is so much work to be done.

I won't hesitate to call on each and every one of you for help.

These are all our children. And they need all of our help. Thank you.

Organizations Supporting the Nomination of Dr. Henry Foster as Surgeon General

Advocacy for Youth
African Methodist Episcopal Church
Alpha Kappa Alpha
American Academy of Dental Schools
American College of Obstetricians
and Gynecologists
American College of Physicians
Americans for Democratic Action
American College for 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
Professional 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 Firefighters
Medical Students for Free Choice
Michigan Students for Free Choice
National Abortion and Reproductive
Rights Action League
National Abortion Federation
National Association for the Advancement
of Colored People
National Association for Equal
Opportunity 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 Legislators
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 Organization of Women
National Organization of Women
Legal Defense and Education Fund
National Urban League
National Women's Law Center
People for the American Way
Planned Parenthood Federation of America
National Progressive Baptist Convention
Sexuality Information and Education
Council of the United States
Tennessee Medical Association
Voters for Choice
Zero Population Growth
Zeta Phi Beta

American Medical Association
Physicians dedicated to the health of America



James S. Todd, MD
Executive Vice President

515 North State Street
Chicago, Illinois 60610

312 464-5000
312 464-6184 Fax

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 Meharry 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 written in a cursive, flowing style.

James S. Todd, MD

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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Dr. Foster At-A-Glance: Henry W. Foster M.D., 61, is an eminent scholar and academic administrator, a practicing physician, and a community leader. In 1972, he was one of the youngest members ever inducted into the Institute of Medicine of the National Academy of Science. In 1991, the "I Have A Future" program he developed was named a "Point of Light" by President Bush for its pioneering work in preventing teen pregnancy and building self-esteem among at-risk youth.

PROFESSIONAL PEER SUPPORT FOR HENRY W. FOSTER, JR., M.D.

"The American Medical Association enthusiastically supports the nomination of Henry W. Foster, 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,....a dedicated teacher, a dependable leader, and a concerned advocate for improving access to quality health care for women and underserved populations....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 health."

James S. Todd, MD
Executive Vice President
American Medical Association

"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, the "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."

Louis W. Sullivan, MD
President, Morehouse School of Medicine
Former U.S. Secretary of Health and Human Services.

"I have known Dr. Foster for many years. He is a very intelligent, conscientious, and able physician. His calm, well-balanced approach to problem solving will serve him and the people of the United States well in carrying out the duties of the office of Surgeon General. He is highly qualified, and an excellent choice for the position."

William C. Andrews M.D.

President

American College of Obstetricians and Gynecologists

"The National Medical Association strongly supports the nomination of Henry Foster MD as United States Surgeon General....The NMA believes that Dr. Foster's presence of U.S. Surgeon General will greatly enhance the Administration's ability and capacity to protect the health and welfare of our nation and applauds [President Clinton's] excellent selection."

Tracy M. Walton Jr., MD

President

National Medical Association

"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 of 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."

Harvey V. Fineberg, MD, PHD

President

Association of Schools of Public Health

"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."

Roy L. DeHart MD
President
American College of Preventive Medicine

"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."

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

"This country will be fortunate indeed when Henry Foster becomes its Surgeon General. Henry has proven his commitment--and more importantly, his effectiveness--in galvanizing solutions to vexing public health problems. His courage, his intimate knowledge of our country's needs, his proven ability to get things done, his sensitivity to people from all sectors of our society and from all parts of our political spectrum, and his compassionate and gentle nature are precisely what the difficult job of U.S. Surgeon General require."

Jordan Cohen, M.D.
President
Association of American Medical Colleges

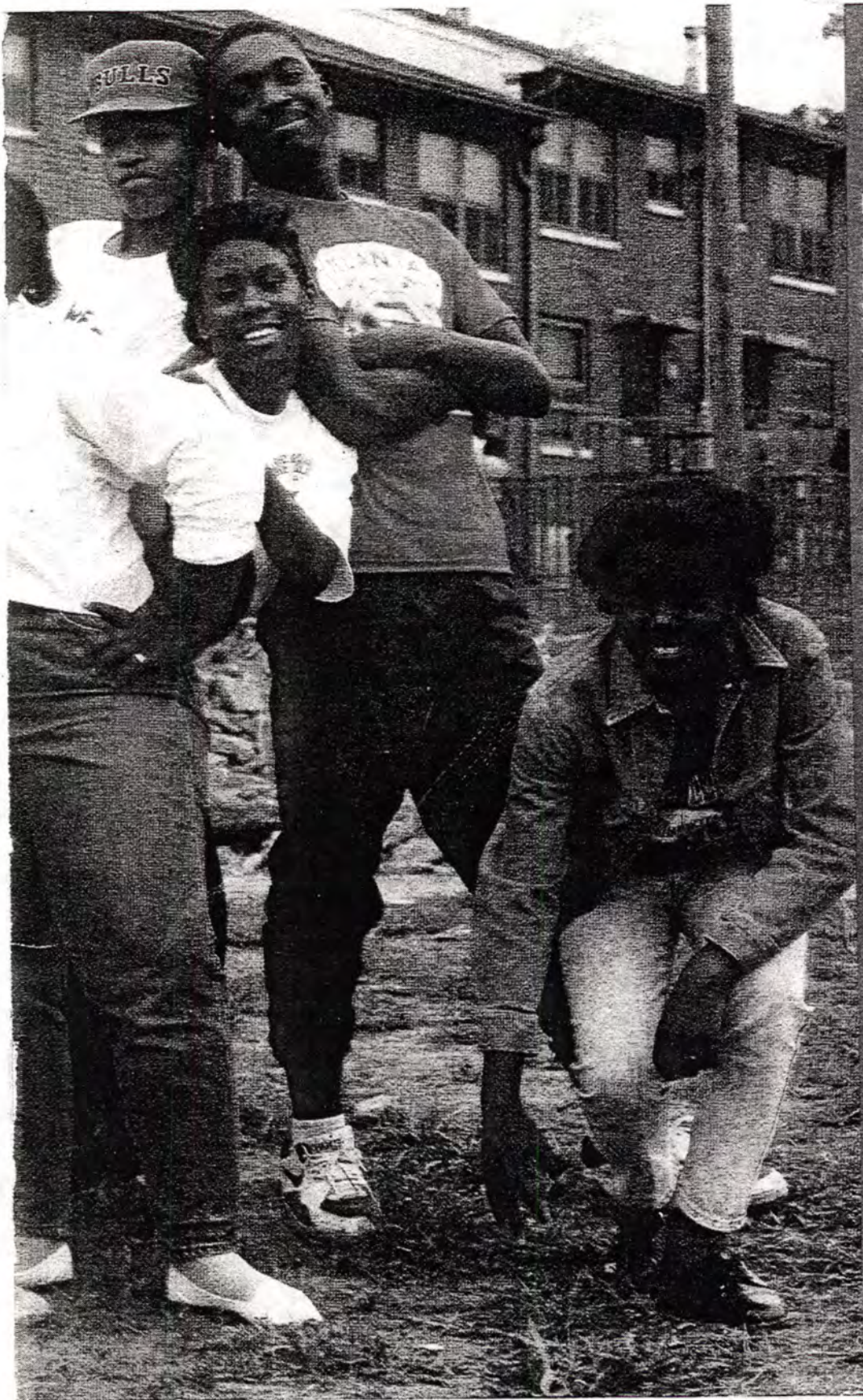
"Dr. Foster is an exceptionally competent physician and a man of great integrity. His social accomplishments are significant and impressive. He has great respect among the academic community of obstetricians and gynecologists....I have had an opportunity to work closely with Dr. Foster as a colleague and have been impressed not only with his intellectual capabilities but also with his exceptionally high ethical and moral standards. I believe that he would be a great Surgeon General at a time when we need strong medical leadership."

John J. Sciarra, M.D., Ph.D.
Thomas J. Watkins Professor and Chairman,
Northwestern University Medical School
Past President,
International Federation of Gynecology and Obstetrics

"I write to you in support of Dr. Henry Foster, the nominee for Surgeon General and on behalf of the International Women's Health Coalition and the network of which we are a part. We strongly support Dr. Foster in his work, his values, his courage, and his caring for women and their well-being. We believe these very attributes would make him an exemplary Surgeon General."

Joan B. Dunlop
President
International Women's Health Coalition

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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Department of Obstetrics and Gynecology
"I Have A Future" program
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Nashville, Tennessee 37208
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HENRY W. FOSTER, M.D., DIRECTOR
LORRAINE WILLIAMS GREENE, PH.D., DEPUTY DIRECTOR





Teen-agers have a future, thanks to Foster program

by Andrea Stone
USA TODAY

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.



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

”
— Lorraine Williams Greene, director

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

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

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 Satcher, 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

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-

Continued on Page 8, Column 1

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.

Nominee's School Program Offers Alternatives to Teens

THE NEW YORK TIMES SATURDAY, FEBRUARY 11, 1995

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

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 teenage 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."

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

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, Galinburg, 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,

Sunday February 5, 1995

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 oversteps 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 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, 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 Toff and Jeff Whitesides, was created, Toff 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 sling 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 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." ■

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, 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."

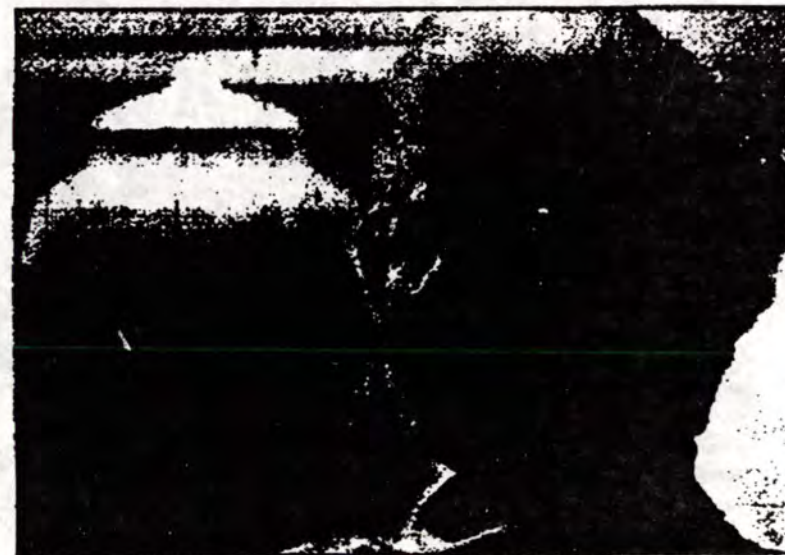
Foster, 61, former acting president at Meharry Medical College in

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 14C



T. ORTEGA GAINES/5

Jeannette Hight remembers surgeon general nominee Henry Foster as committed to ushering in new 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 GARNES/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."

"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."

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."

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

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.