The Family Institute

The Family Institute in Association with Focus on the Family

February 20, 1995

TO: Michael Schwartz, Kristi Hamrick

FROM: Mark Tolf

RE: Foster/Meharry research

I did a search of local press coverage on Dr. Foster and Meharry Medical College on Saturday, February 18. So far, I have covered the years 1973-1982 and 1989-1993 (July).

Meharry received intense press coverage during these time periods, most of it favorable even when the facts were not so favorable. The majority of the press coverage covers internal management problems, political woes, loss of funding, loss of accreditation, suits from former workers, etc.... It seems to be an institution that is perpetually "under a cloud."

This is unfortunate, because Meharry does play an important role in our community. In fact, "I Have A Future" has a solid value base, but it gets lost in the mixed abstinence message. "I Have A Future" also plays a needed role in the public housing projects it operates in.

I am sure you will find that the enclosed press clippings provide crucial background information on Meharry Medical College, its battle with accreditation and on Dr. Foster

200 12th Avenue South ◆ Nashville TN 37203 ◆ 615/254-3917

Meharry

- Meharry ranked last in National Science Foundation-funded survey of the country's 94 medical schools.

Nashville Banner, January 19, 1978

- Federal auditors issue report on Meharry, citing, among other things:

  –The use of federal funds for non-federal projects.
  –Failure to reconcile the general fund bank account for more than a year.
  –Weak controls on expenditures.
  --Insufficient accounting staff.
  --Incomplete and inaccurate records.
  –Inadequate accounting system.

Nashville Banner, April 17, 1979

- Survey published by *Private Practice* ranks Meharry as worst medical school in nation.

Nashville Banner, March 10, 1980
The Tennessean, March 10, 1980

- HHS tells Meharry to repay between $2.7 and $3.8 million in federal funds that feds said were used for unauthorized purposes.
- HHS also has forced Meharry to agree to detailed steps it must take to solve its financial management problems as a condition for continuing to receive the federal funds the school must have in order to survive.

Nashville Banner, March 3, 1981

- Meharry has operated for 15 months without full-time deans in either its Medical School or Dental School.

The Tennessean, May 30, 1982

The state Judicial Standards Commission, silent since Judge Charles Galbreath changed his mind about resigning, was to renew efforts to remove the unpredictable judge today.

The commission had been seeking the removal of the controversial Court of Criminal Appeals judge until it unexpectedly dropped charges against him last week.

At that time it was understood Galbreath would resign, but he later changed his mind.

The commission was expected to ask today that the Davidson County Chancery Court rule on whether the commission's previous efforts to remove the outspoken judge were legal.

The problem with the efforts was [illegible] possible violation of the state's Open Meetings Act.

The commission is now attempting to learn whether its conduct is covered by the Sunshine Law or by a conflicting statute which orders commission affairs to be confidential.

A state attorney general's opinion previously said the commission is bound by the Sunshine Law. But that is only an opinion and not binding to the commission.

Galbreath today repeated his previous statement that he will not dispute whether the commission acted legally when it decided to pursue his ouster.

In his statement, the judge said, "I admit, almost cheerfully, most of the charges against me. . ."

But the judge continued to deny [illegible] job satisfactorily.

The commission action today is the latest development in the controversy involving the judge since the commission told him on Dec. 5 it was seeking his removal from office.

Last week, Galbreath announced his intention to resign shortly after commission Chairman Earnest B. Taylor, a Morristown attorney, said further action against the judge would be stopped.

But Galbreath reversed himself when it became known he agreed to a "deal" with the commission. He said if he now resigned, the action would be "under a cloud."

Galbreath was charged with violating Judicial Canon of Ethics on several matters, including his writing a letter to *Hustler* magazine on court stationery.

[illegible] hunters, one an E[illegible] pulled three men [illegible] Mississippi River [illegible] over their decisions [illegible] others to the river.

Bill Maxwell a[illegible] George Hart had to [illegible] to a bank of the ri[illegible] and were going ba[illegible] two men. One of [illegible] today in a Memphi[illegible]

"We didn't have [illegible] and it was getting [illegible] Hart, pastor of Imm[illegible] pal Church in Ripl[illegible] decision at that tim[illegible] two dead men in the [illegible] the three on the ba[illegible]

"It was the hard[illegible] ever had to make. I [illegible] Bill Maxwell's fam[illegible] some prayers."

Love-Seeking Hog Runs Amok

From Staff, Wire Reports

Springfield — A lovesick hog?

Yes, says Betty Darrow, whose 450-pound hog escaped from its pen Wednesday on an ill-fated search for affection.

The animal — both a pet and a business venture for the Darrow family — was killed by police with 12 shots from a .357-caliber Magnum revolver after attacking a police car and sending a Datsun skidding over ice.

Mrs. Darrow said Baby, her 5-year-old hog bought for raising and selling piglets, pulled down wire pen and escaped early Tuesday after going into heat.

"They run around more or less looking for a male," said Mrs. Darrow. "When she got around people she sort of run to 'em. Of course anybody that didn't know her would think she was trying to attack them.

"You can imagine what you'd think if a big hog run up on you. But when she was running after the people she was just after their attention."

Police said Robert Adcock, a neighbor of the Darrows, was leaving for work when the hog ran toward him on his porch. He fled into his house and called officers.

"I got out of the patrol car and this huge 450-pound hog ran after me," said Officer Tom Crumpler, who answered the call with Officer Felix Mosley.

"I got back in the car, but it got hold of the door handle and pulled our car sideways on the ice. Then she let go of the car and rammed it — just bucked her head right into it. Then she hit the bumper, the spotlight, everything."

The officers said they were trying to lead the hog outside the city limits so they could shoot her, but that Baby spotted a red Datsun and started chasing it, hitting it and sending it skidding on ice in the parking lot of Reeves Market.

The officers radioed for instructions, they said, and the desk sergeant said to shoot her.

Meharry Ranked Last In Survey

From Wire Reports

Nashville's troubled Meharry Medical College has been ranked last in the nation in a National Science Foundation-funded survey of the country's 94 medical schools.

Vanderbilt University Medical Center finished in the top third of the schools, with a ranking of 24th.

The University of Tennessee Center for Health Sciences in Memphis was rated 75th in the nation.

Officials at Meharry, a private, predominantly black institution, and the UT medical school, however, have charged that the standards used in the survey ranking their schools poorly were shallow and subjective.

Two Columbia University sociologists, Jonathan R. Cole and James A. Lipton, surveyed 2,960 medical school faculty members on 87 campuses.

Most of the faculty members who took part said they based their judgments on the quality of research being conducted at the schools and on the prominence of individual members of the faculty.

The quality of graduates produced by the schools was not considered as a factor, the survey's authors said.

Dr. Vernon Wilson, vice president for medical affairs at Vanderbilt, was unavailable for comment.

Officials at UT and Meharry said Wednesday that the criteria used to evaluate the schools were "highly subjective," "very relative" and "shallow."

"That's like saying if you aren't Ivy League you aren't accredited," said Anne Jackson, a spokeswoman for Meharry.

"We don't concentrate so much at Meharry on research as we do on turning out good urban practitioners. For example, 76 percent of Meharry graduates practice in the inner cities."

UT officials echoed similar arguments.

"The State of Tennessee pays us to educate health professionals," said Dr. John Shively, UT vice chancellor for academic affairs.

Generally, most of the schools given low ratings were in the South. Duke University in North Carolina, No. 7, was the only Southern school to make the top 10.

'Hawaii' Tickets Still Available

There are still some Nashville *Banner* "Hawaii" Travel Forum tickets available for the Feb. 1 performance at 7:30 p.m. at War Memorial Auditorium. All of the tickets for the Jan. 30 and 31 performances have been requested.

If you would like Feb. 1 tickets, send a self-addressed, stamped envelope to: "Hawaii," c/o Public Service Department, Nashville *Banner*, 1100 Broadway, Nashville, Tenn., 37202. With your request, indicate the number of tickets you would like not to exceed six.



Picnic table

Nashville Banner 1/19/78

merely

Republican presidential nomination.

Saying Reagan's Champ, Connally Drops GOP Bid

HOUSTON (AP) — John Connally, declaring Ronald Reagan "is still the champion," withdrew from the Republican presidential race yesterday, one day after being soundly thrashed by Reagan in their first Southern primary battle.

The former Texas governor, who became a candidate one year ago and spent nearly $10 million in a losing battle, told a news conference that, after his disappointing loss to Reagan in the South Carolina primary, it no longer would be "to the good of my party and the nation for me to continue my candidacy."

HE TOLD about 700 supporters that from the first he realized it was an uphill battle to win the GOP nomination. Now, he said, "among all my home folks I am withdrawing as a candidate. But I am not withdrawing from politics, as I will continue to speak out on all the issues."

In South Carolina, where Connally invested heavily in campaign money and personal prestige in hopes of getting his lagging campaign off the ground, he was burned instead by Reagan.

The former California governor won all six of the state's congressional districts and captured all 25 of South Carolina's delegates to the GOP National Convention in Detroit in July.

REAGAN WON 54% of the vote, compared to 30% for Connally and 15% for George Bush.

In Florida, where he was

(Turn to Page 6, Column 7)



— AP Wirephoto

for Those With Cold Feet

...ervers in the ceremony of "punishment of devil from the body and keep ...t temple health a year." Fire-walkers say they feel no pain and are not ...s joined burned because they are free from earthly thoughts.

...e a 'Miracle' With Help From MDHA

...e Metro ...Housing ...ich took ...roviding ...w, with a ...se at 400 ...Hickory ...s on the ...Murphy ...apidated

...rk was a ...question ...how can other people get houses built for them free of charge?

Gerald Nicely, MDHA director, successfully escorted Mrs. Murphy across the threshold of her dream house yesterday, but he had difficulty trying to explain how others can qualify for the generous grants from the Department of Housing and Urban Development (HUD).

He acknowleged his agency has no way of objectively dividing the $300,000 the agency still has to help people build new homes.

"IT COULD be seen as preferential treatment," the director said. "Anytime you've got more demand for funds than you've got supply, you've got subjectivity involved in handing the money out."

Although Mrs. Murphy did not receive part of the $300,000 HUD recently allocated MDHA, Nicely said her case exemplifies how the agency intends to spend the money.

"The money gives us an alternative to rehabilitation that we've needed for a long time," he said.

THE WIDOW received her grant from funds allocated to the Hadley Bend area for what Nicely termed "site improvements." He said she qualified

(Turn to Page 6, Column 3)

north-central Mindanao area just north of Moslem Marawi City, a Moro stronghold.

The agency reported that Ozamis Mayor Jesus Sanciangco said the afternoon explosions in the theaters were almost simultaneous, and that a grenade planted in a third movie house did not explode.

The agency said witnesses reported the Ozamis grenades were thrown from the balconies of the two theaters into the orchestra areas below.

A PNA reporter said the attack on the amateur singing contest at Iligan City occurred about five hours after the Ozamis City explosions.

HE SAID five fragmentation-type grenades went off at the same time and that two grenades thrown at the city police headquarters did not explode.

Col. Jose Orbe, police station commander in Iligan City, said one suspect was arrested, but the incident was thought to be a coordinated attack by at least six terrorists. Iligan City Mayor Camilo Cabili told PNA the attack was thought to be timed to make an impact on a meeting of the Islamic Conference of Foreign Ministers

(Turn to Page 6, Column 7)

'School Worst'

Meharry Dean: Article 'Indecent'

Dr. Ralph L. Cazort, dean of Meharry Medical College yesterday termed "indecent" a magazine survey which ranks Meharry the worst medical school in the nation.

Only 44 of the 200 medical school deans and assistant deans queried by *Private Practice*, a monthly journal received by more than 180,000 physicians, responded to a questionnaire asking them to rate the 10 best and 10 worst medical schools. The Association of American Medical Colleges vigorously criticized the survey and urged its members not to participate.

"IT'S A POOR survey, poorly conceived, and I am surprised that any dean of any medical school which is supposed to be a scientific institution would allow himself or herself to judge another medical school in this way," Cazort said.

The questionnaires, mailed several weeks ago, gave no criteria for assessing the institutions, but merely asked respondents to rank the schools. Such a question is unfair, Cazort said, because schools excel in some areas and not others.

"Meharry happens to have one of the best family medicine programs in the country," he said. "I believe we may have more females than any other medical school."

ANOTHER school may have an extensive research program, he said, but, he asked, "Who's to say which is more important?"

"Meharry is nationally ac-

(Turn to Page 6, Column 6)

THE TENNESSEAN

3/10/80



— AP Wirephoto

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jubljana Clinical Center Jan.
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kidney problems and heart
ed a general deterioration.

(Continued From Page One)

credited, so it is a good school," he said.

Dr. John A.D. Cooper, president of the AAMC, voiced similar objections to the survey.

"SOME SCHOOLS may be ranked very high in their research activities that contribute to new medical knowledge, but they may be ranked very low in providing primary care physicians," Cooper said.

"We usually advise deans not to cooperate with these kinds of studies," Cooper wrote in a letter to the magazine. "The association has long opposed such attempts to classify a very diverse group of institutions."

Responding to Cooper in the March issue of *Private Practice*, the editors wrote:

"WE REGRET Dr. Cooper's decision to try to have our survey boycotted, although we agree it is not simple to rank medical schools. But one should not confuse the difficult with the impossible, as we believe Dr. Cooper has done in this case."

Harry Schwartz, the magazine's editorial consultant, said the ratings reflect economic realities.

"The differences among schools are produced by such factors as the uneven re-

● See Editorial, "No-Class Journal Hits Quality Medical School," Page 12

sources available to different institutions which enable some to attract more of the best physician-teachers and researchers and more of the best students than other, less wealthy schools," Schwartz said.

CAZORT acknowledged that many schools, including Meharry, could use more money.

"I'm sure a lot of schools, if they had more resources, would be more competitive in all areas of their profiles," he said.

Although Cazort said he does not know what effect news of the survey might have on potential teachers, students and benefactors of Meharry, he hopes for the best.

"MEHARRY HAS survived a large number of adverse statements and situations," Cazort said. "To say that this one is going to floor us — I just couldn't make that statement."

According to *Private Practice*, the top 15 medical schools are:

1. Johns Hopkins.
2. Harvard.
3. Duke.
4. Yale.
5. Columbia.
6. Chicago.
7. Washington (St. Louis).
8. Stanford.
9. UCLA.
10. Michigan.
11. California — San Francisco.
12. Cornell (N.Y.).
13. Texas — Dallas.
14. Pennsylvania.
15. Washington.

Ten worst are:

89. Medical College of Ohio.
90. Hahnemann Medical College (Pa.).
91. Texas Tech.
92. Loyola University.
93. Creighton (Neb.).
94. Southern Illinois.
95. College of Medicine and Dentistry of New Jersey.
96. Howard University. (D.C.).
97. Puerto Rico.
98. Meharry Medical College.

(Continued From Page One)

about the health of the hostages. He called on the militants to prove that the hostages are in satisfactory condition by permitting the five-man U.N. commission to see them.

In a related development, a spokesman for the militants denied a report that one of the hostages spending their 127th day in captivity tried to commit suicide and needed medical treatment.

THE SUNDAY Times of London carried a front page article by Mohammed Heikal, a former influential Egyptian newspaper editor, part of which said, "One of the American hostages is receiving medical care in separate quarters after an unsuccessful attempt to commit suicide, the *Sunday Times* learned last night. It was said to be the second attempt. He is understood to be out of danger."

The name of the hostage who reportedly made the suicide attempt was not disclosed.

But the militant spokesman denied the report in the telephone interview, saying, "No, it is not true. They are all well as before."

THE MILITANTS have branded Ghotbzadeh a liar. They allege he falsely claimed that plans to transfer the hostages to the custody of his ministry had been approved by revolutionary leader Ayatollah Ruhollah Khomeini.

After Saturday's planned transfer fell through, the council issued an order demanding that the militants surrender the hostages, now in their 127th the hostages or allow them to

Meharry Dean Categorizes Magazine Article 'Indecent'

Saying
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NASHVILLE BANNER 4/17/79

Nashville

VOL. CIII No. 7 — A GANNETT NEWSPAPER — NASHVILLE, TENN., TUESDAY AFTERNOON, APRIL 17, 1979

U.S. Report Hits Meharry

By BOB HEETH
Banner Staff Writer

Serious problems in the financial management of Meharry Medical College have contributed to the college's "precarious" financial condition, federal auditors have found.

Some of those deficiencies are being corrected, the auditors said. But the college still will need from $3 million to $5 million a year in additional outside support to cover projected annual deficits — even though the federal government already is subsidizing payments on a $29 million loan at a cost to the taxpayers of $2.9 million a year.

Meharry's management problems, outlined in a federal audit report obtained by the *Nashville Banner* under the Freedom of Information Act, include:

- The use of federal funds for non-federal projects.
- Poor collection procedures on student loans.
- Failure to reconcile the general fund bank account for more than a year.
- Weak controls on expenditures, accounting for about 25 percent of Meharry's annual deficit.
- Insufficient accounting staff.
- "Incomplete and inaccurate records" and an "inadequate accounting system." The records for fiscal 1978 were in such bad shape they couldn't be completely audited, the auditors said.

The U.S. Department of Health, Education and Welfare ordered the audit after Meharry announced in August 1977 that it was going to default on a $29 million federally guaranteed hospital construction loan. HEW now pays $243,061 of the monthly payments on the loan while Meharry pays $18,915.

The auditors were asked to find out if Meharry could retire the $29 million loan. They concluded the college could not pay all of its other bills, much less the loan.

"Meharry's financial condition is precarious," the auditors said.

Advent Theater May Be Closed Due To Deficit

By JULIE PURSELL
Banner Art Editor

Board members of Advent Theater will decide May 14 whether to ring down the final curtain on the controversial operation.

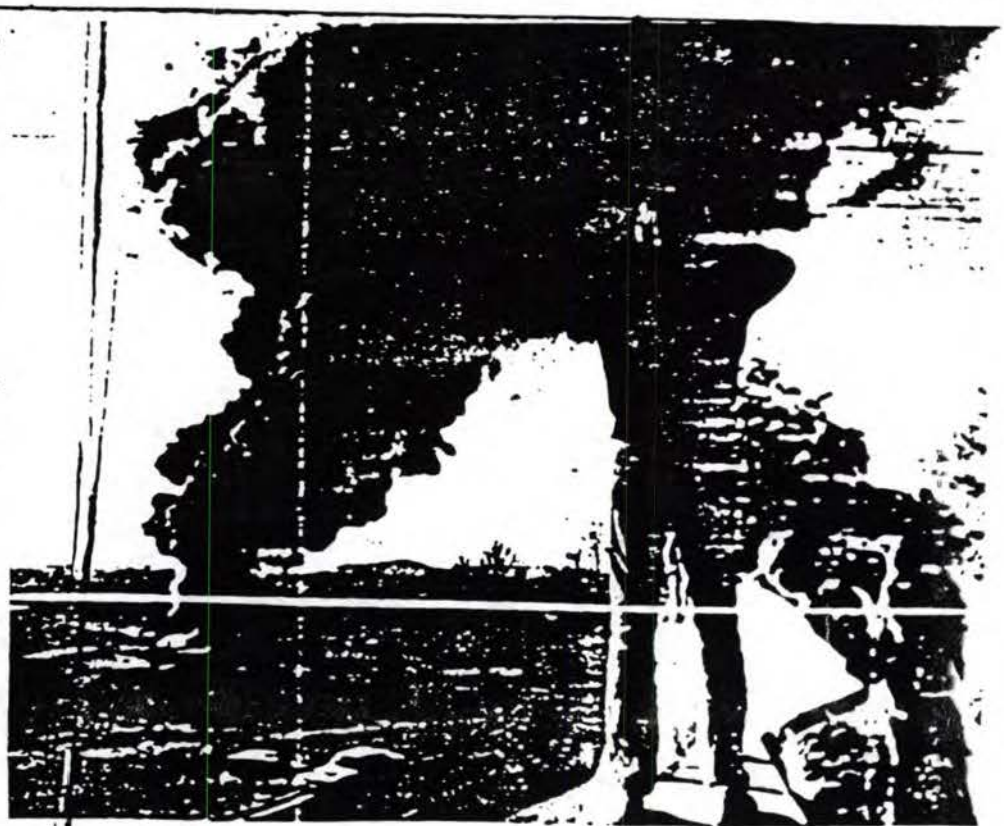
It was also learned that the theater's executive committee has received a letter of resignation from its managing director, Wesley Brustad. But Board Chairman Martha Ingram denied that Brustad has resigned.

Mrs. Ingram said the theater is faced with a $100,000 deficit and another possible $94,000 loss by the end of the theater's fiscal year, July 31.

The result could be that the theater will close its doors.

"With these staggering finances, we are struggling to cope and to keep ourselves together and financially solvent," Mrs. Ingram said.

"We have to decide what to do, if anything, about next year," she said. "We hope in the next few days to send a letter to our 2,000 season subscribers and to some members of the general public, as well as making an appeal through the press suggesting that if 4,000 people were to send $25 to the Advent



Fire Razes Warehouse

Onlookers

Banner.

SHVILLE, TENN., TUESDAY AFTERNOON, APRIL 17, 1979 42 PAGES PRICE: 15 CENTS

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The auditors were asked to find out if Meharry could retire the $29 million loan. They concluded the college could not pay all of its other bills, much less the loan.

"Meharry's financial condition is precarious," the auditors said.

"For every $11 of debt, there is only $1 of assets to cover it. This indicates an unsatisfactory financial condition.

"Meharry's ability to meet its obligations would be increased if deficiencies in its financial and management operations can be overcome," the auditors said.

"Our review showed a number of serious internal control deficiencies in Meharry's financial management systems."

For example, the general fund bank account had not been reconciled since June 30, 1977. Part of the problem was Meharry's practice of writing checks and then holding them until there were funds to cover them.

"On July 31, 1978, the treasurer was holding about 700 checks amounting to almost $2.3 million. Of the 700 checks held, 22 were over one year old," the auditors said.

That problem has since been cleared up, federal officials said.

See MEHARRY, Page 2



— Banner Photo by Dean Dixon

Police Capture 4 In Purolator Robbery Deaths

Waterbury, Conn. (UPI) — Police today arrested two men and their wives for the ambush slayings of three Purolator Security Inc. guards and recovered most of the nearly $1.9 million in cash, canceled checks and jewelry stolen Monday.

"It was actually a slaughter of these poor guards," Waterbury Police Superintendent Frederick T. Sullivan said. "They never had a chance. The way we read this thing, they shot them first and robbed them second."

Less than 24 hours after the holdup in the bullet riddled garage, police arrested Donald Couture, 26; his wife Donna, 23, both of Wallingford, Conn.; Lawrence Pelletier Jr., 35, and his wife Evelyn "Vega" Pelletier, 35, both of Waterbury.

Couture, Pelletier [illegible]

loaded with plastic garbage bags full of money was wheeled into the room.

"It appears the money is all there and intact," Purolator President John Pratt said.

A police source said it appeared the suspects believed they had gotten away with the crime and had no intention of trying to leave the area. Much of the loot had been transferred from money bags to large plastic garbage bags.

Police said the guards were shot as they loaded money into a van carrying Easter weekend funds from Hartford to New York.

Police said the robbers apparently shot the guards from outside the garage, then forced their way in and made off with cash and valuables. Another $2 million was left untouched in another part of

ces Warehouse

[illegible] Hillsmantle the vacant building may have started

1 a.m.	46	7 a.m.	
2 a.m.	49	8 a.m.	
3 a.m.	47	9 a.m.	
4 a.m.	48	10 a.m.	
5 a.m.	45	11 a.m.	

Travelers Temperatures

City	Forecast (H) (L) Today	Forecast (H) (L) Wed.	City	Forecast (H) (L) Today	Forecast (H) (L) Wed.
Albany	32 20 Windy	27 23 Sunny	Cincinnati	51 38 Sunny	52 32 Sunny
Atlanta	72 47 Sunny	68 48 Sunny	Memphis	62 36 Fair	62 46 Windy
Billings	44 25 Showers	31 23 Showers	Miami Beach	82 66 Windy	84 71 Windy
Boise	38 33 Showers	32 23 Windy	Minn. St. Paul	34 16 Sunny	30 18 Snow
Boston	43 26 Windy	43 28 Sunny	New Orleans	64 41 Windy	65 44 Windy
Chicago	38 32 Sunny	34 27 Sunny	New York	50 40 Windy	48 42 Sunny
Columbus Oh	57 34 Sunny	46 42 Sunny	Oklahoma City	61 34 Windy	73 38 Turning
Dal Ft Worth	62 47 Cloudy	60 47 Cloudy	Phoenix	68 33 Windy	62 34 Windy
Denver	73 42 Sunny	71 28 Showers	Raleigh	64 38 Sunny	57 33 Sunny
Detroit	36 34 Sunny	43 41 Sunny	Salt Lake City	70 48 Showers	56 28 Showers
Honolulu	82 66 Windy	83 66 Windy	San Antonio	79 70 Turning	82 66 Windy
Kansas City	73 34 Windy	53 36 Windy	San Francisco	57 48 Fair	57 48 Fair
Las Vegas	75 52 Windy	66 35 Windy	Seattle	52 40 Showers	52 40 Showers
Los Angeles	63 50 Windy	63 47 Fair	Washington	42 41 Windy	42 41 Sunny

5-Day Forecast

Tennessee — Scattered showers in the west Thursday and over the state Friday and Saturday. Highs in the 70s and lows in the 50s.

Precipitation

For 24 hours ended at midnight, 6.82. Total this month to date, 7.27. Normal this month to date, 3.38. Excess this month to date, 3.89. Total this year to date, 23.33. Normal this year to date, 15.08. Excess this year to date, 8.25.

Skies Today

Sunset today	6:23 p.m.
Sunrise Wednesday	5:11 a.m.
Moonrise tonight	11:32
Last Quarter	Thursday

Pollution Index

Compiled daily by the Metro Health Department and projected on the following scale: 0 to 50, good; 51 to 100, moderate; 101 to 200, unhealthful; 201 to 300, very unhealthful; 300 to 400, hazardous; above that, very hazardous.

Today's Index, 37.

The pollutant causing this condition is considered particulate.

Pollen Count

Compiled daily by the Metro Health Department and projected on the following scale: 0 to 5, light; 6 to 12, moderate; 13 to 25, heavy; more than 25, extremely heavy.

Latest count: 26.

At least four deaths were attributed to the flooding, authorities said.

In Alabama, record floodwaters raced down the state's two major rivers — the Tombigbee and the Alabama — after 12 inches of rain drenched parts of the state over the weekend and left at least six persons dead.

The number of evacuees in Alabama was expected to rise to about 5,000 today, said Civil Defense Director Warren Rhoades, and most of them would be around Selma. "The worst is yet to come and later on this afternoon and evening we're going to have an awful time getting everyone evacuated," Rhoades said.

— State prisoners worked alongside volunteers — Monday to sandbag threatened levees, as police cars, with sirens screaming, escorted loaded dump trucks through city streets, heading for the river.

"We have survived these trying days and we will continue to survive the trying days ahead," Mayor Dale Danks said.

Danks said reports that the Ross Barnett Reservoir north of town had broken were not true.

"The dam at the reservoir is not breaking. I repeat — not breaking, and it is not being dynamited," Danks said.

. . . Meharry

From Page 1

Financial problems caused college officials to reduce the staff in its Business and Finance Division by one-third, causing the "deterioration" of the college's accounting. As of March, a supervisor and two accountants had been added, but "turnover is still a problem," federal officials said.

Auditors were especially critical of Meharry's use of federal funds. They found college officials overdrew $3.1 million in federal funds for federal grants and apparently used the money to meet normal operating expenses.

Meharry officials categorically denied the charge and insisted the funds "were spent only within the sphere of federal projects, although not necessarily on the purposes authorized by the grantor agency," the report said.

However, federal officials insisted the funds were misused, and are requiring Meharry to repay the money at the rate of $75,000 a month.

An audit of an Agency for International Development grant to Meharry was made to test the adequacy of the college's accounting procedures. The audit found that $92,081 of the $477,109 paid under the grant was misspent and another $178,081 was "questionable."

The auditors noted Meharry received $10 million in federal grants and contracts in 1978. "It is our opinion that an audit of costs charged to other federal projects would disclose the same type deficiencies because many of the deficiencies resulted from inadequate internal controls and poor accounting procedures," they said.

The report noted that "efforts are under way" to correct some of the problems. Management of the financially troubled Hubbard Hospital has been turned over to the Hospital Corporation of America, an internal auditor has been hired, and college management is being decentralized.

Meharry officials conceded there have been some weaknesses in their financial management, due mainly to inadequate staff. But they disputed many of the auditors' conclusions, especially that federal funds were used for non-federal purposes.

Overdrafts of federal grant money occurred because of the federal government's own faulty record-keeping, Executive Vice President Ralph Hines said. "They could not account for $2 million of grants that we had records of."

He conceded the AID grant was "poorly administered" because of changes in personnel, but "it does not represent the level of our performance in administering all other grants," he said.

He said disputes between colleges and the government over the allowability of certain expenses are common because of the government's lack of accounting guidelines.

Hines said financial records for 1978 were incomplete because "as part of normal accounting, you can't look at a full fiscal year until several months after that fiscal year is concluded.

"We know that we can be better," Hines said. "We know there are reasons why in the last three years we have not been able to be better due to a shortage of money, the necessity to reduce personnel in key positions and an emphasis on maintaining a quality educational program where the finance and management side of the institution had to suffer. We really didn't have to have them tell us that."

Jury To Decide Mother's Sentence In Child Abuse

Houston (UPI) — An all-female jury Monday convicted a 27-year-old woman of abusing her young daughter by withholding medicine from her during a critical illness. Today, the jurors were to decide on the defendant's punishment.

Shortly before the court session where she was convicted of criminal negligence, Alice McKnight got a hug and a kiss from her 6-year-old daughter, Kimbesly Ann, who was taken to court accompanied by her guardian paternal grandparents.

The jury was scheduled today to begin deliberating a sentence, which could mean as many as 10 years in prison for the woman.

A string of doctors testified during the two-week trial that after long periods of tests, child abuse was the only explanation for the child's serious illnesses from 1974 to 1976. An infectious disease specialist theorized that Mrs. McKnight may have injured her child because she thrived on the attention given Kimberly and herself during the hospitalizations.

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THE TENNESSEAN 5/30/82

Abortion

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...or respect for child bear-
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...roup to reconsider its po-

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...your old fur into a new
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...61 ext. 4392 for pickup
...a Cain Sloan driver ($10
...skins feet or less) your
...furs cost for insurance
...payments to our
...Church Street
...Service Center
...or stop by
...Cain-Sloan store

Accreditation Issue Looms

'82 Grads Leaving Meharry Amidst Threats, Money Woes

By ED GREGORY

More than 240 health professionals graduate from Meharry Medical College today — leaving an institution that faces administrative changes, threats to its accreditation, financial crisis and confrontation with Vanderbilt University.

For many graduates and continuing students alike, it will be the last contact with Dr. Richard Lester, the controversial white administrator who received a hostile reception from some segments of the community when he was appointed interim president of the predominantly black medical school 15 months ago.

"MANY people viewed Dr. Lester simply as another white person," said the Rev. William C. Dobbins, a member of the Meharry Board of Trust and pastor at Clarke United Methodist Church where Meharry had its beginning 107 years ago.

The National Black Leadership Forum, represented by Joseph E. Lowery of Atlanta, and two local organizations — the Black Community Forum and the Interdenominational Ministerial Fellowship — expressed outrage at Lester's appointment in February of 1981 to serve while a successor to Dr. Lloyd Elam was being sought.

"The problem in part was that there is a lack of role models for young black people, and here in this highly visible position was a white face," Dobbins said.

"AND THERE is a need for people all over to understand that there are blacks who are capable of guiding Meharry."

The opposition faded as Lester waded two-fisted into Meharry's battle to break Vanderbilt's hold on medical privileges at the VA Hospital and Metro General Hospital.

As we look back now over what has been done, we can rejoice at what has happened at Meharry under Dr. Lester's [illegible]

ACCOMPANYING [illegible]

decided to cut the number of first-year medical students by 25%, from 111 last year to 80 next fall.

Administrative changes occasioned by the arrival of the new dean also are expected to have an impact on the operation of the school, hopefully to increase both its prestige and operating efficiency.

"THEY hope to appoint new deans very, very soon," Johnson said.

He declined to discuss the impending changes specifically, but said Satcher has worked closely with the search committee chaired by Lester and "is very pleased with the administrative appointments that have been made."

Included are the hiring of a new vice president for finance, a new hospital administrator and a new administrative dean.

HOWEVER, the school has operated since Lester's arrival without full-time deans in either its medical school or its dental school. When Lester was first appointed, several high-ranking officials resigned or retired.

Some faculty members and other supporters of Elam, who was named the school's first chancellor, complained that he was being "kicked upstairs" because of complaints about management.

Unlike other schools that have both a chancellor and president where the president answers to the chancellor, Elam's new job contained only "external" responsibilities, primarily in fund-raising. In recent months he has been on a "research sabbatical."

SHOP SUNDAY
1 to 6 P.M.
and
All Day MONDAY
(Memorial Day)

Family Booterie
All Suburban Stores
• 100 Oaks • Harding Mall
• Donelson Plaza • Madison Square
• Green Hills • Nashboro Northlake
• Rivergate Mall (Upper Level)

Downtown Store Closed Sun. & Mon.-Open Tuesday 9:30 A.M.

YOUR VANITY FAIR
LOWEST PRIC





MARCH 3, 1981

Nashville Banner Local/Sta

Tuesday, March 3, 1981 13

Federal Fund Dispute

U.S. Seeks Refund From Meharr

By BOB HEETH
Banner Staff Writer

Meharry Medical College, which for years has been the beneficiary of millions of dollars in federal subsidies, is learning to cope with a different experience — paying Uncle Sam.

The U.S. Department of Health and Human Services has required the school to repay between $2.7 and $3.8 million — the mount is still in dispute — in federal that federal officials said were used unauthorized purposes.

The department also has forced Meharry to agree to detailed steps it must take to solve its financial management problems as a condition for continuing to receive the federal funds the school must have in order to survive.

Meharry Executive Vice President Ralph Hines said the school sent the government a $361,000 check Jan. 31 as its first payment on the debt. Meharry is supposed to send in about $700,000 a year until the debt is repaid. Although 20 percent of Meharry's annual tuition and fee revenues, the $700,000 is less than 2 percent of the college's $40 million budget, Hines said.

The payments won't break the cash-poor college, but they could complicate the job of new Acting President Richard Lester as he struggles to put the school on a sound financial footing while complying with the federal government's requirements.

"We're going to be under a terrific burden no matter how much we have to pay," Hines said. "It's a relatively small part of our budget. But any amount of money you have to spend for something you don't include in your programs is significant.

"It means we have to be a lot better than most other institutions in the management of our affairs," Hines said.

Hines blamed the alleged misuse of federal funds on the government's own poor record-keeping. He said when the government converted to a computerized grant system seven or eight years ago it lost track of many grants it had given to Meharry.

"They are holding us accountable for many grants which we received but which they don't have any records of," Hines said. "Part of it is our fault, but it is not all our fault. They were not operating as efficient a system of grants management as they should have been."

He said Meharry officials have agreed to begin repaying $2.7 million while they continue to search for evidence the money was used on federal grants. Hines said he hopes eventually to persuade federal officials the college should pay significantly less than $2.7 million.

"We have documented — not to the satisfaction of these auditors — but we have documented that every penny of it was used for a federally supported program," Hines said.

Meanwhile, HHS auditors contend the college owes $3.8 million. The auditors are continuing to investigate the situation and federal officials have set May 1 as a tentative deadline for determining exactly how much Meharry owes.

Lester, a Meharry trustee who arrived on the job only Monday, said he is not familiar enough with the situation to comment on it. Hines was familiar with the controversy — and charged federal officials broke a promise of confidentiality by releasing information about it.

"This isn't information that has been made public," he said. "We had an understanding they were not to release anything on this and they have released it."

The dispute over the college's use of federal funds as detailed in audit reports released to the Nashville Banner by the HHS Office of Inspector General.

Institutions such as Meharry which receive federal grants can draw down the funds as they need them under a "letter of credit" arrangement called the Departmental Federal Assistance Financing System. Federal auditors have claimed Meharry drew down more funds than they actually spent on federal projects, apparently using the rest to help cover general operating deficits.

Auditors first noticed the situation in a 1978 review of Meharry's finances in which they determined the college had overdrawn $2.5 million.

Department officials first tried to arrange for Meharry to cover the amount by putting more of its own money into federal-funded projects. But in a Feb. 4, 1980, report, federal auditors claimed Meharry wasn't fulfilling its part of the bargain.

Federal officials in March negotiated two more agreements with Meharry. Under the first agreement, Meharry promised to repay with interest the money it had overdrawn, a liability which federal auditors now said added up to $3.8 million.

The second agreement included a number of conditions Meharry would have to meet to continue receiving the millions of dollars in "financial distress" grants which the college must have to balance its budget, said Jack N. Markowitz, HHS acting deputy assistant secretary for health operations.

"Meharry had to agree to improve their management and fiscal capacity as well as



Mark Howard

Behind Tough Talk

Fund-Raiser Held To Aid Gillock Case



By MIKE PIGOTT
Chief Political Writer

State Sen. Edgar Gillock today confirmed that several persons, including Capitol Hill lobbyists, have

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Business Briefcase . . . 16

Meharry

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to maintain tight control over their funds," Markowitz said.

The agreement specifically required Meharry to:

- Hire an accounting firm to help institute changes in the college's accounting system.
- Hire a consulting firm to help in long-range financial planning.
- Hire additional staff in the financial management area.
- Submit a detailed, month-by-month plan on how Meharry planned to use $7.8 million in financial distress money this year as well as monthly reports on how it is following the plan.
- Submit for federal officials' review the qualifications of any key staff people Meharry proposes to hire as well as the requirements of the job they will hold.

Although the agreement appears to give the federal government an unusual amount of authority over the school, federal officials insisted they had nothing to do with the February decision to move Meharry's former president, Lloyd Elam, into his current slot as chancellor and appoint an acting president to run the college.

"If they were going to make a key personnel appointment, we wanted to make sure whoever they appointed was qualified," Markowitz said. "We did not make a condition that they change their top leadership. The decision to change their president was made by the board."

Theodore Roumel, HHS coordinator for Meharry, said the agreement contained no penalties on the college for failing to carry out the conditions, except that it had to agree to them "for us to reestablish our relationship with the school."



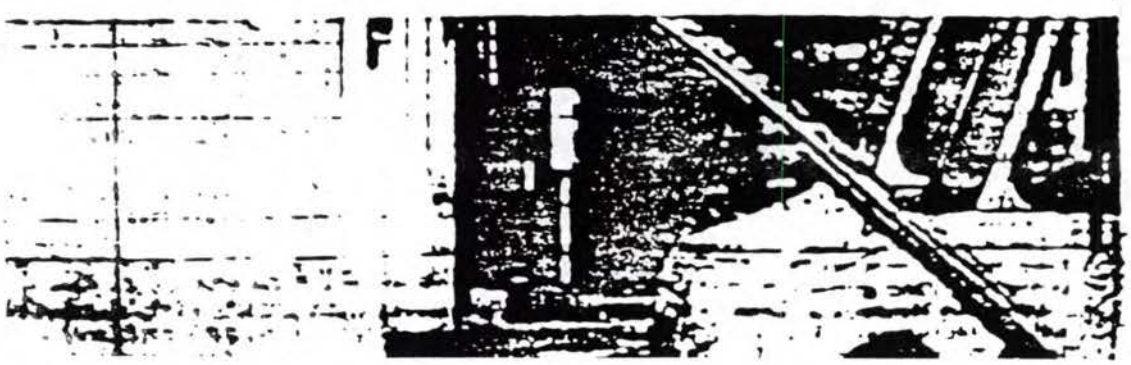
RALPH HINES
'Not All Our Fault'

The department's relationship with Meharry obviously is an essential factor in the college's survival. HHS is paying 90 percent of the monthly payments on Meharry's $28 million construction loan as well as covering the college's annual operating deficits through "financial distress" grants.

The financial distress program is designed to temporarily help medical and dental schools over their budget difficulties, although Meharry has been getting the money every year since 1972, Roumel noted.

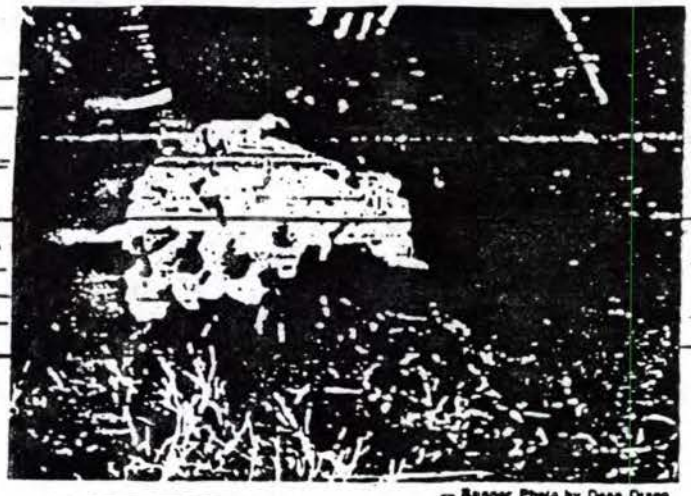
"There was a concern about the length of time they (Meharry) had received these funds. We're not in the business of providing permanent subsidies to schools or any kind of organizations," Roumel said.

Roumel said federal officials helped [illegible] with the agreement of its foundations to supply Meharry with $3 million over the next three to five years to help rebuild the school's financial management staff, which has been decimated by past budget cuts.



MAR

3



— Banner Photo by Dean Dixon

Earl Braly is fighting to have his wife's grave marked.

"If it weren't for these flowers, we wouldn't know where she was," he said, holding a bunch of white plastic day lilies as he knelt on the grass of the cemetery's Garden of Gethsemane where his wife was buried more than a year ago.

Braly is not alone.

Through its "Help Desk" consumer column, the *Nashville Banner* has received numerous complaints regarding H. Winston Ligon-owned cemeteries.

Five of the complaints came from relatives of deceased persons appealing to "Help Desk" for answers to why their relatives' pre-paid markers are not being installed — in one case more than 12 months after burial.

"Help Desk" inquiries went

Eve Muller, [illegible] public [illegible] officer, said she [illegible] to comment on [illegible] complaints because of [illegible] very act. [illegible] Brandt, [illegible] consumer affairs for the Department of Insurance, confirmed that an investigation, but would comment on specifics.

Ms. Muze identified herself as Ligon's secretary and said she take care of these things [illegible] is necessary to call him [illegible].

On Tuesday, she said would look into the prob and call within several Subsequent messages been unanswered. Efforeach Ligon were unsuccessful.

See BRALY, P

NASHVILLE BANNER 3/16/80

Survey 'Ranking' Meharry Blasted

From Staff, Wire Reports

The second survey in two years to rank Meharry Medical College as last in the nation has been denounced by three medical associations and a spokesman for Vanderbilt University.

"It is most unfortunate for that type of a survey to have been published," said Dr. Fred Lucas, associate vice president of the Vanderbilt Medical Center.

"You can't rate schools that way — what criteria do you use?" he asked. "The survey doesn't mean a thing. Meharry clearly is a school that has made tremendous contributions in producing fine doctors."

Dr. Edward S. Peterson, co-secretary of the American Medical Association's Liaison Committee on Medical Education, which accredits medical schools, said the survey "definitely has no validity.

"The report has no foundation. It was not based on a visit to the school," he said, noting that Meharry is a fully accredited medical school.

The survey, published by *Private Practice*, an 18,000-circulation monthly magazine, was sent to more than 200 medical school deans and assistant deans, according to its editor.

Forty-four schools responded to the "Best and Worst" survey despite severe criticism from Dr.

See MEHARRY, Page 9



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Weather

Nashville — Fair tonight with highs in the low 30s. Cooler Tuesday with highs in the mid-50s.

(Weather Map on Page 3.)



DELEGATES — They're off and running—not just the presidential candidates—but the Tennesseans who will vote for them at the national party conventions this summer. Page 13.

REQUESTS — Public Service Commission hearings begin Wednesday on a cluster of rate increase requests from South Central Bell. Page 13.

NCAA — Kentucky and Indiana face tough foes in Mideast semifinals Thursday night. Page 21.

Aunt Martha Gets Tiny Slap On Wrist(watch)

Redicated To You All — —

Aunt Martha Raymer was admiring the new watch her 5-year-old nephew Rob McNulty was wearing. . . . "Does it tell time?" she asked. "No," replied Rob with no apparent intent to be a sassy wiseguy. "I have to look at it." (Sorry about that, Aunt Martha.)

Unfunny thing happened Sunday to Pat Lewis! Pat was driving leisurely to Chattanooga Sunday, passed Samsonite Blvd. in Mur-

See CLOCK, Page 9



'Round The Clock

Red O'Donnell

Wash

A pair of Oklahoma [illegible] **the Capitol to watch the** [illegible] **windfall profits tax**



— AP Laserphoto

Iranian militants holding U.S. hostages prepare for prayer Sunday in the embassy compound.

. . . Iran

been up and down for so long. . . ." His voice trailed off and he did not complete the sentence.

"Most of my colleagues in the Revolutionary Council do not think it appropriate for the government to take over the hostages," Ghotbzadeh told ABC News today. "Personally, I wouldn't mind. I would take international responsibility and local responsibility to do so. Nevertheless, this was the decision of the council not to take them back."

U.N. commission spokesman Samir Sanbar said today in a telephone call to London that the panel met with Ghotbzadeh and with President Abolhassan Bani-Sadr but declined to say whether arrangements for meeting the hostages were discussed.

Ghotbzadeh urged the U.N. panel to "have patience and stay a few more days until we solve the problem" of arranging a meeting with the Americans and said he thought it could be done in "two or three days."

Khomeini's statement also ordered the embassy militants "to deliver copies of all documents concerning the U.S. intervention and the traitor shah" to the U.N. commission. The statement was issued after 10 members of the council met with him in hopes of resolving the deadlock with the militants.

"The panel can meet with those hostages involved in the crimes of the U.S. and the shah for questioning," Iran's 78-year-old revolutionary leader said. "If the panel issues its report on the crimes of the deposed shah and interventions of the invading U.S. in Tehran it will be allowed to see all the hostages."

Khomeini concluded by saying, "I express my support for the Revolutionary Council and the honorable president and ask all the nation to help and support them."

Ghotbzadeh, interviewed by ABC-TV News in Tehran, called Khomeini's ruling a positive development. He said he hoped the U.N. panel would stay in Tehran for two or three more days to meet with several of the hostages, as Khomeini outlined, then issue a "declaration, not a report" of its findings so it could then meet with the rest of the captives. Asked when the hostages might be freed, he reiterated, "This is a decision of the Parliament," which won't be in a position to discuss the issue until May.

The U.N. commission arrived in Tehran Feb. 23 to investigate the revolutionary regime's charges of mass murder and plunder against Shah Mohammad Reza Pahlavi and to try to ease the crisis between the United States and Iran over the hostages.

The Carter administration hoped the commission's visit would result in the speedy release of the Americans.

The militants announced Thursday they were ready to turn the captives over to the council. Ghotbzadeh said Friday the transfer and a visit to them by the U.N. commission probably would take place Saturday. But the militants balked, saying Ghotbzadeh lied when he said he had the backing of Khomeini.

. . . Meharry

John A. Cooper, president of the Association of American Medical Colleges.

The association has long opposed such attempts to classify a very diverse group of institutions," Cooper said.

The survey was termed "blatantly racist" by Dr. Ralph Hines, executive vice president at Meharry.

"We are looking into the possibility of bringing a libel suit against the magazine for publishing slanderous material," Hines said, noting that three of the schools listed as "the worst" were minority schools.

In 1978, a National Science Foundation-funded survey of the nation's 94 medical schools also ranked Meharry last in the nation.

That survey conducted by two Columbia University professors was "as biased as this one," Hines said.

Gilbert Mann, media relations director for the AMA, said he couldn't comment on the survey since he had not seen it.

However, he said the AMA does not rank medical schools.

"Any such survey would necessarily be subjective. What do you look at — the quality of graduates, the quality of the facilities, the quality of research?" Martin asked.

However, Terri T. Burke, the magazine's executive editor, said that although the magazine agreed that it was difficult to rate medical schools, "One should not confuse the difficult with the impossible, as we believe Dr. Cooper has in this case."

The 15 best medical schools according to the survey were: 1. Johns Hopkins, 2. Harvard, 3. Duke, 4. Yale, 5. Columbia, 6. Chicago, 7. Washington (St. Louis), 8. Stanford, 9. UCLA, 10. Michigan, 11. California San Francisco, 12. Cornell (N.Y.), 13. Texas Dallas, 14. Pennsylvania, 15. Washington.

The 10 worst medical schools according to the survey were: 89. Medical College of Ohio, 90. Hahnemann Medical College (Pa.), 91. Texas Tech, 92. Loyola University, 93. Creighton (Neb.), 94. Southern Illinois, 95. College of Medicine and Dentistry of New Jersey, 96. Howard University (D.C.), 97. Puerto Rico, 98. Meharry Medical College.

. . . Clock

freesboro — and it reminded him that he had left part of his luggage at home! (A case of no suitcase?). . . . Can't remember when there were two local parades in one week, can you? . . . Am referring to the St. Patrick's Day parade next Sunday and the Metro Easter Parade the following Saturday.

Mentally pickpocketed in the Rivergate Mall: "When you were 20, you thought that anyone 40 was incredibly ancient. After 40, you're amazed at how perceptive you were at age 20." . . . Robertson Riley hears that the stock market has gone so sour that the Merrill Lynch bull is now working in a rodeo.

Rob Collies moves in with this observation: "You know a couple is over the hill when she won't tell her age — and he won't act his." . . . "Times are really tough," reports Toby McDaniel. "A friend of mine just won a free trip to the Bahamas — and can't afford to go."

NOTES TO YOU — Brother George Goldtrap talking: "Winners are always part of the answers. Losers are part of the problem." . . . Comment via reader Carl Hayden: "In the spring trees get buddy buddy." (Especially those that are going to bear fruit?)

Bridegroom half of newlywed couple at Sunday brunch in the Radisson Plaza's Hunt Room: "Guess you could call this a h brunch." . . . Columbia's L Dawson says hay is grass mowed. . . . Laurie's daily philosophy: "Commen dressed up in a tuxedo."

Westender Ed Murphy say underst and that female extra play parts in horror movies t ever' got an existence." . . . heard on the 5 @ a.m. Mi bus: "Any time you think you influence, just try ordering body else's dog around."

Sick List — Miley (Hee! Sha Nashville Memorial Hospita suffered his second stroke th weekend. . . . Turner troubl tongues to sing Alex Bezanich learn today if another hear gery session is necessary. (it'll be his fourth.) Alex is Thomas Hospital.

History — On this date in the Benevolent & Protective of Elks (BPOE) was incorpo . . . 100 years ago the first telephone call was made Alexander Graham Bell call assistant (Watson) in an room. March 10, 1866, cars (horse drawn) began o ing in Nashville, then a c approximately 15,000.

Today's Closer — "Don't you are asking. Just turn on t set, relax and see what four five doctors recommend Jasper, Ga., subscriber J Townsend.

. . . Drugs

building, which is located near Interstate 24 and Harding Place.

The drugs had been stored in evidence envelopes in the building, which is the headquarters for the narcotics division. The first floor of the building, which house Tennessee Law Enforce Planning Commission, wa ransacked. Eberhardt said t that the marauders apparently t force their way into those o but missed most upstairs.

Accreditation

- Without access to VA hospital, many maintain that Meharry will be unable to retain accreditation.
- Satcher's relationship with Melvin Bradley, President Reagan's Policy Adviser, gives added strength to recent sub-cabinet level task force to study access problem with VA hospital.
- Meharry had already lost its accreditation from the Residency Review Committee on General Surgery.

The Tennessean, May 30, 1982

- In 1982, Meharry was not a fully accredited medical school. It was on probationary status. In the article, LCME told Meharry officials that School of Medicine has been extended accreditation for one year on a probationary basis.

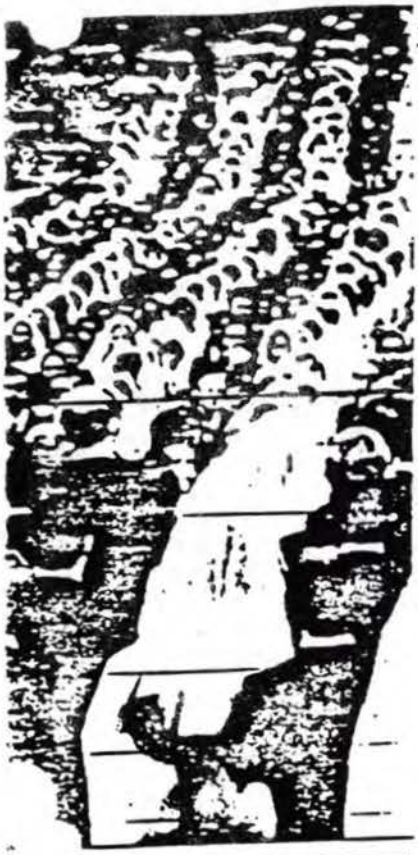
The Tennessean, July 2, 1982

- Dr. David Satcher offered to show Metro Hospitals Board a confidential 1980 accreditation report in exchange for equity of access at General Hospital. This was not given to the board earlier. Board is not sure if report will remain confidential.

The Tennessean, July 2, 1982

- National accrediting team tells Meharry they would recommend full, seven-year accreditation of Medical School.
- Dr. Louis Bernard, dean of the Meharry School of Medicine, says "it's been a long time since we've had full-year accreditation."

Nashville Banner, March 21, 1990



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ate this as a homicide," he said. "We have to do so until we prove ifferent."

The federal fugitive on the "FBI's "10 Most Wanted List" had luded state and federal drug en- forcement agents since March 1981 when authorities foiled a shipment of 614 pounds of virtu- ally pure Colombian cocaine at the Sevier County airport near Gatlinburg.

Thompson said Kageler, whose head had been deeply gashed twice by a boat propeller, drowned after apparently being

iler



• NASHVILLE BANNER 3/21/90

LOCAL/ STA

arry forced to stop ery training program

I College will ns in June af- ce a national ttee to allow m to continue.

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has been with- June 1991, for ing programs in obstetrics and

so formerly chaired nt of Surgery for 14 e college would be- mediately to establish ncy training program abattle said he boped the thatm would reopen by mi wi

officials also are asking ccrediting committees der their decisions to approval of the pedia- obstetrics and gynecolo- ams.

Eddie Hoover, current chairman of surgery, said he has begun to look for positions in other residency programs for the 18 surgery residents at Meharry. "I've got 18 young men whose lives have been shattered by this decision," Hoover said.

Residents are medical school graduates who are specializing in fields such as surgery.

The loss of accreditation results primarily from lack of patients at Hubbard, Meharry's main teaching hospital.

Bernard, 64, is working on plans to strengthen Meharry's training programs. But he will not be here to see them through, for he plans to resign as dean July 1 to head a cancer program at Meharry.

He will be succeeded as dean by Dr. Henry Foster, chairman of obstetrics and gynecology.

Bernard is optimistic a proposed affiliation between Meharry and a 620-bed hospital in Brooklyn, N.Y., will be approved by May. The affiliation with Interfaith Medical Center would dramatically strengthen Meharry's training programs.

"That will provide us with the kind of resources we've never had before," he said.

Earlier this month, a national accrediting team told Meharry officials they would recommend full, seven-year accreditation of Meharry's medical school.

"That's something I'm very pleased with," Bernard said. "It's been a long time since we've had full-year accreditation."

The proposed merger of Metro General and Hubbard hospitals, now under consideration by the Metro Board of Hospitals, also would help bring more patients to the Meharry campus, he said.

Bernard said he was resigning as dean "so I can do some of the things I've delayed for the past 20 years — become proficient with the flute, play golf two or three times a week and do some writing."

Foster declined to comment about his new appointment until an official announcement was made.

But he said he has asked the national accrediting committee to reconsider its decision to withdraw accreditation of the obstetrics and gynecology program because it failed to consider the training residents receive at the Fort Campbell hospital.

Bernard said he will direct the



Louis Bernard
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an admits killing, fficer says

Toni Dew

FRANKLIN — A Rutherford County horse trainer charged with murdering a Williamson County man after an argument over a game of horseshoes admitted to police that he was the gunman, testimony revealed Tuesday.

Charles Toombs, 49, walked out of Hugh Warpool's home on Burke Hollow Road and told Reggie Hope, the first Williamson County



THE TENNESSEAN 7/2/82

Meharry's Lid On '80 Report A Sticky Issue

By DWIGHT LEWIS

Meharry Medical College's gesture to show the Metro Hospitals Board a confidential 1980 accreditation report is appreciated, but the controversial document may be open to public scrutiny if it does.

Hospitals Board Chairman William R. Willis, replying to the offer made earlier yesterday by Meharry's new president, Dr. David Satcher, said that as a rule, whatever comes before the board is a public document.

"I APPRECIATE Dr. Satcher's gesture but I will have to withhold any comment concerning his proposal for confidentiality until I can see the specifics of it," Willis said.

During his first press conference as head of the predominantly black college, Satcher — who took over as Meharry president yesterday — said if the Hospitals Board decides to move forward on Meharry's request for equity of access at General Hospital, he favors letting the board see the 1980 accreditation report given to Meharry by the Liaison Committee on Medical Education (LCME).

He said it is appropriate "for us" to share the report with the board only as long as the report is treated as a confidential document.

HOSPITALS BOARD members have said they want to examine the accreditation report before recommending whether Meharry's medical students should share equally in General Hospital facilities presently situated by Vanderbilt University medical

[illegible] Meharry officials

(Turn to Page 4 Column 3)



A Day Unique in History

NEW YORK — There has never been a wedding day to match it. The Rev. Sun Myung Moon, right, head of the Unification Church [illegible] day in history, jo

$200 Million Cocaine B

By WOODY REGISTER

The reputed mastermind of a $200 million drug shipment to [illegible] Tennessee which resulted in the largest airplane cocaine bust in U.S. history has drowned off Florida's Atlantic coast.

A commercial fisherman found the body of Charles Leslie Kagerer Sr., 48, of Meridian, Texas shortly after dawn June 21, floating 3½ miles off June Beach, a popular resort near Palm Beach, according to Sgt. Tommy Thompson, a Palm Beach Sheriff's Department [illegible] investigator.

"We will continue to investi- gate this as a homicide [illegible] "We have to do so until we prove different."

The federal fugitive on the FBI's "10 Most Wanted List had eluded state and federal drug enforcement agents since March 1981 when authorities [illegible] shipment of 614 pounds of virtually pure Colombian [illegible] at the Sevier County airport near Gatlinburg.

Thompson said Kagerer whose head had been [illegible] twice by a boat propeller, drowned after apparently being [illegible] jailer

NO [illegible] abandoned [illegible] that [illegible] minutes [illegible] when [illegible] Pal [illegible] tors [illegible] day [illegible] whose [illegible] addre [illegible] said [illegible] Kager [illegible] Wh [illegible] using [illegible] in fu [illegible] from [illegible] said

VU Student, at 13, Not Just Bookworm

By CHARLES L. PONTENAY





— Staff photo by Doug Limmer

Dr. David Satcher Takes Helm With Optimism

"We feel equity of access and improve patient care"

Meharry Document's 'Secrecy' a Dilemma

(Continued From Page One)

had said they were reluctant to release the report because it includes confidential personal information that should not be used to pursue sexuality, and because the conclusions are tentative.

Asked if he thought Meharry officials were correct in not giving the board the 1988 report earlier, Satcher said "Meharry [illegible] was here at the campus at the time."

HE SAID MEHARRY also is willing to give the board the latest investigation report [illegible] prepared by the LCMS in Chicago.

Although Meharry officials have not yet received the full report, they have been told that Meharry's School of Medicine has been reviewed favorably for the next four or five years on a probationary basis.

Meanwhile, Peter Curry, Metro's legal director said today that he was sure whether the Hospital Board would be able to keep Meharry's 1988 accreditation report confidential if the board got it.

"IT WOULD depend on whether the information is a public record," he said. "There are several factors to be considered and [illegible]

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Senate Panel Passes Tax Hike for 4 Groups

(Continued From Page One)

At 13, VU Student Not Just Bookworm

(Continued From Page One)

pital.

"As we look back now over what has been done, we can rejoice at what has happened at Meharry under Dr. Lester's leadership," Dobbins said.

ACCOMPANYING Lester on the dais during commencement exercises tonight will be the men and women who remain on the front lines of Meharry's fight for life, including president-elect Dr. David Satcher and Dr. Frank Royal, "Alumnus of the Year" and president of the National Medical Association which represents the interests of black health care professionals.

Satcher, approved by the board of trust in January, has worked closely with Lester in recent months on the VA hospital access negotiations that recently brought a glimmer of hope when a special White House task force was appointed to examine the issues.

VA officials had been reluctant to come to Meharry's aid, but recently asked an accreditation panel to withhold its judgment pending a White House task force study under way by representatives of the VA and the Department of Health and Human Services.

AND ROYAL, working through the National Medical Association, has helped make a national issue out of Meharry's tenuous position, which has produced almost half the country's black physicians.

Satcher, who takes office July 1, also might be able to further that goal because of his acquaintance with Melvin Bradley, President Reagan's policy adviser. Recently, a sub-cabinet level task force was formed to study the problem Meharry has had in gaining access to VA hospital here. Without that access, many supporters maintain, Meharry will be unable to retain its accreditation from the Liason Committee on Medical Education (LCME.)

Royal will deliver the commencement address to 118 graduating physicians, 55 new dentists, 26 health care administrators, 19 nurse practicioners and two dozen others degrees in other medical career fields.

HE AND other speakers are expected to present empassioned pleas for the preservation of Meharry's heritage.

However, the problems facing Meharry are very real.

The school has already lost, but might regain if the amount of surgical training available increases, its accreditation from the Residency Review Committee on General Surgery.

"THE WHOLE issue there is whether the VA is going to grasp the nettles of the long overdue sharing," said Meharry Board of Trust Chairman Victor S. Johnson. "That [task force and LCME] process is going to be the deciding factor."

Because of the myriad financial, staffing and facilities problems, Meharry officials recently



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Medical

- Foster states that amniocentesis is used "for many reasons" at Meharry. Foster said that there may be cases where an abortion is performed when a disease is found through the tests that could only be transmitted to males.
- Foster is cited as a member of the HEW Ethics Advisory Committee, and will request that the committee look into allegations of physicians performing abortions because baby would be the wrong sex.

Nashville Banner, September 6, 1979

- Foster details abortion suppository used at Meharry's Hubbard Hospital; gives statistics and other information.

The Tennessean, September 4, 1981
Nashville Banner, September 4, 1981

- Threatened loss of Meharry's midwife service. Foster comments.

The Tennessean, September 8, 1981

- State's largest medical malpractice judgment handed down against Meharry-Hubbard Medical Center. Woman was left disabled after sterilization surgery at the hospital in 1981.

Nashville Banner, September 2, 1987

ervative Baptists Revive Infighting

...tives in the ...t Convention, ...nary stu... ...rrecting ...hat pla... ...thern conven... ...s.

...ans with strong ...al organization ... attempts to ...tion of "liber... ...except the liber... ...le will be re... ...June's annual ...

...verybody who ... has a loyalty to the Southern Baptist Convention is working to get people to the next convention next June," said Dr. Bill Sherman, pastor of Woodmont Baptist Church.

He says he believes some people remain dissatisfied with the resolution of the dispute, but that the latest bit of controversy — a survey on the attitudes of graduates of Southern Baptist Seminary at Louisville — is isolated.

Evangelist R.L. Hymers and William A. Powell Sr., editor of the *Southern Baptist Journal*, cite the study as proof that the Louisville seminary is turning out pastors who are unable to unflinchingly affirm their faith.

POWELL, OF Atlanta, says the study shows "the more a student studies at Southern, the less he believes in the Bible."

Dan Martin, editor of the *Baptist Press*, agreed that the current controversy may be isolated, but said:

"We are a long way from being free from conflict."

POWELL ACCUSED Martin and other publishers of Baptist periodicals of ignoring the evidence and failing to inform church members that liberalism is being fostered at the seminary.

"I have a deep conviction that Southern Baptists want to know what's in this thesis," Powell said. "As long as the Baptist Press and most state newspaper editors do their best to keep it from the people, I will do my best to get it to them."

Meanwhile, the author of the study, Nord Hollyfield Jr. of Countryside, Ill., and the ultra-conservatives are misinterpreting his findings.

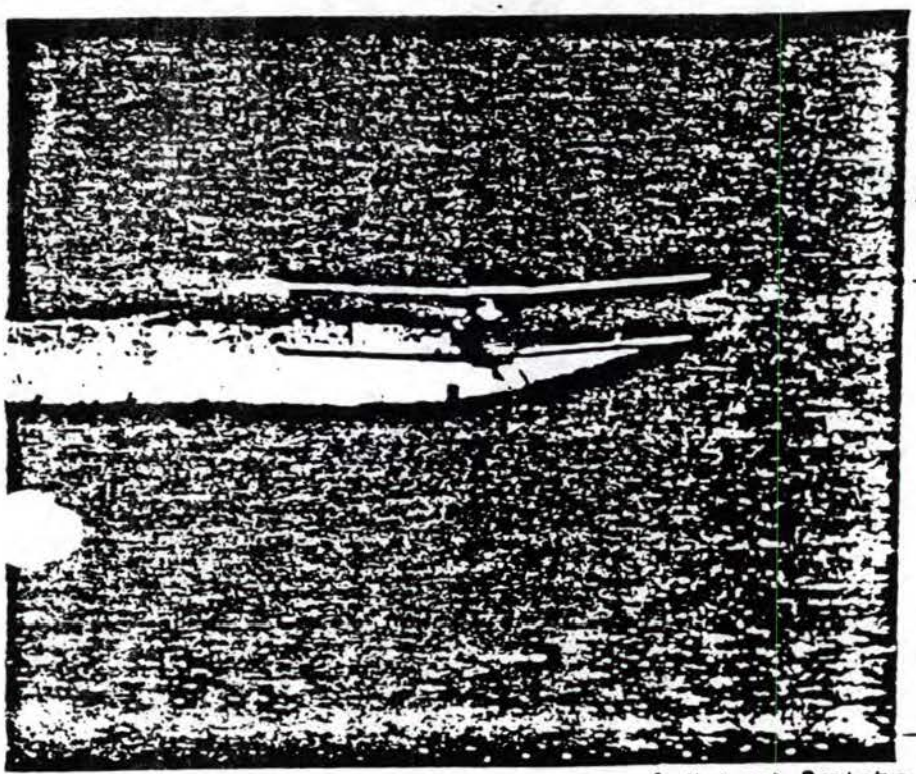
HOLLYFIELD'S thesis examined the attitudes of 182 of 2,113 students in an attempt to determine degrees of Christian orthodoxy. Portions of the study were reprinted in a recent edition of Powell's *Journal*.

"I don't see how anyone who looked at the thesis honestly could have come up with their interpretation," Hollyfield said. "That is not at all what it said.

"They have taken a tiny portion of my thesis and misused it."

HOLLYFIELD SAID his research confirmed general findings - among - other - religious groups that traditionally defined orthodoxy declines as education increases.

(Turn to Page 4, Column 5)



—Staff photo by Dan Loftin

...y Flying High

...metimes flies so low his Grumman Ag-Cat wheels spin as they brush the beans.

...y Pull Plug on Midwife Service

...ting future ser... ...al," she said.

...e transferred ...ry's public in... Last August, ...old *The Tennes*... ...ork to improve ...t load through a ...marketing pro...

...n that Hubbard ... 425 beds but ...f the 250 beds

"I'm not at liberty to divulge anything that I know," said Pearline Gilpin, the nurse-midwife who heads the midwifery service. She, too, referred queries to Ms. Jackson.

MS. GILPIN, on a sabbatical, heads Meharry's midwifery education program, which is not operating this year. She was at Hubbard Friday to compile figures on the use of the midwifery service, which employs two full-time nurse-midwives.

The service had six deliveries during August, she said. "Sometimes we have less than that," she said when asked if the number for August was typical.

Dr. Henry Foster, professor and chairman of the Department of Obstetrics and Gynecology, says no decision has been made to close the service. He refused to confirm the subject was under discussion.

"I CAN'T confirm that," he

(Turn to Page 4, Column 2)

Pakistan Says Afghan Troops Crossed Border

ISLAMABAD, Pakistan (UPI) — Soviet-supported Afghan troops crossed more than three miles into Pakistan yesterday to search a village that was strafed and bombed during the weekend by two MiG jetfighters, Radio Pakistan said.

It was the first time ground forces of the Afghan regime, installed by the Soviet Union, were reported to have crossed into Pakistani territory. Pakistani officials have reported more than 100 air violations in the past year.

THE OFFICIAL radio said 40 Afghan troops entered Shabbo Killi village, in Pakistan's Baluchistan province about 3.5 miles from the border, and began house-to-house searches until Pakistani frontier guards, who were called in by the villagers, arrived.

As soon as the Pakistani troops approached the village, about 60 miles northeast of the provincial capital of Quetta, the Afghan troops retreated with their two

(Turn to Page 4, Column 3)

'shop Starts Unpopular eutron Bomb Protest

...H A. BRIGGS
...s News Service

... — In this hub of ... nd nuclear weapons ...ction, Bishop Leroy T. ...iesen of the Roman Catho...ese here, has begun an un...r, one-man campaign ...t the neutron bomb.

...a cause being espoused by ...reasing number of Ameri...hurchmen alarmed by the ...ace.

...THIESEN, 60, a self-ef... clergyman, last month ...the decision by President ...n to build the new bomb ...test in a series of tragic ...e positions taken by our ...ment." The neutron bomb ...ned primarily to kill tank ...with a lethal dose of nucle...iation, instead of with ...fects.

...hiesen has asked workers ... nearby Pantax plant, ...assembles all of the nu...nuclear weapons, to con...esigning, but so far none ...e so.

...bishop's stand adds to a ...g outcry against nuclear ...y religious leaders in vari...ts of the country. Many, ... Matthiesen and the Rev. ...raham, the Southern Bap...angelist, have emerged ...ious traditions that ...efrained from criti...ry programs. But ...weapon systems and ...capping of nuclear arms ...ed a call to activism on ... and theological grounds

...U.S. government and a ...ant segment of U.S. religi... including Catholic — ...hip may now be on a colli...urse over the moral impli... of defense policy," said ... Shaw, spokesman for ...an Catholic bishops

...ke the Vietnam era, this ...involve simply a handful ...ifists pouring blood on ...les," he said. "Instead it ...s mainstream leaders of ...denominations."

...hiesen's statement has ...a ruckus here that is not ...ed to soon calm down. ...he fact that none of the ...employees at the highly se...antax assembly unit has ... the bishop's call so far. ...Catholics have flatly ...ed with his stand.

...ERT Gutierrez, an or...

...ntists Report New ...biotic Developed

...TON, N.J. (AP) — Sci... ...y have developed a ... ...ntibiotic that could ... ...infections resistant ...e drugs.

Kenneth Rubin, director of ... affairs at the Squibb Insti... Princeton, said the antibi... derived from bacteria, ...than fungi, as is penicillin ...be able to cure diseases ...

...dained deacon of the diocese who has worked 10 years at Pantax, has felt considerable pressure. Seated in his living room, Gutierrez acknowledged that he had done considerable soul-searching over his Pantax job for months and had decided he was doing nothing wrong. Further, he said, he would ask to become an inactive deacon rather than give up his livelihood if the bishop should ask him to choose.

The new anti-nuclear movement has grown largely around a conviction spelled out in "The New Abolitionist Covenant," initiated by four leading Protestant and Catholic peace groups and published in *Sojourners* magazine, an evangelical publication.

"At stake is whether we trust in God or the bomb," the Covenant says. "We can no longer confess Jesus Christ as Lord and depend on nuclear weapons to save us. Conversion in our day must include turning away from nuclear weapons as we turn to Jesus Christ."

BUT AS the storm around Matthiesen shows, the movement faces formidable obstacles. The bishop's statement has been denounced by many elements of the Texas Panhandle population that appear to represent majority thinking.

The diocese itself covers 45,000 square miles of a territory whose people pride themselves on religious and political conservatism and set great store by advanced weaponry as a deterrent to Soviet Communist aggression. Pantax, which is operated by the Department of Energy, has a $45-million-a-year payroll and is the area's second largest employer.

"The majority of people here," said Bill Cox, a local newspaper editor who opposed the bishop in a recent column, "welcome a tough stance."

Many others have rejected the bishop's views as naive and idealistic. Mayor Rick Klein of Amarillo told reporters he was "shocked" by the statement. He said he believed the bishop had chosen "not to take care of church matters but to take care of politics instead."

MATTHIESEN, who edited the diocesan newspaper for 32 years before being named a bishop in March 1980, said he expected the criticism. He said he was pleased, on the other hand, with considerable support offered in phone calls and letters, many from distant parts.

"I'm no rabble rouser," he said. "On the whole I accomplished what I wanted to by bringing an issue to the consciousness of people. It's amazing how people have begun to live with the unthinkable."

Until recently, he said, he had been unaware of the full scope of nuclear activity at Pantax. He said he has been slow to come to his present position and estimated that he has spent 100 hours studying the issue.

There was little doubt among Manhattan's West Side that are and MX m...

150 Protesting Polish Prisoners Trans...

By The New York Times

BYDGOSZCZ, Poland — In the latest of a series of prison uprisings throughout the country, 150 inmates barricaded themselves inside the main detention center here for two days.

They held out for a list of demands and grievances that ranged from poor shoes to torture.

THE PROTEST ended shortly before 7 p.m. yesterday when the prisoners were transferred peacefully to other penitentiaries in neighboring cities. There was no immediate word on how many of their 28 demands the government had agreed to.

"The conflict was resolved," said Marianna Nowak, a local Solidarity leader. "We have intervened at the level of the prime minister and the episcopate. No one was hurt and there were no incidents."

The protest followed a massive breakout during a riot Saturday that was touched off when guards in a watchtower shot and seriously wounded a 17-year-old prisoner. About 190 inmates escaped and at least 150 are still on the run.

THE PRISONERS who stayed behind and occupied the squat, four-story red brick building called simply "the red house" enlisted the local Solidarity union as mediators.

The union provided rotating pairs of volunteer hostages to stay with the prisoners, arranged talks with officials from the Ministry of Justice and deployed "worker guards" with Solidarity armbands to control a large crowd that ebbed and flowed in front the prison.

Even before the prison break, Bydgoszcz (pronounced bidgosh) was on edge. Solidarity members were infuriated by a government decision announced Aug. 31 to drop an investigation into an incident of police brutality against unionists last March. In response, red-and-white flags are flying from almost every factory roof and gate — a sign the region is on "strike alert."

TWO ESCAPED prisoners turned themselves in yesterday at the Solidarity office, not at the prison - another indication of the trust placed in the union, as opposed to the authorities. About half a dozen have put themselves under the union's protection so far.

"It was all very strange," one escapee said. "It was too easy. There were no guards anywhere. They just disappeared."

Prisoners interviewed by Soli...darity claim... torture w... They said ... truncheons ... times on t... feet, and pu... cells for mo...

Some pri... been subje... what they c... It is a wo... leather str... ened to the ... er faints. ... who serve... tages said ... yice, in a s... room of the...

Hubbard, Meharry Midwife Service May Be Stopped

(Continued From Page One)

said. "I'm not aware of that. I'm not aware that a decision has been made. It's been thought about, that would be fair to say. But it hasn't been discussed in any official capacity."

Ms. Jackson said the shutdown of Hubbard's midwifery service would eliminate Nashville women's option of using a midwife during pregnancy, labor and delivery. She says the Maternal and Infant Care (MIC) program at General Hospital accepts only women who can meet low-income guidelines.

An MIC worker confirmed Ms. Jackson's statement, noting that the General Hospital program is for women of "less than poverty scale" who meet federal low income guidelines.

A source says two nurse-midwives in Nashville also are doing home births.

Pakistan Reports Afghan Troops Crossed Border

(Continued From Page One)

armored personnel carriers and two heavy trucks, taking some of the villagers' weapons with them.

Since Russian forces invaded Afghanistan in 1979, Pakistanin officials have expressed concern that the Soviets would cross the border in hot pursuit of rebels.

PAKISTANI officials would not comment yesterday on whether Pakistani and Afghan troops had engaged in battle or if the incursion force was accompanied by any of the Soviet soldiers occupying Afghanistan.

The Pakistani Radio report did not say what kind of weapons the Afghan troops took away with ... the villagers had ...

took place in the same area where two Afghan MIG 17 jet fighters bombed and strafed Saturday, injuring six people.

A PAKISTAN military spokesman earlier reported that the Soviet-built planes had only strafed a civilian border post in Baluchistan province, 650 miles from Islamabad, injuring two civilians who worked at the post.

But the Pakistani Radio broadcast, quoting eyewitnesses, said the jets not only strafed but also bombed the area surrounding the border post and left only after Pakistani militiamen fired at them.

Afghanistan's official Radio Kabul denied the strafing report.

Afghan rebels battling the So...

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4-4	Gass State Office Building	42	44
5-1	Gallatin Road Fire Hall	45	200
5-2	McFerrin Park Center	30	67
5-3	Meigs Jr. High School	62	137
5-4	Cleveland St. Park Center	17	105
6-1	Kirkpatrick Center	19	23
6-2	East Nashville Head Start	37	335
6-3	Holly Street Fire Hall	28	371
7-1	Cora Howe School	42	345
7-2	Inglewood School	55	187
7-3	Metro Health Center	23	273
7-4	Bailey School	48	250
8-1	Lockeland School	61	585
8-2	Rosebank School	53	404
8-3	Stratford School	61	338
8-4	Dalewood School	84	655
8-5	Cornelia Fort Air Park	53	444
9-1	Jere Baxter School	45	470
9-2	Dan Mills School	74	561
9-3	Inglewood Library	60	750
9-4	St. Joseph School	45	295
10-1	Stratton School	31	345
10-2	Amqui School	36	395
10-3	Neely's Bend Jr. High	66	660
10-4	Madison Park Center	23	327
11-1	Gateway School	33	317
11-2	Goodlettsville Center	102	963
11-3	Little Creek Center	64	426
11-4	Union Hill School	31	382
11-5	B & W Service Station	19	218
12-1	Old Hickory Center	108	1104
12-2	Lakewood City Hall	30	398
12-3	Andrew Jackson School	81	419
12-5	Du Pont High School	205	667
13-1	Dodson Chapel School	23	171
13-2	Bakers Grove Church	75	304
13-3	Una School	132	686
13-4	Percy Priest Lake Center	47	293
13-5	Tenn. School For Blind	18	287
14-1	Donelson Elementary School	88	488
14-2	Hermitage School	116	650
14-3	Donelson Jr. High School	38	305
14-4	Hickman School	27	384
15-1	Margaret Allen School	36	273
15-2	Stanford School	85	699
15-3	Two Rivers Jr. High School	79	586
15-4	Donelson Library	107	826
16-1	T.P.S.	28	232
16-2	Glenview School	44	332
16-3	Glengarry School	56	474
16-4	Vultee Church of Christ	33	323
17-2	Napier School	20	65
17-3	Cameron School	44	146
17-4	Fall-Hamilton School	24	249
18-1	Fehr School	12	91
18-2	Headquarters Fire Hall	87	85
18-4	N.E.S. Building	20	32
19-1	Wharton School	81	123

23-4	Brookmeade School		
24-1	McCabe Park Center		
24-2	Shwab Park School		
24-3	Martha Vaught School		
24-4	Charlotte Avenue Fire Hall		
25-1	Woodmont School		
25-2	West End Jr. High School		
25-3	Christ the King School		
25-4	Stokes School		
25-5	Green Hills Library		
26-1	Eakin School		
26-2	Metro Police Center		
26-3	Hillsboro Fire Hall		
27-1	Waverly-Belmont School		
27-2	Murrell School		
27-3	Eighth Avenue Fire Hall		
27-5	Belmont College Barn		
28-1	Sevier Park Center		
28-2	Berry Hill City Hall		
28-3	Turner School		
28-4	Woodbine School		
29-1	Whitsitt School		
29-2	Glencliff High School		
29-3	Paragon Mills School		
29-4	Wright Jr. High School		
30-1	Norman Binkley School		
30-2	Haywood School		
30-3	Haywood Lane Fire Hall		
30-4	Norman Binkley School		
31-1	Apollo Jr. High School		
31-2	Una-Antioch Fire Hall		
31-3	Grace Cole School		
31-4	Cane Ridge Center		
31-5	Mt. View School		
31-6	Cane Ridge Center		
32-1	Granbery School		
32-2	Crieve Hall School		
32-3	McMurray Jr. High School		
32-4	Tusculum School		
32-5	Tusculum School		
33-1	Hillsboro High School		
33-2	Moore Jr. High School		
33-3	Robertson Academy		
33-4	Glendale School		
34-1	Belle Meade City Hall		
34-2	Julia Green School		
34-3	Percy Priest School		
34-4	Parmer School		
34-5	Percy Priest School		
34-6	Richard Jones Fire Hall		
35-1	Hillwood Jr. High School		
35-2	Gower School		
35-3	Bellevue High School		
35-4	Harpeth Valley School		
35-5	South Harpeth Club		
35-6	St. Henry's School		
35-7	Old Bellevue School		
	METRO TOTAL		

Moral Majority magazine article is spu

By Bill Snyder
Banner Medical Writer

A report by the Moral Majority that claims Meharry Medical College is using "poor blacks" to test abortion suppositories is "without foundation," Dr. Henry Foster, chairman of obstetrics and gynecology at the predominantly black college, said today.

The report, published in the Aug. 24 issue of *Moral Majority Report*, implies that the Meharry study — and other efforts at "promoting" permissive abortion — have many blacks concerned that they are the target of "genocide."

"I really don't think the perpetrators of this article are genuinely concerned for poor blacks," Foster said. "Women such as those treated at Meharry run a four- to five-time higher risk of dying during delivery" than the general population.

Babies born to poor women "run a three-times greater risk of dying during the first year," he said. "I think their concern of genocide is spurious."

The "investigative report," by reporter Dexter Duggan, cites a study of a hormone-containing suppository produced by Upjohn Co. of Kalamazoo, Mich., that is being tested at Meharry and other U.S. medical institutions.

The suppository contains prostaglandin, a natural hormone-like substance that stimulates uterine contractions.

By placing the suppository in the vagina, women can start a menstrual period, thereby terminating the pregnancy.

Foster said the suppository could free women from the expense, surgical risks and hospitalization required by conventional forms of abortion.

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NASHVILLE BANNER 9/4/81

24-1	McCabe Park Center	134	342
24-2	Bryan Park School	95	882
24-3	Martha Vaught School	142	447
24-4	Charlotte Avenue Fire Hall	24	211
25-1	Woodmont School	179	419
25-2	West End Jr. High School	175	448
25-3	Christ the King School	194	382
	Stokes School	156	431
	Green Hills Library	133	384
	Eakin School	93	135
	Metro Police Center	87	113
26-3	Hillsboro Fire Hall	155	261
27-1	Waverly-Belmont School	85	178
27-2	Murrell School	108	177
27-3	Eighth Avenue Fire Hall	51	88
27-5	Belmont College Barn	126	100
28-1	Sevier Park Center	152	288
28-2	Berry Hill City Hall	23	175
28-3	Turner School	35	436
28-4	Woodbine School	10	239
29-1	Whitsitt School	33	370
29-2	Glencliff High School	71	764
29-3	Paragon Mills School	102	537
29-4	Wright Jr. High School	27	334
30-1	Norman Binkley School	142	669
30-2	Haywood School	108	612
30-3	Haywood Lane Fire Hall	26	245
30-4	Norman Binkley School	94	437
31-1	Apollo Jr. High School	97	713
31-2	Una-Antioch Fire Hall	56	469
31-3	Grace Cole School	186	845
31-4	Cane Ridge Center	54	380
31-5	Mt. View School	200	792
31-6	Cane Ridge Center	39	223
32-1	Granbery School	168	876
32-2	Crieve Hall School	175	816
32-3	McMurray Jr. High School	30	195
32-4	Tusculum School	45	320
32-5	Tusculum School	130	517
33-1	Hillsboro High School	160	648
33-2	Moore Jr. High School	91	409
33-3	Robertson Academy	208	755
33-4	Glendale School	144	747
34-1	Belle Meade City Hall	151	684
34-2	Julia Green School	158	548
	Percy Priest School	160	508
	Parmer School	87	316
	Percy Priest School	115	494
	Richard Jones Fire Hall	118	430
35-1	Hillwood Jr. High School	74	334
35-2	Gower School	85	706
35-3	Bellevue High School	261	816
35-4	Harpeth Valley School	58	261
35-5	South Harpeth Club	18	133
35-6	St. Henry's School	220	640
35-7	Old Bellevue School	141	514
	METRO TOTAL	11965	58526

[illegible] bills.

While some were inclined to blame the massive defeat on a last-minute desegregation court order that has delayed the opening of schools, Schools Director Charles Frazier said, "I would be less than realistic if I did not accept it as a message that some people are of the opinion public education is not utilizing the dollars we have wisely."

The final vote count was 58,526 against the tax hike to 11,965 for it. Only two of the county's 143 precincts voted for the tax — the Belmont College Barn, which went 126-100 in favor of it, and the predominantly black McKissack School area, where it passed by a 29-19 vote.

Turnout was tiny in the black precincts, which had been expected to go for the referendum if any would. Blacks who did go to the polls generally voted against the tax increase, but by a smaller margin than in most other areas.

Voting was heavy in the suburban precincts where past and proposed school closings have heightened tensions. But at Bellevue Junior High School, which was downgraded from a high school last year, the 3-1 margin against the tax hike surprisingly was less than in the county as a whole.

While overall turnout was low — 70,491, or about 29.5 percent of the county's 239,000 registered voters, went to the polls — it was higher than many observers had expected and higher than school tax supporters privately had hoped for.

"We're not making excuses around here," said Rick Scalf, campaign coordinator for the pro-tax Reach for Excellence Committee. "We think events kind of caught up with us. We started with an uphill fight and it got harder."

School board member Ted Ridings said he is not sorry the board, exercising a right granted to it by [illegible] law, in

Ridings and board members in calling the referendum, but critics of the most unpopular feature that accompanies the opening of school, to put parents on a ballot question for a tax increase. The disruption caused by the 6th U.S. Circuit Court of Appeals' decision to stay implementation of a desegregation plan pulled the rug out from under those hopes, Ridings said.

"If schools were in session, I don't think the margin would be anywhere near this much against us," he said. "I think the voters Council will realize that in the long run."

But Frazier said a multitude of factors influenced the vote, including general opposition to taxes for any purpose, the sluggish and inflationary economy, and a widespread belief that public schools do not have the quality they should.

"It may be people are saying, 'Inflation is impacting on my budget so therefore you should cut your budget and we will be satisfied with less services,'" Frazier said.

"One of the tragedies of these results is we weren't going for a with last. We were going for a [illegible] amount of increase to maintain the level of service," the schools director said.

About $2.7 million of the $8.5 million that was to be raised by the tax hike involves cuts in existing services, with special education and vocational education being hit the hardest. These cuts already have been made with the expectation that they would be restored if the tax hike passed, Frazier said.

But the schools' money problems will be compounded by the fact that $1 million of the $12.4 million appropriated by the Metro Council was to come from sales of surplus school property.

e article is spurious, Meharry doctor says

suppository produced by Upjohn Co. of Kalamazoo, Mich., that is being tested at Meharry and other U.S. medical institutions.

The suppository contains prostaglandin, a natural hormone-like substance that stimulates uterine contractions.

By placing the suppository in the vagina, women can start a menstrual period, thereby terminating the pregnancy.

Foster said the suppository could free women from the expense, surgical risks and hospitalization required by conventional forms of abortion.

The Moral Majority article, entitled *Abortion to be easy as aspirin*, includes subtitles such as "Probe shows suppository tested on poor blacks" and "Blacks believe abortion is used as genocide against them."

The article's claim, that the research was conducted on poor blacks, apparently was based on a comment by an unidentified "local physician" who was reported to say, "If it's at Meharry, you've got to have a lot of blacks."

No statistics on the number of patients, white or black, who participated in the study were given in the article because "Meharry nor Upjohn would comment to me on the race of the subjects being tested in this research," the reporter wrote.

However, Foster said he talked to a reporter from the Moral Majority paper three months ago and was not asked about the number of black women participating in the study.

So far, 105 women have participated in the abortion study, and 33 percent of them were white, he said. Only 2 percent of all obstetrical patients treated at Hubbard Hospital are white.

An additional 150 to 200 pregnant women have tested the suppository, Foster said.

Foster said he would have no further response to the article.

"They have a right to their opinion, but we have a responsibility to do constructive research," he said.

Abortion "is a very distasteful subject to anybody, but in the kind of culture we live in people must have equal access."

"When restrictive abortion laws exist it penalizes unfairly the access of the poor," Foster said.

THE TENNESSEAN 9/4/81

Hank Jr. Back On Opry Stage

Plus Full Lineups/P-47



WEATHER

80s

See Page 24

THE TENNES

VOL. 76—No. 150 A GANNETT NEWSPAPER NASHVILLE, TENN FRIDAY, SEPTEMBER

Moral Majority Asserts Meharr

By ED CROMER

The Moral Majority, in an "investigative" report in its monthly news tabloid, has accused the predominantly black Meharry Medical College here of using "poor blacks to test abortion suppositories."

"I'm outraged," said Dr. Henry Foster, chairman of obstetrics and gynecology at Meharry, "in that I really don't believe the Moral Majority's concern is for poor black people."

FOSTER HEADS a study at Meharry of a hormone suppository which terminates pregnancies by inducing a premature [illegible] period. With the approval of the Food and Drug Administration, the test is being conducted under contract with the Upjohn Co. of Kalamazoo, Mich., producer of the vaginal suppository.

The idea behind the product, Foster said, is to make available an inexpensive form of abortion without surgical risks.

So far, he said, tests on volunteers at Meharry have produced no major complications. "We're finding it safe," he said.

THE LENGTHY article, which is the cover story in the current *Moral Majority Report*, does not make clear how it was concluded that participants in tests of an experimental abortion technique at Meharry are "poor." But a quotation in the article from an unn[illegible] ter shows how the M[illegible] ity determined the p[illegible] are black.

[illegible] Meharry [illegible] to have a lot of black

The tabloid, featu[illegible] tograph of Meharry Hospital on the cove[illegible] among its several h[illegible] the story.

● "Reporter Direc[illegible] ville's Meharry-Co[illegible]

Pentagon Cites Military 'Dangers' In Proposed Cuts

By FRED S. HOFFMAN

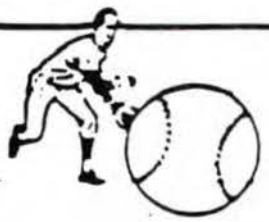
WASHINGTON (AP) — The Pentagon is telling the White House proposed cuts in projected defense spending increases could lead to one Army division elimination, retirement of warships and reductions in present fighter and B-52 bomber strength.

And in Honolulu, where he traveled to address the American Legion convention, Secretary of Defense Caspar Weinberger told reporters, "There won't be any defense cuts."



NNESSEAN

...ILL... TENN FRIDAY, SEPTEMBER 4, 1981



Sounds Overcome Memphis Whammy

Lead Playoffs 1-0, P-29

INDEX

SEP

...ts Meharry 'Uses' Poor Blacks

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...STHY article, ...ver story in the *Majority Report*, ...clear how it was ... participants in ...erimental abor... ...at Meharry are ...quotation in the article from an unnamed doctor shows how the Moral Majority determined the participants are black.

...[illegible] ...[illegible] ...[illegible]

The tabloid, featuring a photograph of Meharry's Hubbard Hospital on the cover, includes among its several headlines to the story:

● "Reporter Discovers Nashville's Meharry College Uses Poor Blacks To Test Abortion Suppositories"

● "Probe Shows Suppository Tested On Poor Blacks"

● "Blacks Believe Abortion Is Used As Genocide Against Them"

The tabloid article was written by Dexter Duggan, who is described elsewhere in the publication by Editor Harry Covert as "an investigative reporter with outstanding credentials."

The basis of the articles' headlines concerning "poor blacks" and "genocide" appear only in the last four paragraphs on Page 6, in which the reporter refers to her unnamed source as an unnamed doctor who believes Hubbard Hospital mainly treats black patients:

"MEHARRY Medical College and Hubbard Hospital are located together in a large black

(Turn to Page 14, Column 1)



Sadat Arrests Large Group Of Policy Foes

By WILLIAM E. FARRELL
The New York Times News Service

CAIRO — The Egyptian government has arrested a large group of Moslems and Christians accused of fomenting sectarian strife.

The arrests, announced yesterday, were made Wednesday

Meharry Attacked By Moral Majority

(Continued From Page One)

area of Nashville. One local physician told me that Hubbard primarily treats black patients. Referring to who the subjects might be for the abortion suppository research, he said, 'If it's at Meharry, you've got to have a lot of blacks.'

"Meharry nor Upjohn would comment to me on the race of the subjects being tested in this research."

"Obviously, it could be argued that an institution with a very strong identification as a black facility was chosen to help perfect a new abortion procedure.

"MANY BLACKS, including civil rights leader, The Rev. Jesse Jackson, have charged at various times that blacks and other minorities have been targeted for 'genocide' by promotion of permissive abortion among them."

Foster said he had no idea how the Moral Majority reached the conclusion that women who have volunteered for the study are poor.

"We see only the patients who come to us, and we don't even make an inquiry into their financial status," he said. "There are no data on their financial status."

AS FOR THE race of the patients, he noted that — apart from the abortion study — only 2% of Hubbard's patients are white. But in the experimental abortion program, 33% have been white, he said.

Foster said virtually all abortions currently performed at Hubbard are by the suppository method. Women seeking another form of abortion usually are referred to outpatient clinics, he said, because hospitilization is "not economical" for abortions in the early stages of pregnancy.

Volunteers in the suppository program are given an explanation of the technique as well as of other abortion procedures, the doctor said.

Marketing of the product, which is several years away, would make it possible for women to buy the suppositories with a prescription and insert them at home, he said.

Wilkinson Plane Paid Legal Fees

(Continued From Page One)

WILKINSON, who used to pilot the plane to Klan rallies in different parts of the country, gave it to Montgomery attorney Knox McLaney for representing him and 177 other Klan members arrested in August 1979 just outside the Montgomery city limits for marching without a permit.

"I agreed to accept the airplane in lieu of a check for my services," McLaney said yesterday.

"I still represent the Klan and had no idea the plane was being used in any way by others who might be opposing the Klan.

"I SOLD SHARES in the plane and what the other partners did when they used it was their business. I certainly would have never used the plane in such a way that it would have damaged my relationship with a client."

One of those who bought a share in the $10,000 plane, a four-passenger, Piper Cherokee 140-B, was Montgomery businessman Leslie Dees, a brother of Morris Dees Jr., a law center attorney.

"We needed to take a deposition from Stanley McCollum in Muscle Shoals," said Morris Dees, "and I called my brother and asked him if I could borrow the plane. Bill Stanton and I flew up there with a pilot we hired here at the center's expense."

McLANEY said he got the plane "almost a year ago" after reaching an agreement with Wilkinson over his legal fee.

"I just agreed to take the plane instead of a check," he said. "After we reached the agreement

School Vote

District, Precinct, Location	Yes	No
1-1 Cumberland School		
1-2 Wade School		
1-3 Murray School		
1-4 Jackson School		
1-5 Jordonia		
2-1 St. Pius School		
2-2 Haynes School		
2-3 Stewart School		
2-4 American Baptist Seminary		
2-5 King's Lane School		
3-1 Madison High School		
3-2 Brick Church School		
3-3 Bethlehem School		
3-4 Old Center School		
4-1 Maplewood High School		
4-2 Tom Joy School		
4-3 Army Reserve Center		
4-4 Gass State Office Building		
5-1 Gallatin Road Fire Hall		
5-2 McFerrin Park Center		
5-3 Meigs Jr. High School		
5-4 Cleveland St. Park Center		
6-1 Kirkpatrick Center		
6-2 East Nashville Head Start		
6-3 Holly Street Fire Hall		
7-1 Cora Howe School		
7-2 Edgewood School		
7-3 Metro Health Center		
7-4 Bailey School		
8-1 Lockeland School		
8-2 Rose Hall School		
8-3 Stratford School		
8-4 Dalewood School		
8-5 Cornelia Fort Air Park		
9-1 Jere Baxter School		
9-2 Dan Mills School		
9-3 Inglewood Library		
9-4 St. Joseph School		
10-1 Stratton School		
10-2 Amqui School		
10-3 Neely's Bend Jr. High		
10-4 Madison Park Center		
11-1 Gateway School		
11-2 Goodlettsville Center		
11-3 Little Creek Center		
11-4 Union Hill School		
11-5 B & W Service Station		
12-1 Old Hickory Center		
12-2 Lakewood City Hall		
12-3 Andrew Jackson School		
12-4 Du Pont High School		
13-1 Goodwin Chapel School		
13-2 Hillary Green Church		
13-3 Una School		
13-4 Percy Priest Life Center		
13-5 Texas School For Blind		
14-1 Donelson Elementary School		
14-2 Hermitage School		
14-3 Donelson Jr. High School		
14-4 Hickman School		
15-1 Margaret Allen School		
15-2 Stanford School		
15-3 Two Rivers Jr. High School		
15-4 Donelson Library		
16-1 T.P.S.		
16-2 Glendale School		

from the abortion study ... 2% of Hubbard's patients are white. But in the experimental abortion program, 33% have been white, he said.

Foster said virtually all abortions currently performed at Hubbard are by the suppository method. Women seeking another form of abortion usually are referred to outpatient clinics, he said, because hospitilization is "not economical" for abortions in the early stages of pregnancy.

Volunteers in the suppository program are given an explanation of the technique as well as of other abortion procedures, the doctor said.

"THEY ARE also provided information regarding options to abortion," he said. "They take a copy of a consent form home with them, then there is a 72-hour waiting period."

Efforts to reach the Rev. Jerry Falwell, founder and president of the Moral Majority, a right-wing, religious-political lobbying organization, were unsuccessful yesterday, as were attempts to contact Editor Covert.

Dr. Richard Lester, interim president of Meharry, declined comment on the tabloid article. But the college released this one-sentence statement through its public relations office:

"IT IS UNFORTUNATE that the *Moral Majority Report*, in characterizing Meharry Medical College as it did in this article, has little or no understanding of the history or mission of this institution."

The suppository being tested at Meharry contains prostaglandin, a hormone-like substance which usually induces menstrual bleeding and terminates pregnancy in four hours, according to Foster.

B. was Montgomery businessman Leslie Dees, a brother of Morris Dees Jr., a law center attorney.

"We needed to take a deposition from Stanley McCullom in Muscle Shoals," said Morris Dees, "and I called my brother and asked him if I could borrow the plane. Bill Stanton and I flew up there with a pilot we hired here at the center's expense."

McLANEY said he got the plane "almost a year ago" after reaching an agreement with Wilkinson over his legal fee.

"I just agreed to take the plane instead of a check," he said. "After we reached the agreement, Mr. Wilkinson brought it up here to me."

McLaney said the cases of the 178 marchers are pending. He said the Klan members initially were found guilty in Municipal Court of marching without a permit, and each was fined $500 and sentenced to six months in jail.

HE SAID the fines were reduced to $200 each and six months probation in subsequent appeals. However, the Court of Criminal Appeals and later the Alabama Supreme Court both refused to review the cases, letting the convictions stand.

The lawyer still has more than 20 days to appeal the convictions to the U.S. Supreme Court.

If, he says, the high court refuses to review the cases or if the Klan decides not to pursue the appeal any farther, the convictions will stand and the $200 fines, now being held by the court in escrow, will be turned over to the city of Montgomery.

"I have asked the Klan if it wants to continue the appeal," McLaney said, "but, so far, I don't have any indication what their intentions are."

13-1	Old Hickory Center		
13-2	Lakewood City Hall		
13-3	Andrew Jackson School		
13-4	De Post High School		
13-1	Goodson Chapel School		
13-2	Bellevue Grace Church		
13-3	Una School		
13-4	Percy Priest Lake Center		
13-5	Tenn. School For Blind		
14-1	Donelson Elementary School		
14-2	Hermitage School	178	
14-3	Donelson Jr. High School		
14-4	Hickman School		
15-1	Margaret Allen School		
15-2	Stanford School		
15-3	Two Rivers Jr. High School		
15-4	Donelson Library		
16-1	T.P.S.		
16-2	Glenview School		
16-3	Glengarry School		
16-4	Vultee Church of Christ		
17-2	Napier School		
17-3	Cameron School		
17-4	Fall-Hamilton School		
18-1	Fehr School		
18-2	Headquarters Fire Hall		
18-4	N.E.S. Building		

Voters Give Pro Tax Increase Er

(Continued From Page One)

Roger Bissell, whose Nashville Tax Alternatives Committee was the primary group to campaign against the referendum, said his organization "just focused the feelings of the community."

Bissell interpreted the vote as a combination of purely economic issues, especially for senior citizens whom he said have called his group to oppose increased taxes, and dissatisfaction with various aspects of the public schools.

RICK SCALF, coordinator of the school board's Reach for Excellence Committee, said his citizen volunteers performed yeoman service, but that external events, such as a last-minute stay of Metro's desegregation plan, complicated their work.

Volunteers had hoped that the turmoil produced by the stay would elicit a "sympathy" vote from parents who admired the way officials coped with a delay in school opening.

Instead, that turmoil produced confusion and hostility among parents whose comments were typified by a mother who voted no, saying: "First they closed my children's school and now they're opening it again, and next year they'll do something else. I don't know who to blame."

THE ELECTION results mean $5.5 million in program cuts the board outlined will remain permanent, including money for remedial aid, gifted students, books and supplies, and reductions in class size.

Other reductions that became permanent with the referendum's defeat include money targeted for improved libraries and counseling and a revision of the unpopular elementary school opening and closing schedule

little support for ... among elderly v ...
"I own prope ... have any childr ... how I voted," ... voting at McCa ... nity Center, wh ... ior citizen, who ... ber name, said, ... teacher, but I' ... vote for this."
"I had to vo ... said another el ... left Belle Meac ... chauffeur-drive ...

THEY—RE ... younger voters ... referendum, s ... resident Ellen ... said:
"I don't favor ... children in pr ... I'm already ... public schools.
"I voted no ... there's a lot of ... et," said Dian ... Bellevue reside ...

RUTH ANN ... sked by three ... agonized over ... ing. Just "you' ... Go and damned ...
"I asked my ... my taxes, will ... Nashville be ... Will the money ... hem, or will it ... gas?"
Thinking ab ... Bellevue High ... H.G. Hill, when ... dren attended ... and that schoo ... opening after ... desegregation ... said.
"I VOTED ... about L. The ... bly came out o ... children. Wha ...

Coats Suspended, Tests Ordered

(Continued From Page One)

regulations dealing with the responsibilities of a policeman in Coats' position and a section of the Metro Civil Service rules, dealing with incompetency and neglect of duties.

Coats referred all questions to one of his attorneys, Charles Williams.

Williams reacted sharply to Casey's decision.

"Officer Coats does not believe and I do not believe that he did anything to warrant disciplinary action," said Williams, who represented Coats on behalf of the Fraternal Order of Police.

"AND I frankly think the psychological examination — which he'll be happy to take — was an afterthought to this sentence that is really a cheap shot."

Casey said Coats was guilty of violating police regulations because of "the fact that in the incident of Aug. 1, 1981, you failed to take command of the situation or to offer any assistance to officer assist officer Allen, two innocent men were shot."

Casey's decision followed a seven-hour Police Department disciplinary hearing in his office — the longest such hearing in recent history.

A six-man board, composed of members of the Police Department, presented 260 pages of documents dealing with the shootings while Coats and his attorneys gave their version of events.

Casey said he concurred with the finding of the disciplinary board — that Coats should be suspended for 20 days — but said it was his personal decision to add the psychological testing and no-pay provisions to the disciplinary action.

WILLIAMS said Coats should not be held responsible for Ms. Allen's actions.

"I really believe that Mr. Coats conducted himself in an exemplary manner — he simply was busier than the proverbial one-armed paper hanger," Williams said, "there was no time to warn" Ms. Allen, he said, that the

troops in

Idaho the served no there is no the Senate treaty as troops

Moorer's letter was signed by such well-known treaty foes as Adm. Elmo Zumwalt, who with Moorer was a member of the Joint Chiefs of Staff in the early 1970s; Maj. Gen. John Singlaub, who was relieved of his South Korean command after criticizing the administration's troop withdrawal poli-

defense Coalition for Peace through Strength.

— Active duty military officers are generally expected to support administration policies, but are free to express their personal views when asked in congressional appearances.

The current members of the

Eugene Rostow of the Committee on the Present Danger and another SALT critic, testified that the treaty would hinder U.S. efforts to maintain military equality with the Soviet Union.

In announcing the resumption of

See U.S.-CUBA, Page 8



Dispute Hanging Over Challengers In Council Races

By KURT SCHMALZ
Banner Staff Writer

A chain of controversies surrounding the Metro Council elections in the 17th and 18th Districts has had some candidates spending more time in the courtroom than on the campaign trail.

The Sept. 13 runoff pits incumbent Charles "Snooks" Cardwell against challenger Thomas "Nick" Wiggins in the 17th District.

In the neighboring 18th District, incumbent Robert "Dude" Reasoner, a charter council member, seems to have his hands full with Larry Rogers, a former Davidson County election commissioner.

But even though Rogers and Wiggins won the right to run against the incumbents in August, their status on the Sept. 13 ballot was undecided until last week.

State Attorney General William Leech ordered both the challengers off the runoff ballot because they failed to file their campaign financial disclosures before the August election.

However, Chancellor Ben Cantrell overruled Leech's opinion Friday, paving the way for Rogers and Wiggins to stay in the race.

Before the August election, two 17th District hopefuls found their way onto the ballot by way of the courtroom and not the campaign trail.

Gene "Little Evil" Jacobs and William Pruitt, both convicted felons, were at first barred from running for the council because of their past criminal offenses.

But after a controversy with the election commission, Jacobs, who was convicted of vote fraud, and Pruitt, convicted in connection with a robbery, had their citizenship rights restored by Circuit Judge Hamilton Gayden.

Pruitt and Jacobs never made it into the runoff, but Wiggins and

Metro Election '79

✓ *First in a series.*
✓ *Shriver to investigate absentee voting irregularities. Page 23.*

Rogers feel they have overcome their controversies.

"I think this whole thing has helped me because the people rea-

See ELECTION, Page 8

College Doctor To Seek HEW Abortion Probe

By ELISE DAVID
Banner Medical Writer

A Meharry Medical College physician said today he will request the HEW Ethics Advisory Committee to look into allegations that physicians around the country are

✓ *Vanderbilt researcher disputes right-to-life claims. Page 19.*
✓ *Abortion rulings stir controversy. Page 23.*

performing abortions because the baby would be the "wrong sex."

Dr. Henry Foster, a member of the panel of the U.S. Department of Health, Education and Welfare, said he will request that the topic is

See SEX, Page 8



Splash

Jones Creek in Dickson County.

TVA Starting 1,400 Layoffs At Hartsville

By DAVID LYONS
Banner State Editor

The Tennessee Valley Authority today began a systematic layoff of 1,400 workers at the Hartsville Nuclear Plant, TVA officials confirmed today.

The layoff of 100 workers per week for 14 weeks is part of TVA's decision to reduce construction at Hartsville, Phipps Bend, and Yellow Creek nuclear plant construction projects. However, TVA officials said all of the layoffs would occur at Hartsville.

More than 100 workers received notices Tuesday that they would be laid off today, TVA information officer John Schlatter said.

"Of those, 97 were carpenters and eight were operating engineers," he said.

Schlatter said the layoffs would continue through the first week in December, when the Hartsville work force would be reduced from 5,600 to 4,200 workers.

"By Dec. 6, work will cease on Plant B at Hartsville," Schlatter said, adding that carpenters, laborers, iron workers and some operating engineers would be most affected.

Schlatter said the layoffs would occur at Hartsville since the work forces at Yellow Creek and Phipps Bend have not peaked yet.

The 800 supervisory employees

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TENNIS — Bjorn Borg is the victor after losing to Roscoe Tanner in the U.S. Open championship. Page 13.

NASHVILLE BANNER 9/6/79

State OKs clinic move for Planned Parenthood

Planned Parenthood of Nashville today won state approval to move its clinic from 112 21st Ave. S. to 412 Dr. D.B. Todd Jr. Blvd.

The move, which should take place in about a year, became necessary after Vanderbilt University purchased the 21st Avenue site and did not renew Planned Parenthood's lease. The building will be used for university office space.

The Tennessee Health Facilities Commission unanimously granted a certificate of need permitting the move, which will cost $1.3 million. No one spoke in opposition to the move.

Planned Parenthood currently is the largest provider of abortion services in Nashville. It also provides family planning, education and women's health care services to help avoid unwanted pregnancies.

"Our goal is to prevent the need for abortions through education and counseling services," said Phyllis Dettman, executive director of the Planned Parenthood Association of Nashville.

Dettman said a fund-raising drive for the move so far has raised $542,000 in pledges and contributions. She said the association will get a bank loan, if necessary, to meet the total cost of the project.

The clinic will move to a vacant building just off Charlotte Avenue. The building will be renovated and expanded to meet the dimensions of the current clinic — about 10,000 square feet.

Nashville: Jesse Jackson to visit McGavock

The Rev. Jesse Jackson, shadow senator for the District of Columbia, is scheduled to address students at McGavock High School, 3150 McGavock Pike, at 11:15 a.m. Thursday.

Jackson, a former Democratic presidential candidate, will be in Nashville on Thursday for a Baptist Church meeting.

NASHVILLE BANNER 1/23/91

Nashville: Tipper Gore to join Meharry board

Tipper Gore, a champion of the nation's children and homeless people, has been appointed to the Board of Trustees of Meharry Medical College.

Meharry officials said Gore, wife of U.S. Sen. Albert Gore Jr., will add significantly to the historically black college's efforts to improve health services for low-income and homeless people, many of whom are children.



Tipper Gore

Gore recently spoke at a national conference on "Children At Risk" at Meharry that also featured U.S. Surgeon General Antonia C. Novello.

In the mid-1980s, Gore gained national attention for speaking out against obscene lyrics in rock 'n' roll music. She also helped organize a nationally touring exhibit of photographs to draw attention to the plight of homeless people.

Last year, Gore helped launch a statewide organization that aims to change the way children with mental health problems are treated. The new group, called Tennessee Voices for Children, believes too many children are placed in mental health institutions because of restrictive insurance policies.

Nashville: Workers file suit in balcony collapse

Two construction workers have filed suit after being injured last August when two apartment balconies they were repairing collapsed.

William M. Murray and Robert Hoyt filed a complaint Tuesday in Davidson County Circuit Court against Brookridge Apartments Ltd. and various designers and developers of the Harding Mall-area complex.

Murray and Hoyt claimed in the suit that they were hired to repair the balconies at the complex, which was constructed in 1985 and 1986. On Aug. 13, Murray was standing on a third-floor balcony and Hoyt was on a platform leading up to the second-floor balcony.

"At that instant, the third-floor balcony suddenly pulled away from the apartment wall with a loud creaking sound," the suit reads. "The second-floor balcony pulled away from the wall almost immediately thereafter and fell. The third-floor balcony then collapsed onto the second-floor balcony, and both balconies collapsed to the ground."

Murray "attempted to jump for a ladder but did not make it. Murray's "left arm and both legs were pinned between the two collapsed balconies."

Hoyt also jumped and suffered broken bones when he landed, the suit says.

Murry asks for $5 million in damages while Hoyt asks for $500,000.

The management of Brookridge Apartments could not be reached for comment.

Metro residents put 155,300 pounds of recyclables at their curbs last week during the beginning of Davidson County's pilot pickup program.

That's 155,000 pounds from some 14,700 homes that may otherwise have made its way to the Bordeaux Landfill, the Thermal Transfer Plant or a landfill in Rutherford County.

About 68 percent of the 21,600 homes in the neighborhoods covered by the pilot program put their bins of reusables at the curb.

"For the first week, that's tremendous," said Robert Cheney, spokesman for Browning-Ferris Industries, the contracted recycling hauler that supplied the figures. "If you broke it down into the individuals that set out, each bin held 10.5 pounds of recyclables."

That compares to a national average of about 8 pounds of trash a day thrown away in the average household, according to Nashville's recycling office.

Normally the entire county throws out about 2,600 tons of trash a day, Metro Public Works says.

But one last glitch will be worked out of the program next week.

Residents with alley garbage

Mercury poiso charged in $3.

By Leslie McCullough
Banner Staff Writer

A Monroe County woman charged in a federal lawsuit Tuesday that she suffered mercury poisoning after having two dental fillings replaced.

The U.S. District Court suit alleges that Delaware-based Kerr Manufacturing Co. marketed and sold Tytin, a cavity-filling material or "dental amalgam," without adequate warning labels and without concern for risk to human life if the product is inhaled.

But the company's attorneys said the product has been used successfully by dentists for more than 150 years, and no such claim has ever been filed.

The suit said Joyce L. Hixson of Sweetwater was having a large filling on two teeth replaced with new amalgam on Jan. 22, 1988, when she allegedly inhaled and swallowed a "large amount of the dental amalgam and elementary mercury vapor."

Plaintiffs in the suit, seeking

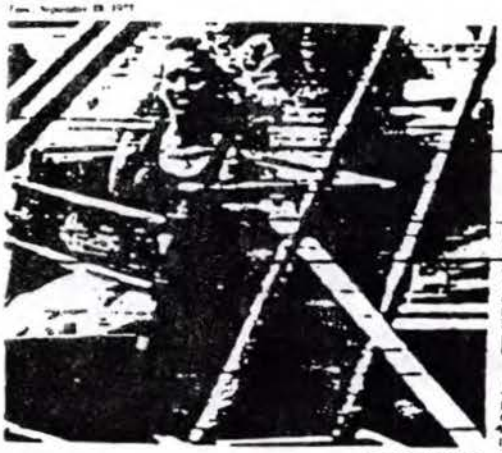
Washington an local alumni ho

By Jessica Pasley
Banner Staff Writer

The Middle Tennessee chapter of the Washington and Lee University Alumni Association has won the 1990 Alumni Chapter of the Year award.

The award, which will be presented tonight during

NASHVILLE BANNER 9/20/77



...man tries out one of many rides at the Tennessee State Fair

To Relinquish Life's Work

...And loving day in and day out with life sized figures of Christ and the agonies that tortured him, Ian Ward said

"I feel I don't have the emotions I used to," he said. "Things don't bother me much anymore."

"I'm sure I could have made a better living (temporarily spending doing something else that I feel I've been fortunate

...ndicates

...l Hopes

Past-Department Head Sues-Meharry-College

By BRUCE BONYCK
Banner Staff Writer

The former chairman of the Meharry Medical College Radiology Department ... filed a suit in federal court against the college, charging that the "Meharry Medical Practice Plan" provides for illegal price fixing and violates the antitrust laws.

Dr. Clarence J. Tarleton Jr. claims he was "deprived" of his position as chairman of the Radiology Department and was ... full-time faculty member and was deprived of his income.

He had been chairman of the department since 1949 the suit says.

The medical practice plan ... requires all full-time faculty members of Meharry Medical College who engage in the practice of providing professional medical care to patients and who charge professional fees to be participating members of said plan. Tarleton claims in his complaint

The plan "provides for an unequal prime leasing scheme" by stating that ... the weakest links for professional services rendered in the care of patients of participating members shall be as established by the committee recommendation of the Meharry Medical Practice Plan

Under the terms of the plan, Tarleton said he is required to endorse over ... all fees received for professional services rendered to or on behalf of his patients and is prevented to ... subject himself to loss of ... privileges by said plan.

The plaintiff names ... as defendants in the suit a participating members of said plan and has requested injunctive relief ... ordering the return of ... membership in ... of funds established by said plan.

Hearings for the suit ... for his removal to ...

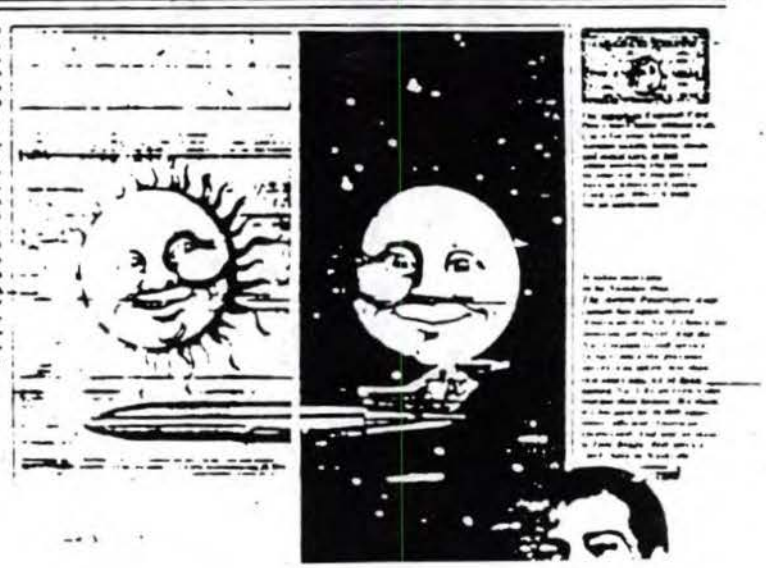
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SALE EN
Suite $640.
8-Piece Suite $699.
"Broy Dotson Oak 8-Piece Suite $2,100.



Early American Sofa Sleeper $197
Jamison Modern Sleeper $235.
Fine 5-Piece Oak Cocktail Group $398.

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NASHVILLE BANNER 10/31/78

U.S. Task Force To Begin Meharry Financial Study

By BOB HEETH
Banner Staff Writer

A federal task force is to begin this week a "comprehensive and extensive study" of Meharry Medical College's financial condition, a Health, Education and Welfare Department official said today.

The study was prompted by concern over Meharry's continued financial dependence on the federal subsidies, said Dick Beattie, deputy general counsel to HEW.

"The federal government has got to decide what role if any we're going to play at Meharry. They're constantly coming to us with requests for more funds," Beatty said.

HEW already is making monthly payments on a $29 million loan for Meharry's Hubbard Hospital, which the college defaulted on this year.

The college also is getting $4 million of $5 million in grants awarded to five financially-distressed black colleges this year.

But the college continues to run a substantial deficit, Beattie said.

"If we gave them everything they could get under financial distress, said it wouldn't be enough. We don't have the authority to give them as much money as they think they need," he said.

The task force, composed of HEW officials and outside consultants, will try to determine whether college officials are managing the money they have well, Beattie said.

HEW could "attach conditions to the money" as a result of the study, he said. He added department officials are uncertain about what conditions could be imposed.

HEW Secretary Joseph Califano told the Senate Appropriations Committee in a letter last month that HEW is trying to find a long range solution to problems of Meharry and other black institutions.

The reasons for financial difficulty at these institutions are fundamentally the same, although those at Meharry are on a much larger scale.

The lack of wealthy supporters and large endowment, combined with high percentages of disadvantaged students unable to contribute substantially to their own educational costs, have produced institutions with chronic financial and administrative problems. Past mismanagement has aggravated an already difficult situation.

College officials could not be reached for comment today.

UTN Teachers' Appeal Denied

By BOB HEETH
Banner Staff Writer

A federal appeals court has rejected the request of the faculty of the University of Tennessee at Nashville to intervene in the UTN-Tennessee State University merger case.

The Sixth Circuit Court of Appeals in Cincinnati Friday barred the instructors from participation by upholding a decision by the late District Judge Frank Gray which denied the original intervention petition.

Faculty representatives said they are considering appealing the decision to the U.S. Supreme Court.

The intervention appeal was one of three merger related cases argued Oct. 18 before a three-judge panel of the appeals court.

A decision on the main case — whether or not the two public universities should be merged — is not expected for several weeks.

"We don't interpret this as having any bearing on the outcome of the merger case," faculty attorney Lewis L. Laska said.

The faculty's suit did not question the merger itself, but was an attempt to protect the rights of UTN faculty under the merger process, said former UTN Faculty Senate Chairman Peter Jordan.

said the UTN faculty already is adequately represented in the case by the UT Board of Trustees, which is appealing the merger.

Three judges of the faculty's suit was filed too long after the desegregation suit became final and that allowing them to raise issues in the case would only delay the merger, which is set to be completed next summer.

In a terse statement, the appeals court said merely that the district court's decision did not violate the rules of intervention.

"It does not appear the appellants are deprived thereby of any right and opportunity to protect their interests by other courses of action available to them," the court said.

Accordingly, it is ordered that the judgment of the district court upon which the appeal herein is taken is affirmed."

Laska said, "The Sixth Circuit Court didn't say anything about any of the issues I raised."

He said the faculty will try to incorporate the safeguards in question they are seeking in the faculty bylaws now being written for use by the expanded TSU.

Williams Quit

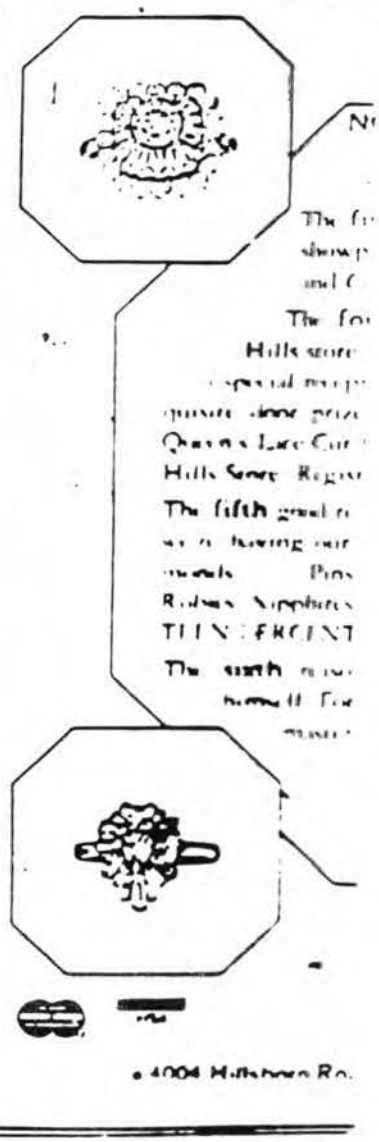
Citing "personal reasons," Republican Vincent Williams today announced his withdrawal from the 54th state House district race.

Williams' withdrawal leaves Democratic incumbent Harold Love and independent Dorothy Brown competing in the legislative race.

While Williams stopped short of endorsing Ms. Brown, he said he believes North Nashvillers "want a change in leadership" in the district.

"I don't think I've decided to throw my support to any candidate 100 percent but I think a change would benefit the North Nashville community," Williams said.

Williams said he [illegible]



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Med school faltered with Foster at helm

Program lost accreditation

By Paul Bedard
THE WASHINGTON TIMES

A-1
2-10-95

The obstetrics and gynecology residency program at Meharry Medical College in Nashville, Tenn., permanently lost its accreditation when surgeon general nominee Henry W. Foster Jr. ran the department — countering his characterization that he kept it operational.

Senate critics of President Clinton's nominee said Dr. Foster misled them on his administration of the department and the college and said it was another example of the gynecologist hiding his record, especially on the number of abortions he has performed.

"He is not being straightforward with the American people and the administration is trying to cover up," said Sen. Dan Coats, Indiana Republican.

Mr. Coats, Slade Gorton of Washington and other Senate Republicans joined Sen. Don Nickles, Oklahoma Republican, in calling on Mr. Clinton to withdraw the nomination because of the differing accounts by Dr. Foster and the White House on the number of abortions he has done in a 37-year medical career.

The growing chorus of GOP voices demanding the withdrawal muted the support for Dr. Foster stated yesterday by six Senate Democrats.

Meanwhile, White House officials vented their frustration with Dr. Foster's inability to settle on a concrete figure on the number of abortions he has performed.

On the same "Nightline" show Wednesday night, the 61-year-old former Planned Parenthood board director said he had done 39 abortions since 1973, but he didn't address his eight-year stint as chief of obstetrics and gynecology at John A. Andrew Memorial Hospital at Tuskegee University in Alabama.

Asked if the White House was satisfied with Dr. Foster's answer that he had performed 39 abortions, White House spokesman Michael McCurry said: "No, we're not satisifed. We will continue to work with Dr. Foster. Many of the records he described last night are only available to him because he's the only person that can request those records."

Dr. Foster had previously said he performed one, then "fewer than a dozen" abortions. He also headed a study on an abortion pill that led to 55 more abortions. And he has disavowed an official government transcript in which he indicates he may have done hundreds more abortions.

Officials at historically black Meharry said that Dr. Foster's obstetrics-gynecology residency program lost accreditation in May 1990 and the withdrawal took place a year later — after Dr. Foster had been promoted to the dean of medicine and vice president of health services.

Several efforts to restore the accreditation have failed. Without accreditation, medical schools can't place students in hospital residency programs, according to the American Medical Association.

Meharry spokeswoman Martha Robinson said the program failed because there weren't enough pa-

see FOSTER, *page A16*

FOSTER

From page A1

tients to sustain a residency internship. "It was clearly a numbers problem. It wasn't a quality issue," she said.

Dr. Edward R. Hill, who was vice chairman of Dr. Foster's program from 1982 until it ended in 1991, explained that black patients chose suburban hospitals in the late 1980s. "We lost a very significant market share among the poor who now had a ticket, Medicaid, to more affluent areas," he said in an interview.

But a prominent Nashville doctor familiar with the program and Dr. Foster said the University of Arkansas-trained physician was a poor administrator.

"He's a great idea guy but not with following through or getting the job done," said the doctor, who requested anonymity.

Senate Republicans and a White House team are studying Dr. Foster's management at Meharry, which twice received government financial bailouts while Dr. Foster was associated with the school.

"One day after he goes on 'Nightline' to brag about running his department we learn it crashed on his watch and he failed to get it accredited. He has a very deep credibility problem," said an aide with the Senate Republican Conference.

Mr. Nickles said that termination of the obstetrics-gynecology program clashed with the impression Dr. Foster left "Nightline" viewers with when he explained the reason for accepting a grant to do a study on an abortion pill in the early 1980s.

On that show, Dr. Foster said, "We have a responsibility in training residents to maintain our accreditation. It's a very difficult job. I maintained an accredited residency program for 17 years [1973 to 1990]. We have a responsibility to teach all residents how to manage the complications of abortion."

Dr. Foster's changing stories on the number of abortions he did along with concerns about his management of the Meharry obstetrics-gynecology program sparked moves by Republicans to kill the nomination. Dr. Foster is to replace outspoken former Surgeon General Joycelyn Elders, fired for controversial statements on child masturbation and sexual conduct.

"In the wake of Dr. Joycelyn Elders' discordant and failed tenure, I believe that America deserves to have a surgeon general capable of inspiring Americans on a broad range of public health issues. Plainly, Dr. Henry Foster's background and the White House's mishandling of his nomination renders him incapable of achieving that goal," said Sen. Phil Gramm, Texas Republican.

"As a result, I intend to strenuously oppose the confirmation of Dr. Foster to become surgeon general of the United States," he said.

Mr. Coats, a member of the Labor and Human Resources Committee, which will vote on the Foster nomination, said, "There is a litmus test here and it is not abortion. It's the truth."

Liberal groups supporting Dr. Foster have charged that the "radical right" is using the Foster nomination to push its agenda.

But Mr Coats said that Dr. Foster simply hasn't told the truth about his past. "You make the same accident three or four times and you begin to wonder if it's an accident."

After watching the nominee get hit for eight straight days, Senate Democrats finally began to rally behind Mr. Clinton's choice. The president also used a press conference with German Chancellor Helmut Kohl to speak in favor of Dr. Foster.

"I think he's a good man. I think he'll be a good surgeon general and I think that that ought to be the issue," he said.

The president also joined with Dr. Elders in bashing Dr. Foster's opponents as ardent anti-abortion radicals.

"Now, I know that those who believe that we should abolish the right to choose and make abortion, which is now legal crimina... try to seize upon this nomination to negate the work of a man's ... and define him in cardboard cutout terms, but I think they're wrong," he said.

Sen. Frank Lautenberg, New Jersey Democrat, said, "This is a vendetta, this is a witch hunt."

A day after giving Dr. Foster a 50-50 chance of winning approval by the Senate, Sen. Barbara Mikulski, Maryland Democrat, said, "Unfortunately, the White House did not do the best job in putting doctor Foster's nomination forward. Maybe that's the way the White House does such things."

• *Major Garrett contributed to this report.*



Photo by Cliff Owen The Washington Times

President Clinton takes a moment from his time with Chancellor Helmut Kohl to reiterate support for surgeon general nominee Dr. Henry Foster

11. Special Requirements for Residency Training in Obstetrics and Gynecology

I. Introduction

A residency program in obstetrics-gynecology must constitute a structured educational experience, planned in continuity with undergraduate and continuing medical education, in the health care area encompassed by this specialty. While such residency programs contain a patient service component, they must be designed to provide education as a first priority and not function primarily to provide hospital service.

An educational program in obstetrics-gynecology must provide an opportunity for resident physicians to achieve the knowledge, skills and attitudes essential to the practice of obstetrics and gynecology and provide opportunity for increasing responsibility, appropriate supervision, formal instruction, critical evaluation and counseling for the resident.

II. Institutions

A. Administration

The administration of the sponsoring institution must demonstrate a commitment to educational and scholarly activities by meeting all provisions of the "General Requirements for Accredited Residencies" for approval of a residency program.

B. Participating Institutions

The Residency Review Committee for Obstetrics-Gynecology, for the purpose of monitoring the structure of residencies, uses the following categories. In all cases, where more than one institution is involved, a formal written agreement must be developed between the responsible administrative bodies of those institutions.

1. Independent--An independent program is conducted within a single educational institution under a single program director. Extramural rotations for a total of no more than 6 months are permitted under the regulations applied to all programs (see below).

2. Integrated--An integrated program is conducted within multiple educational institutions but under a single program director. Each educational institution must have the overall quality and level of supervision and the educational requirements demanded of an independent program. The residents may rotate at any level, including the final senior resident year. The program director must have authority over the educational program in each hospital, including the appointments and assignments of all teaching staff and all residents and must assure the uniformity of the educational experience for each resident. Additional extramural rotations for a total of no more than 6 months are permitted under the regulations applied to all programs (see below). If a program includes rotations for a total of more than 6 months for any resident, at institutions other than those included in the integrated program, that program becomes an affiliated program.

3. Affiliated--An affiliated program is one in which any resident spends a total of more than 6 months in extramural rotations outside of the parent institution (or institutions in the case of integrated programs).

Extramural rotations may be arranged by the program director of either an independent or integrated program in order to enhance the educational experience of the residents. Only under exceptional circumstances, and with written prior approval of the Residency Review Committee, may they be included in the final senior resident year. Residents are appointed by their parent program and assigned by it to the affiliated hospitals, where they spend no more than one-third of the total residency and no more than 12 months of obstetrics-gynecology. Two types of extramural rotations may be considered:

a. If the total time of extramural rotation from the parent program by any resident during the entire residency exceeds 6 months, the program is considered to be an affiliated program and the entire program must receive prior approval by the Residency Review Committee.

b. Rotations for a total of 6 months or less will not require that the program be designated as an affiliated program and these rotations may be arranged by the program director without prior Residency Review Committee approval.

C. The Faculty

1. Program Director–Each program must have a dedicated program director with an interested and competent teaching faculty sufficient in number and quality to be able to supervise and instruct the residents at all levels and in all of the practice areas of specialty.

The program director must be a highly qualified member of the department with substantial experience in education in obstetrics and gynecology and must be able to provide a significant commitment of time and effort to the residency program, demonstrate the ability to organize and direct the teaching program, and maintain a quality teaching staff. The program director is specifically responsible for all communications with the Residency Review Committee, and must report any major change in the residency program. The program director must take responsibility for providing complete and accurate program information forms, including data concerning resident experience, to the Residency Review Committee, so that a proper assessment of the program can be made. Further, the program director has the responsibility of verifying that residents have satisfactorily completed the program.

The program director must be a diplomate of the American Board of Obstetrics and Gynecology, or possess suitable equivalent qualifications. It is desirable that the chief of service of the department be a diplomate of the American Board of Obstetrics and Gynecology.

Assignment of the responsibilities for resident education should be clearly defined by the program director. To assure continuity of teaching efforts and departmental policy, the program director should have a reasonable tenure of office. The Residency Review Committee must be notified of any change of program directors.

2. Attending Faculty–An obstetrics-gynecology education program must have a sufficient number of attending staff with professional ability, enthusiasm, dedication and a sense of responsibility for teaching residents. It would be well for the staff to regard these attributes as a prerequisite to active faculty membership and promotion. The teaching performance of the faculty must be reviewed at least annually.

D. Scholarly Environment

Documentation of scholarly activity on the part of the program and the faculty must be submitted at the time of program review. The teaching staff must show evidence of one or more of the following:

1. Participation in regional or national professional societies;
2. Presentation and/or publication of studies;
3. Participation in research.

Clinical and/or basic science research must be ongoing by faculty in the department.

E. Facilities

1. Outpatient Facilities–Since obstetricians-gynecologists function as providers of comprehensive care for women, experience in the care of ambulatory patients is essential in education programs. Since many of the patient problems seen in the hospital outpatient department are comparable to those seen in office practice, it is essential to provide a closely

supervised experience in an active ambulatory setting that also ensures continuity of care for patients by the individual resident.

Increasing responsibility should be given to the resident under the conscientious supervision of a qualified attending staff member.

2. Inpatient Facilities--Appropriate inpatient facilities must be available for achievement of educational objectives.

3. Medical Records--The fundamentals of good medical history taking and thoughtful, meticulous physical examination must be taught. Information gained by these procedures must be carefully recorded in the medical record. A reliable measure of the quality of a program is the quality of hospital records. These records should include daily appropriate progress notes by residents, together with a discharge summary. The hospital should maintain a record room with adequate cross indexing and ready reference for study of the patients' charts. Periodic summaries of department statistics are essential for the evaluation of results and usually will be requested at the time a program is reviewed by the Residency Review Committee.

4. Medical Library--A medical library is an important resource to the obstetrics-gynecology education program. The library may be sponsored by the hospital or the department, but it should be readily accessible to staff, both during the day and in the evening. The textbooks should be kept up to date, and there should be an ample supply of current journals devoted to obstetrics-gynecology and related subjects. When a comprehensive library is not available in the hospital, an active reference system should be provided through ready access to larger medical libraries. Programs must provide instruction in retrieval and assessment of medical literature.

5. Resident Facilities--Adequate facilities for residents to carry out their patient care and personal educational responsibilities are required. These include adequate on-call, lounge and food facilities for residents while on duty and on call. Also required are clinical support services such as pathology and radiology, including laboratory and radiologic information retrieval systems that allow rapid access to results, and intravenous (IV) services, phlebotomy services, and messenger/transporter services in sufficient number to meet reasonable demands at all times.

F. Other Graduate Medical Education Programs

The program must exist in an educational environment which includes other relevant graduate medical education programs, such as internal medicine, pediatrics, surgery and family practice.

III. Curriculum

A. General

1. Organization and Structure--Resident education in obstetrics-gynecology is 4 years of accredited, clinically oriented graduate medical education, of which at least 3 years must be entirely in the specialty of obstetrics-gynecology. Residency programs preceded by a year of education sponsored by the program may contain more residents in that year than the number approved for each year of specialty education. Residency programs may, therefore, be of 3 or 4 years duration, but programs of different lengths or quality in the same institution will not be approved.

A program director, under suitable circumstances, may elect to credit a resident with a period of graduate education in obstetrics and gynecology gained by the resident before entering the program. The period of education must have been of 4 or more months in duration and must have been received in a hospital conducting a currently accredited

residency in obstetrics-gynecology. This time may then be used to provide time, within the 36 months of obstetrics-gynecology, for appropriate electives on other clinical services. It may not be used to shorten the total length of the residency program.

Programs differ widely in the types of experience they offer to physicians entering the first year of graduate education. Many programs include rotations to other clinical services, such as medicine, surgery or neonatology. Other programs, however, offer predominantly experience in obstetrics-gynecology but may provide elective time later in the residency for rotations to other clinical services.

The specific definition given to the first year of graduate education, as described in the general requirements, depends on the content of the education and the administrative structure developed for implementing and supervising the experience.

The Residency Review Committee has the responsibility for the review of all graduate education programs in obstetrics-gynecology seeking accreditation. If a program includes sponsorship of a first graduate year experience, then the Residency Review Committee has the responsibility for review of that first graduate year.

Formal teaching activities in obstetrics-gynecology should be structured and regularly scheduled. They should generally consist of patient rounds, case conferences, journal clubs and coverage of appropriate basic sciences pertinent to the specialty. In cross-disciplinary conferences such as perinatology, appropriate physicians from other specialties should be invited to participate.

The patient population available to the education program should provide a variety of operative experience in obstetrics-gynecology. While the quality of the surgical experience in a hospital is more important than the actual number of cases, and while there is great value to a resident in acting as an assistant to a skilled and experienced obstetrician-gynecologist, it is also essential that the resident gain experience in management of patients by personal evaluation of the signs and symptoms, physical and laboratory findings leading to a diagnosis and decision for therapy as well as the performance of technical procedures. An acceptable residency program in obstetrics-gynecology must be able to provide substantial, diverse and appropriate surgical experience after the residents have mastered the basic skills.

Every program, in order to be accredited, must have a written statement of the educational objectives for the residents in that program. One example of such objectives is set forth in the current "Educational Objectives for Residents in Obstetrics and Gynecology," produced under the auspices of the Council on Residency Education in Obstetrics and Gynecology. Directors of the programs must be able to document that they are reviewing the implementation of the educational objectives and that the residents are indeed accomplishing what is anticipated of them. Any program which does not establish a system which clearly demonstrates that each resident has or has not successfully accomplished each of the items indicated in the program's statement of educational aims and objectives cannot be considered to be an adequate program.

It is not essential or desirable that all education programs be identical in structure or function. It is, however, mandatory that each residency program provide quality education and experience for each of the residents completing the program.

2. Resident Numbers--The number of residents that can be adequately and responsibly educated depends on several interrelated factors. Clinical involvement alone does not constitute an educational experience. The provision of adequate supervision, education, individual evaluation and administrative support is critical. With this, it is of utmost importance that each resident have sufficient independent operative and clinical responsibilities to prepare

for practice in the specialty.

The maximum number of residents in a program is linked to the number that can be accommodated within the framework of these requirements. Since one of the most important considerations is the clinical experience available to give each resident adequate primary responsibility, and since this usually centers upon the senior resident year, the maximum number of residents in a program depends upon how many senior residents the program can educate. Usually the maximum number of residents in a program is the number of senior residents the program can accommodate multiplied by three or four, depending upon the length of the program.

The minimum number of residents in an accreditable program is two (2) per year. Accreditation is granted on the basis of a balance between the educational resources and the number of residents in the program. The appointment of residents in excess of the approved number may adversely affect the quality of the total experience of each resident. Therefore, changes in the educational resources should be reported to the Residency Review Committee and proposed increases in the number of residents must first be approved in writing by the Residency Review Committee.

All requests for a change in the number of residents must demonstrate a distinct and substantial improvement in the educational opportunities for all residents in the program. Such requests must be based not only on the availability of an adequate patient population but also on adequate resources for supervision, education and evaluation. A request for a change in the number of residents must describe the impact of total experience upon each of the senior residents under the new circumstances. The request will be considered incomplete if it lists only expansion in beds, hospitals, or overall clinical experience and does not address the question of expansion of faculty and administrative support necessary to teach, supervise and evaluate the additional residents. Conversely, a reduction in beds, hospitals or other changes in the program which may lead to an anticipated decrease in total experience for the residents must be promptly called to the attention of the Residency Review Committee to determine if a reduction in the number of resident positions in a given graduate medical program is necessary.

3. Other Residents and Trainees—The number of residents from other graduate medical education programs in any specialty who are assigned to the obstetrics-gynecology residency should not be so large as to compromise the educational resources of the obstetrics-gynecology residency.

For those residency programs associated with post-residency fellowships, the education of fellows must not compromise the experience of residents.

4. Patient Responsibility/Supervision—Supervision of residents in obstetrics and gynecology is required to ensure proper (a) education, (b) quality of care, (c) patient safety and (d) fulfillment of responsibility of the attending physicians to their patients. These considerations must be integrated with the goal of independent competence in the full range of obstetrics and gynecology at the completion of residency. This implies a graduated and increasing level of independent resident action which is complete at the end of residency. Each program director must balance quality assurance for patient care, resident education and independent resident action. The level of resident supervision should be commensurate with the amount of independent function that is designated at each resident level. Residents, as well as faculty, may provide supervision.

On an obstetrics and gynecology service, adequate supervision requires the 24-hour presence of faculty in the hospital. Faculty must be immediately available to the resident if

clinical activity is taking place in the operating rooms and/or labor and delivery areas. Faculty must be within easy walking distance of patient care units. Clinical services provided in ambulatory (office) locations require on site supervision. Open and generously used lines of two-way communication are important and should be encouraged.

If it is judged by the program director that the size and nature of patient population does not require the 24-hour presence of faculty, this situation must be carefully defined and reviewed and should include information about the nature of the hospital, the patient population, the nature of attending staff, the geographic and climatic situations.

Supervision of residents is a responsibility of the program director and teaching staff. It is the responsibility of the institution sponsoring a residency program to establish oversight to assure that programs meet the supervisory provisions of these Requirements.

5. Graded Responsibility--Complete management of a patient's care under adequate supervision should be considered the highest level of training. There are, however, circumstances under which the resident may not assume complete management:

a. When the program director or his designee does not believe the resident's expertise or understanding is adequate to ensure the best care of the patient.

b When the attending physician is not willing to delegate the necessary degree of responsibility.

c. When the resident, for religious or moral reasons, does not wish to participate in the proposed procedures.

An essential feature of resident education is that a significant number of staff support the principle of delegation of complete management under supervision.

Increasing responsibility must progress in an orderly fashion, culminating in a senior resident year. The senior resident year consists of twelve months of clinical experience, in the last year of the resident's program. Elective time in the senior resident year requires the prior approval of the Residency Review Committee. The senior resident must have sufficient independent operating experience to become technically competent and have enough total responsibility for management of patients to ensure proficiency in the diagnostic and treatment skills that are required of a specialist in obstetrics-gynecology in office and hospital practice

6 Duty Hours and Personal Responsibilities--On-call requirements are essential for an optimal educational environment and to assure continuity of patient care. The number of residents and faculty should be adequate to prevent excessive frequency and length of on-call. The scheduling of on-call duty should consider that clinical events in obstetrics and gynecology do take place at any time; that safe and effective patient care and a good learning environment both require adequate periods of rest; and that the residency program appointment is the resident's full-time compensated occupation. The frequency of on-call for residents should be, on the average, no more often than every third night. Residents should be allowed to spend, on the average, at least one full day out of seven away from program duties. The program director must also ensure adequate backup if sudden and unexpected patient care needs create resident fatigue sufficient to jeopardize patient care during or following on-call periods.

B. Specific Training

Resident education must include, but not necessarily be limited to the following.

1. Obstetrics

a. The full range of obstetrics, including high-risk obstetrics and medical and surgical complications of pregnancy.

b. Genetics, including the performance of genetic amniocentesis and patient counseling

c. Learning and performing operative vaginal deliveries, including obstetric forceps or

vacuum extractor.

d. Performing vaginal breech deliveries.

e. Performing vaginal births after previous cesarean delivery.

f. Obstetrical anesthesia. Residents must learn the principles of general and conduction anesthesia, together with the management and the complications of these techniques.

g. Experience in the management of critically ill patients.

h. Immediate care of the newborn. Every resident must have experience in resuscitation of the human newborn, including tracheal intubation. The principles of general neonatal complications must be learned as well.

i. The full range of commonly employed obstetrical diagnostic procedures, including imaging techniques.

2. Gynecology

a. The full range of the content and patient age of medical and surgical gynecology.

b. Diagnosis and medical and surgical management of urinary incontinence.

c. Oncology, including radiation and chemotherapy.

d. Diagnosis and non-surgical management of breast disease, including fine needle aspirations.

e. Reproductive endocrinology and infertility.

f. Clinical skills in family planning.

g. Psychosomatic and psychosexual counseling.

h. The full range of commonly employed gynecologic diagnostic procedures, including imaging techniques.

i. Experience in the management of critically ill patients.

3. Other

a. Obstetric and gynecologic pathology.

b. Emergency medicine.

c. Basic medical epidemiology and statistics.

d. Ethics and medical jurisprudence.

C. Research

The quality of the educational experience within a department of obstetrics and gynecology is enhanced by an active research environment. It is highly desirable that every program encourage each resident to be involved in a research project.

IV. Evaluation

A. Resident Performance

The program director must establish methods of periodically and systematically evaluating and documenting the level of performance, experience and technical skills of the residents. One example of an acceptable mechanism helpful in evaluating cognitive knowledge is the CREOG in-training examination. On at least a semi-annual basis, program directors or their designees must inform the residents of their individual progress, emphasizing strong points and offering guidance with regard to correcting deficiencies. These evaluations, as well as a list of skills which the resident has mastered, must be documented and available (without revealing the specific resident's identity) at the time the program is reviewed for approval.

Physicians must have the welfare of their patients as their primary professional concern. The resident must therefore demonstrate those humanistic qualities which foster the formation of appropriate patient/physician relationships. These include integrity, respect, compassion,

professional responsibility, sensitivity to the patient's needs for comfort and encouragement, and an appropriate professional attitude and behavior towards colleagues. These attributes should be emphasized throughout the curriculum, and must be evaluated.

B. Program Review

For the purpose of program review, accurate and complete documentation of each individual resident's experience for each year of training is mandatory. These records should indicate the level of participation of the resident and skills achieved. The program director must review at least semi-annually the record of operative experience with the individual resident for breadth and depth of experience as well as for evidence of continuing growth in technical achievements. These cumulative data will be reviewed in detail at the time of survey for program approval or continued program approval. For the purposes of these records, there is no distinction between private and service patients.

Annually, the program director must collect, compile and retain the numbers and types of operative procedures performed by residents in the program, together with information describing the total resident experience in each institution and facility utilized in the clinical education of residents. This information must be provided in the format and form specified by the Residency Review Committee.

One significant measure of the quality of a program is the performance of its graduates on the examinations of the American Board of Obstetrics and Gynecology.

V. Board Certification

Residents who plan to seek certification by the American Board of Obstetrics and Gynecology should communicate with the Executive Director of the Board to obtain the latest information regarding current requirements for certification.

ACGME: September 1990 Effective: July 1991

Extremities

Perspective

FAMILY
RESEARCH
COUNCIL

Gary L. Bauer
President

WHO ARE THE "EXTREMISTS"?

by
Gracie S. Hsu

In response to mounting problems, the White House has adopted a new strategy to promote the nomination of Dr. Henry Foster as Surgeon General. It has chosen to frame the debate as a referendum on the legality of abortion and to label its opponents as right-to-life "extremists."

The White House's attempt to evoke a knee-jerk reaction from the American public fails to address the salient issues of the debate, however. The Foster nomination is not about the legality of abortion, and those calling for Foster's withdrawal are not "extreme."

The dictionary defines "extremism" as deviating to the greatest degree from the center of opinion. So what is the center of opinion? On the issue of abortion, the White House implicitly argues that Henry Foster represents the center of public opinion. However, public opinion polls compiled by the American Enterprise Institute show that Henry Foster occupies one end of the abortion spectrum and that the majority of Americans do not subscribe to Dr. Foster's views.

- A 1994 Gallup poll commissioned by CNN and *USA Today* found that 65 percent of Americans believe that abortions should either be "illegal in all circumstances" or "legal under certain circumstances." Only 33 percent would agree with Dr. Foster that abortions should be "legal under any circumstances."

- A 1995 CBS News/*New York Times* poll (1/95) found that 60 percent believe that abortion should either "not be permitted" or have "stricter limits." Dr. Foster's views that abortion should be "generally available" are shared by only 38 percent of the population.

- A 1994 Roper study commissioned by Focus on the Family and the Family Research Council polled abortion views on a 9-point continuum. From category 1 representing the most pro-life stance to category 9 representing the most pro-abortion stance, Dr. Foster's views place him in either category 8 or 9. Only 13 percent of Americans fall into those two categories combined.

Dr. Foster's record shows that he vigorously opposes popular measures such as waiting periods and parental consent and notification laws. Foster also believes that abortions should be available through all nine months of pregnancy, even

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after the fetus is viable outside of the mother's womb. Can Dr. Foster, as an individual who not only holds these views, but has also personally performed abortions, conducted studies on mothers and their unborn children to test abortion drugs, and performed sterilizations on mentally retarded young women without their consent, be accurately described as holding to the center of this public opinion?

And then there's the issue of Dr. Foster's credibility. Dr. Foster and the White House have not been forthright in representing Foster's abortion record. First, the White House said nothing about abortion. Then it admitted to Sen. Nancy Kassebaum that Foster had performed **one** abortion. Then Dr. Foster issued a statement saying that he had done "**fewer than a dozen**." Then there was the 1978 Department of Health, Education, and Welfare transcript that recorded Foster as saying he had done "**probably near 700**" amniocentesis tests and therapeutic abortions. Then Dr. Foster admitted his involvement in **55** abortions when conducting abortion drug trials in 1981. Then Foster told *Nightline* that he was the "physician of record" for **39** abortions.

The issue of credibility is hardly a minor point, especially for an individual in whom Americans are asked to repose their trust. Are Foster's critics "extreme" for wanting a Surgeon General who is truthful and forthright?

Lastly, the White House has characterized Foster's critics as "right to life extremists." As of this writing, those calling for the withdrawal of the Foster nomination include pro-life groups, pro-family groups, the New York chapter of the National Organization for Women, the *New York Times*, the *Washington Post*, the *Washington Times*, the National Coalition of Abortion Providers, Senators Joseph Biden, Nancy Kassebaum, Bob Dole, and Dan Coats, among others. Are all of these "right to life extremists"? If so, then where does that put the White House and Henry Foster? If not, then why has the White House singled out the pro-life community for its rhetorical venom?

Groups coming from many different perspectives oppose the Foster nomination for many different reasons. Yet the White House has chosen to label anyone who doesn't agree with its position as "extreme"? Did I miss something, or does the White House now hold a monopoly on what can be considered "mainstream"?

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Gracie S. Hsu, M.H.S., is a policy analyst specializing in human sexuality and life issues at the Family Research Council, a Washington, D.C.-based research and advocacy organization

NY Times
A-12



Associated Press

Vice President Al Gore, left, traveled with Dr. Henry W. Foster Jr., the President's nominee for Surgeon General, to Nashville yesterday to inspect Dr. Foster's I Have a Future program. Walking with them to their helicopter at Andrews Air Force Base in Maryland was Dr. Foster's wife, St. Claire.

A-7 2-14-95

THE WASHINGTON POST

Gore, Challenging 'Extremists,' Accompanies Foster to Nashville

By John F. Harris
Washington Post Staff Writer

Vice President Gore dashed to Nashville yesterday to tour the housing projects where surgeon general designee Henry W. Foster Jr. founded a program aimed at deterring teenage pregnancies, and vowed to defeat "the extremists" fighting Foster's nomination.

Gore's visit, announced barely 12 hours before he embarked, was part of a broader White House campaign to brand the antiabortion activists who are leading the opposition to Foster as "litmus-test" zealots who have maligned Foster's reputation and record.

In the sharpest rhetoric the administration has employed so far in the Foster fight, White House press secretary Michael McCurry charged that "there are extremists within the right-to-life movement who now have hooked the Republican Party in Congress by the nose and they're dragging them around."

McCurry also suggested a link between the opposition to Foster and the money the National Republican Senatorial Committee gave to the National Right to Life Committee last fall to boost turnout for GOP candidates.

Antiabortion advocates "intend to demand a payback for the payoff they got," McCurry said. "These groups go out and do the footwork to elect right-to-life members of Congress, and now they want a payback for having done that work in the field. They want a payback by demanding adherence."

Douglas Johnson, legislative director for the National Right to Life Committee, declined to comment on the GOP contribution, but said the group's efforts to defeat Foster have consisted mostly of encouraging its members to call their senators.

"That's democracy," Johnson said.

He said his group also has disseminated Foster's writings and statements. "I challenge Mike McCurry or anyone over there to say what we've done is a distortion," Johnson said.

The selection of Foster, however, has been criticized by legislators in both parties, including many who support abortion rights. These people say that the White House and Foster have not been forthright about the gynecologist's record, saying first that he performed one abortion, then that he performed "less than a dozen," and lately maintaining that the number is 39.

While the administration has acknowledged problems in its handling of the Foster nomination, the president himself offered an upbeat appraisal of Foster's prospects.

"I think if he's judged on his life's work, on the merits, I think he'll be confirmed," Clinton said. "I think that if he gets the kind of hearing I would expect him to get from a fair-minded Senate, I think he'll be confirmed."

Putting the focus on Foster's career was the point of Gore's brief excursion to Nashville. He and Foster toured the housing project where Foster founded the "I Have a Future" program, which preaches abstinence and goal-setting to young people, as well as providing contraceptive information.

Foster borrowed a Clinton line yesterday when asked his position on abortion: "Safe, legal and rare." But for the most part, according to the Associated Press, he let Gore do the talking.

The two of them were jammed in a small apartment, joined by local leaders and more than a dozen youths who recounted their experiences with Foster's program. "Anybody who wants to see fewer abortions in this country ought to applaud the nomination of Dr. Henry Foster," Gore said.

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

NASHVILLE BANNER 4/17/79

Nashville

VOL. CIII No. 7 A GANNETT NEWSPAPER NASHVILLE, TENN., TUESDAY AFTERNOON, APRIL 17, 1979

U.S. Report Hits Meharry

By BOB HEETH
Banner Staff Writer

Serious problems in the financial management of Meharry Medical College have contributed to the college's "precarious" financial condition, federal auditors have found.

Some of those deficiencies are being corrected, the auditors said. But the college still will need from $3 million to $5 million a year in additional outside support to cover projected annual deficits — even though the federal government already is subsidizing payments on a $29 million loan at a cost to the taxpayers of $2.9 million a year.

Meharry's management problems, outlined in a federal audit report obtained by the *Nashville Banner* under the Freedom of Information Act, include:

- The use of federal funds for non-federal projects.
- Poor collection procedures on student loans.
- Failure to reconcile the general fund bank account for more than a year.
- Weak controls on expenditures, accounting for about 25 percent of Meharry's annual deficit.
- Insufficient accounting staff.
- "Incomplete and inaccurate records" and an "inadequate accounting system." The records for fiscal 1978 were in such bad shape they couldn't be completely audited, the auditors said.

The U.S. Department of Health, Education and Welfare ordered the audit after Meharry announced in August 1977 that it was going to default on a $29 million federally guaranteed hospital construction loan. HEW now pays $243,061 of the monthly payments on the loan while Meharry pays $18,919.

The auditors were asked to find out if Meharry could retire the $29 million loan. They concluded the college could not pay all of its other bills, much less the loan.

"Meharry's financial condition is precarious," the auditors said.

Advent Theater May Be Closed Due To Deficit

By JULIE PURSELL
Banner Art Editor

Board members of Advent Theater will decide May 14 whether to ring down the final curtain on the controversial operation.

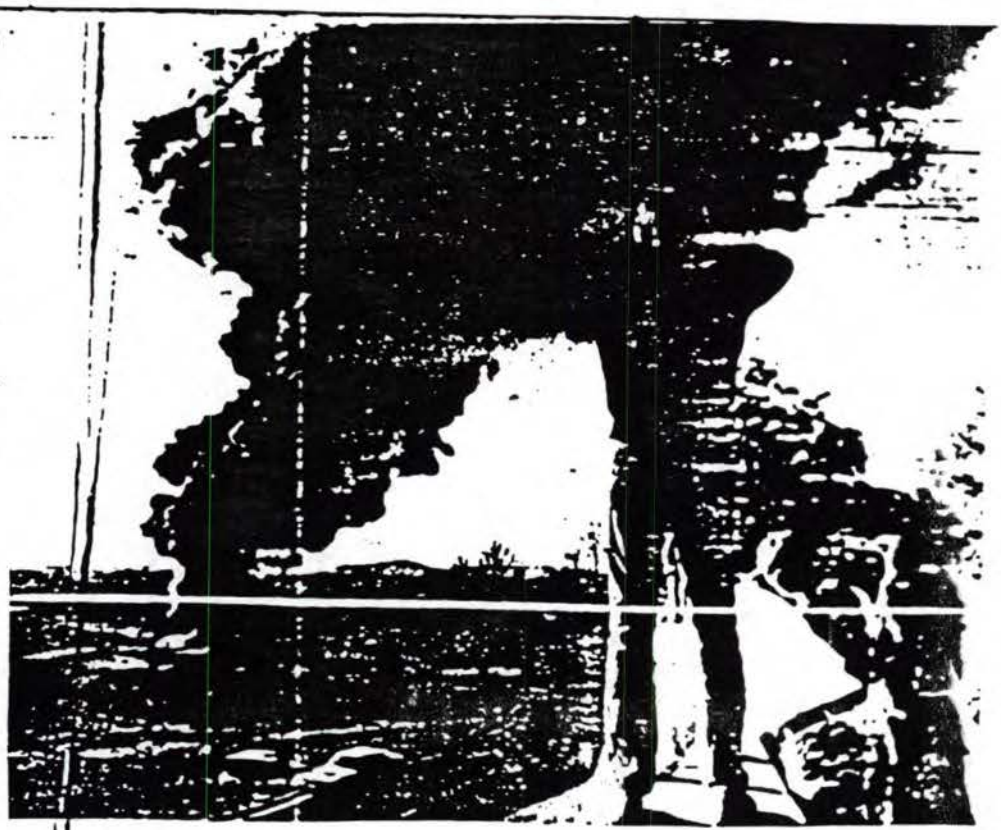
It was also learned that the theater's executive committee has received a letter of resignation from its managing director, Wesley Brustad. But Board Chairman Martha Ingram denied that Brustad has resigned.

Mrs. Ingram said the theater is faced with a $100,000 deficit and another possible $94,000 loss by the end of the theater's fiscal year, July 31.

The result could be that the theater will close its doors.

"With these staggering finances, we are struggling to cope and to keep ourselves together and financially solvent," Mrs. Ingram said.

"We have to decide what to do, if anything, about next year," she said. "We hope in the next few days to send a letter to our 2,000 season subscribers and to some members of the general public, as well as making an appeal through the press suggesting that if 4,000 people were to send $25 to the Advent Theater our financial deficit would



Fire Razes Warehouse

Onlookers

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By Doug Mills, AP

LENDING WORDS OF SUPPORT: 'We're not going to let the extremists win,' says Vice President Gore of surgeon general nominee Henry Foster.

Gore blasts 'extremists' over Foster nomination

By Bill Nichols
USA TODAY

The White House revved up the rhetorical war Monday over the nomination of Dr. Henry Foster as surgeon general, accusing Republicans of being intimidated into opposing Foster.

"There are extremists within the right-to-life movement who now have hooked the Republican Party in Congress by the nose, and they're dragging them around," said White House press secretary Mike McCurry.

"We're not going to let the extremists win," Vice President Gore said in Nashville, where he was hastily sent to play up Foster's efforts in reducing teen pregnancy among inner-city youth.

McCurry said abortion-opposition groups that got $175,000 from the National Republican Senatorial Committee last November are now demanding "a payback for the payoff they got" in the form of opposition to Foster.

Sen. Phil Gramm, R-Texas, then senatorial committee chairman, says it was a "perfectly legal" way of energizing activists who would help GOP candidates.

Critics of the nomination dismissed the White House gambit as posturing.

"I think he's going to be very hard to confirm," said House Speaker Newt Gingrich, R-Ga. "I think it's going to be a very embarrassing set of hearings."

Said President Clinton: "If he gets the kind of hearing I would expect him to get from a fair-minded Senate, I think he'll be confirmed."

McCurry's words are the strongest sign yet that the Clinton administration thinks it can save Foster's nomination.

The nomination of Foster, a practicing obstetrician/gynecologist for 38 years, turned into a firestorm when he first indicated he'd performed "fewer than a dozen" abortions, then revealed last week he'd performed at least 39.

More questions were raised when it was revealed Foster sterilized severely retarded women in the 1970s.

But the White House strategy now is to try to make Republicans back off by tying the party to abortion-opposition activists. Many in the GOP blamed those activists for Clinton's 1992 victory.

McCurry noted recent comments by Christian Coalition executive director Ralph Reed, who warned that religious conservatives will not back the 1996 GOP ticket unless both candidates oppose abortion rights.

The flap "never was singly fixated on . . . abortion," said coalition spokesman Mike Russell. Also a concern, he said, is Foster's credibility. "Both *The New York Times* and the religious conservative movement are calling for the nomination to be withdrawn. That doesn't happen over a single issue."

Wash Times A-3 2-14-95

White House hits foes of pick

Foster strategy targets pro-lifers

By Paul Bedard
and Nancy Roman
THE WASHINGTON TIMES

The White House yesterday aggressively characterized Republican critics of embattled surgeon general nominee Henry W Foster Jr as shills of the pro-life movement — a high-risk strategy angering centrist GOP senators.

With sentiment growing in the Senate that the gynecologist's nomination is doomed, the White House tried to shed light on Dr. Foster's successes, flying Vice President Al Gore to Nashville, Tenn., to join him and draw attention to his teen abstinence program, called "I Have a Future."

The visit followed a speech by Dr. Foster last week to George Washington University students and a strong defense of his record published in The Washington Post.

Republicans chided the White House for the high-profile effort, with some joining Democrats in advising that the Foster campaign be placed on hold until the Senate Labor and Human Resources Committee confirmation hearings in March.

Most Republicans and Democrats on the committee said they will reserve judgment on the nomination until hearings begin. However, some members and their aides said there is a growing sense the Foster nomination will not survive.

"Nothing that happened over the weekend helped Dr. Foster," said Sen. Daniel R. Coats, the Indiana Republican leading the opposition to the nomination. "The more we learn about Dr. Foster, the more questions are raised. I find it highly ironic and baffling that someone who abhors abortion can't remember whether he did one, or less than 12, or 39, or 700 abortions."

He said the White House has mistakenly turned its energy toward a campaign designed "to shift the question from the credibility of Dr. Foster and the White House to a question of pro-abortion vs. pro-life."

Sen. Nancy Kassebaum, Kansas Republican and chairman of the Labor and Human Resources Committee, expressed surprise that the White House is promoting the nominee in speeches and on national television, instead of working with committee members.

"It does not do his nomination service to be out there campaigning at this point," said Mike Horak, spokesman for Mrs. Kassebaum. "He would be better focusing on his background."

Mr. Horak said Dr. Foster had not contacted Mrs. Kassebaum's office as of yesterday.

Mr. Coats, who also serves on the Labor and Human Resources Committee, said that when pro-choice senators such as Arlen Specter, Pennsylvania Republican, and Joseph R. Biden Jr., Delaware Democrat, are joined by the National Organization for Women's New York chapter in opposing the nomination, "It undercuts the notion that this is a radical religious-right argument to do in Dr. Foster or Bill Clinton."

The White House followed that strategy anyway.

Mr. Gore, who joined Dr. Foster in a tour of a Nashville low-income apartment complex, said the doctor is the victim of anti-abortion activists. "We are not going to let the extremists defeat this man," the vice president said.

"There are people in this country who want to criminalize a woman's right to choose, and they are now trying to make Dr. Foster a victim in order to make an ideological political point and win on behalf of the extremists," said Mr. Gore, who opposed abortion as a Tennessee congressman but shifted positions when he was elected to the Senate.

Dr. Foster, sitting beside Mr. Gore in the tour of one apartment, said "People have a right to talk. I have a right to talk."

White House spokesman Michael McCurry, meanwhile, said, "It is, simply put, the truth that there are extremists within the right-to-life movement who now have hooked the Republican Party in Congress by the nose and they're dragging them around."

A White House political adviser said the administration plans to turn the Foster debate into a fight over abortion rights. "If this nominee is about turning back the clock on choice, we're in it all the way," he said.

Mr. McCurry cautioned that, "as it now stands, we recognize we have our work cut out for us." But he and other administration officials said they will get Dr. Foster confirmed.

But there were several signs that the nomination was doomed.

House Speaker Newt Gingrich, Georgia Republican, for example, told an audience in Georgia yesterday: "I think he's going to be very hard to confirm. I think it's going to be a very embarrassing set of hearings."

Sen. Phil Gramm, Texas Republican, agreed. "I don't think he will be confirmed," he said. Mr. Gramm questioned Dr. Foster's candor and failure to say clearly that he performed abortions as well as involuntary sterilizations.



Surgeon general nominee Dr. Henry Foster Jr. (center) and his wife, Dr. Claire, walk with Vice President Al Gore to a helicopter at Andrews.



Dr. Henry W. Foster Jr.

McCurry: Foster misspoke on whites

Democrats hurl racism charges

2-28-95 A1

By Paul Bedard
THE WASHINGTON TIMES

Wash. Times

The White House yesterday insisted that Dr. Henry W. Foster Jr. "misspoke" on Sunday when he said "white right-wing extremists" were trying to thwart his nomination as surgeon general to advance their own "radical" agenda.

"He intended to say right-wing extremists," said White House spokesman Michael McCurry. "I think it's pretty clear he misspoke. It was a slip of the tongue."

But then Mr. McCurry himself accused Republicans of planning to use the race issue to win white votes.

"There are plenty of instances in which Republican strategists and some Republican elected members indicate that they believe race could be a potent political weapon for them," Mr. McCurry said. "And there is certainly some indication that they believe that using race as a political issue has some benefit."

The spokesman singled out Senate Majority Leader Bob Dole of Kansas, who, he charged, talked "very directly about the fact that they've won a disproportionate share of the white-male vote in this country."

Tim Goeglein, spokesman for Sen. Daniel R. Coats, Indiana Republican and a leader in the campaign against Dr. Foster's nomination, rejected any suggestion the nominee's opponents are driven by racism.

"This nomination and whole process is truth-based and not race-based. It is unfortunate that that would be injected," he said. "Senator Coats' call for the nomination to be withdrawn has nothing to do with race."

He expressed surprise at the

see **FOSTER**, *page A14*

FOSTER

From page A1

White House defense that Dr Foster merely slipped when he attacked white critics "Imagine if we had done that," said Mr Goeglein

Administration officials for over two weeks have quietly accused Dr Foster's Republican critics of opposing his nomination because he is black White House officials are concerned that blacks and other minorities turned to Republican candidates in the past election and may continue to do so

But only the Rev Jesse Jackson and two Democratic members of the Congressional Black Caucus have gone public with the charges of racism in the debate over Dr Foster

"There is an underlying race agenda being driven by this Republican cadre, there is no question about that," Mr Jackson said last week

Democrats say the Republicans have raised credibility issues with the prominent physician to hide a racist and anti-abortion agenda

"I don't think it's a racist debate But for the purposes of many Republicans in pursuit of solidifying their base and reaching out to potential voters, the fact that Dr Foster is a man of color and someone who has performed abortions is extremely helpful," said Alan Madison, a Democratic activist and occasional White House adviser

"There is a powerful vortex called fear and resentment into which some in the Republican Party would pour anything down to try to harvest votes," said Mr Madison, a vice president at Powell Tate communications

The administration's charge that the Republicans plan to use the race card in the upcoming elections came a day after Dr Foster said he was the target of racists in his uphill battle to win Senate confirmation as surgeon general

Speaking Sunday at his church in Nashville, Tenn , the gynecologist said he is angry with "white, right wing extremists that are using my nomination to achieve their radical goals"

His comments were directed at groups like the conservative, Washington based Family Research Council, which said he served on a board in Alabama that was involved in experiments in which black sharecroppers were not treated for syphilis The council did not return telephone calls seeking reaction to Dr. Foster's statement

He made a similar statement in a recent speech to George Washington University students when he said that his practice "includes performing illegal abortions when it's necessary"

No one yesterday criticized Dr Foster's injection of race into the debate on his nomination Some Republicans remarked on the contrast of White House reaction of Dr Foster's statement and the recent remark of House Republican leader Dick Armey of Texas, who referred to Rep Barney Frank, Massachusetts Democrat, as "Barney Fag"

Instead, the participants in the debate over Dr Foster have focused on charges from the White House that they are radicals

"We are not 'right wing extremists' as Vice President Gore and Dr Foster smear us as, but thousands of concerned parents and pro-life women who question Foster's medical ethics and record," said Beverly LaHaye, president of Concerned Women for America

She and dozens of other groups have expressed concerns over Dr Foster's changing tabulations on the number of abortions he has performed over his 32 year medical career and his practice in the 1970s of sterilizing retarded women

Wash. Post A6 2-28-95

Foster 'Misspoke,' White House Says

Associated Press

The White House is characterizing as "a slip of the tongue" surgeon general-designate Henry W. Foster Jr.'s reference to opponents as "white right-wing extremists."

The word "white" was not in Foster's prepared text for the Sunday speech at a Nashville church. And the White House said he did not mean to use it.

"I think it's pretty clear he misspoke," press secretary Michael McCurry said yesterday. "It was a slip of the tongue."

Foster is black.

Speaking to the First Baptist Church Capitol Hill congregation, Foster said, "I ask for your help and prayers in working with me again to fight the latest attacks from white right-wing extremists that are using my nomination to achieve their radical goals."

Other than the word "white," Foster varied little from his prepared text. The White House has repeatedly called Foster's critics extremists.

Foster will make another round of calls Wednesday on senators who would vote on his nomination. The formal nomination will be sent to Capitol Hill this week, the White House said.

Role of Surgeon

DEPARTMENT OF HEALTH AND HUMAN SERVICES

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Rockville MD 20857

NOTE TO USERS

THE OFFICE OF THE SURGEON GENERAL OF THE PUBLIC HEALTH SERVICE IS OFTEN REQUESTED TO PROVIDE INFORMATION ABOUT ITS HISTORY, FUNCTIONS, AND RESPONSIBILITIES. THE ATTACHED DOCUMENTS HAVE BEEN DEVELOPED TO ADDRESS THESE REQUESTS. ATTACHED ARE:

1. THE STATUTE AUTHORIZING APPOINTMENT OF THE SURGEON GENERAL (42 U.S.C. 205);

2. A LIST OF THE SURGEONS GENERAL AND ASSISTANT SECRETARIES OF HEALTH OF THE PUBLIC HEALTH SERVICE;

3. THE FEDERAL REGISTER NOTICE ON THE FUNCTIONS OF THE OFFICE OF THE SURGEON GENERAL (52 FEDERAL REGISTER 11754);

4. THE SURGEON GENERAL'S JOB DESCRIPTION; AND

5. A BACKGROUND DOCUMENT THAT PROVIDES A BRIEF DESCRIPTION OF THE HISTORY AND CURRENT ACTIVITIES OF THE OFFICE OF THE SURGEON GENERAL.

WE HOPE THAT YOU WILL FIND THESE MATERIALS HELPFUL. SHOULD YOU NEED ADDITIONAL INFORMATION, PLEASE CALL (301) 443-4000.

and was repealed by Joint Res. July 25, 1947, c. 327, § 1, 61 Stat. 449.

CROSS REFERENCES

Pay and allowances for commissioned officers, see 42 USCA § 210.

LIBRARY REFERENCES

American Digest System

Appointment, qualification, and tenure of officers, see United States ⇐35.

Health and environment; appointment and tenure of officers and agents, see Health and Environment ⇐7(1).

Encyclopedias

Appointment of officers, see C.J.S. United States § 35.

Health and environment; appointment, qualifications, and tenure of officers, see C.J.S. Health and Environment § 11.

WESTLAW ELECTRONIC RESEARCH

Health and environment cases: 199k[add key number]

United States cases: 393k[add key number]

See, also, WESTLAW guide following the Explanation pages of this volume.

§ 205. Appointment and tenure of office of Surgeon General; reversion in rank

The Surgeon General shall be appointed from the Regular Corps for a four-year term by the President by and with the advice and consent of the Senate. The Surgeon General shall be appointed from individuals who (1) are members of the Regular Corps, and (2) have specialized training or significant experience in public health programs. Upon the expiration of such term the Surgeon General, unless reappointed, shall revert to the grade and number in the Regular or Reserve Corps that he would have occupied had he not served as Surgeon General.

(July 1, 1944, c. 373, Title II, § 204, 58 Stat. 684; July 27, 1981, Pub.L. 97-25, Title III, § 303(a), 95 Stat. 145, Aug. 13, 1981, Pub.L. 97-35, Title XXVII, § 2765(b), 95 Stat. 932.)

HISTORICAL AND STATUTORY NOTES

Revision Notes and Legislative Reports

1944 Act. House Report No. 1364, see 1944 U.S.Code Cong. Service, p. 1211.

1981 Acts. Senate Report No. 97-23 and House Conference Report No. 97-159, see 1981 U.S.Code Cong. and Adm.News, p. 74.

Senate Report No. 97-139 and House Conference Report No. 97-208, see 1981 U.S.Code Cong. and Adm.News, p. 396.

Amendments

1981 Amendments. Pub.L. 97-35 added reference to Reserve Corps and substituted provisions relating to appointment of an individual from the Regular Corps and with specialized training and significant experience, for provisions relating to appointment of an individual sixty-four years of age or older.

Pub.L. 97-25 added provision that the President may appoint to the office of Surgeon General an individual who is sixty-four years of age or older.

Transfer of Functions

The Office of the Surgeon General was abolished by § 3 of 1966 Reorg.Plan No.

52 FR 11754, 4/10/87

Office of the Surgeon General (HAN). Under the direction of the Surgeon General the Office provides staff support to the Surgeon General for (1) release of reports of the Surgeon General such as: "Smoking and Health" and "Healthy People" under authority of the Secretary of Health and Human Services (15 U.S.C. 1337); (2) management of the personnel system of the Commissioned Corps, under the aegis of the ASH, including recruitment and retention of commissioned officers; (3) activities relating to membership on the Board of Regents of the Uniformed Services University of the Health Sciences and as principal health official for PHS on all matters related to policies affecting PHS faculty and students (10 U.S.C 2113(e)(3)); (4) activities related to responsibilities on other boards, including the (a) National Library of Medicine; (b) Armed Forces Institute of Pathology (AFIP); (c) Gorgas Memorial Institute on Tropical Medicine; (d) AMA House of Delegates; (e) Executive Committee, Association of Military Surgeons of the United States.

The Office provides support to the Surgeon General (5) in issuing warnings to the public on health hazards (6) for review of the particulars of Department of Defense (DoD) plans for transportation, open testing and disposal of lethal chemicals and biological agents and in recommending precautions necessary to protect the public health and safety binding on the Secretary, DoD, which can only be overridden by the President (P.L. 91-441) (50 U.S.C. 15-12 (Z3)); (7) in serving as the focal point for communication with professional societies to receive, solicit and channel concerns regarding health policy; and (8) in representing PHS at national and international health and professional meetings to interpret PHS philosophy, policies, organizational responsibilities and programs.

52 FR 11754-5, 4/10/87

Division of Commissioned Personnel (HAN2). The Division supports the Surgeon General to (1) administer a comprehensive personnel management program for the Public Health Service Commissioned Corps; (2) perform all operating functions associated with the Commissioned Corps personnel system; (3) provide advice and counsel concerning rights and benefits to members of the Corps; (4) provide guidance and assistance to the OASH and the PHS agencies concerning personnel management of the Commissioned Corps; and (5) serve as the central repository for all records reflecting the service and status of members of the Corps.

PLEASE PREPARE THREE COPIES FOR OFFICE OF PERSONNEL AND ONE FOR YOUR BUREAU

(See other side for instructions)

CIHA-00

1. ORGANIZATION (Bureau, Division, Branch, Section, etc.) and location of duty station

ITEMS 2, 3, AND 4 TO BE COMPLETED BY OFFICE OF PERSONNEL ONLY

2.	I	II	III	3.	4.
	IV	V	Total 9+0	91.30	0602

5. FUNCTIONAL TITLE Surgeon General, U.S. Public Health Service

6. Pertinent program information (e.g., size of hospital; geographic limits of water pollution control project; type of hospital; primary function and size of Branch, Section, Unit; etc.)

The Surgeon General supports the Assistant Secretary for Health (ASH) in providing the leadership and direction for the commissioned corps and by carrying out the functions listed in Item 7. The Surgeon General administers the PHS Commissioned Corps personnel system which includes the establishment of policies and procedures for all active duty, retired, and inactive officers.

7. *Brief* statement of *most important* duties, including *significant* supervisory responsibilities and work relationships (please do not exceed this space)

Directs and coordinates activities of the eleven Chief Professional Officers and the Professional Advisory Committees that formulate policies and programs pertaining to health professional personnel within PHS.

At the direction of the ASH serves on career personnel boards of the health professional activities within the PHS.

Directs the Division of Commissioned Corps Personnel regarding the inactive reserve for all categories including orientation and proposed training.

Serves as the principal PHS representative to such organizations as the Association of Military Surgeons of the United States, the Commissioned Officers Association of the United States Public Health Service, the Defense Health Council, and the Federal Council of Surgeons General and Program Chiefs.

Pursuant to 42 U.S.C. 286(a)(1)(B), serves as an ex officio member of the Board of Regents of the National Library of Medicine. (continued on separate sheet)

8. Direction received (title of supervisor and type of direction received upon assignment of work, during course of work and at its completion) Under the general direction of the Assistant Secretary for Health [illegible] perform within the general policy framework provided by legislation, the Department and the legislated functions of the PHS Act and the commissioned corps.

9. *Minimum* qualifications (education and experience) required to perform *satisfactorily*

Nomination and appointment by the President of the United States by and with the advice and consent of the Senate.

10. Incumbent's name (if position is filled)	11. Incumbent's category	12. Incumbent's rank: Permanent / Temporary
	Medical	

13. Serial number	14. Incumbent's profession	15. (Check one)
4 7 8 5 1	Physician	☒ Regular ☐ Reserve

16. Certification or concurrence of superior officer — Signature: James O Mason — Title (Position): Assistant Secretary for Health — Date: 2/2/90

PHS-4391-1 Rev. 10-64 BILLET DESCRIPTION (See reverse for instructions)

Surgeon General, U.S. Public Health Service

Item #7 (continued)

Pursuant to 10 U.S.C. 2113(a)(3), serves as a member of the Board of Regents of the Uniformed Services University of the Health Sciences (USUHS) and is responsible for policies and issues relating to the assignment of PHS students and faculty members to USUHS.

Assists the ASH, in cooperation with the Office of International Health, in monitoring 20 multilateral international agreements with countries to assure health professional input and assure uniform interpretation of health policies.

Represents the PHS in matters designated by the ASH to assure coordinated PHS positions on national and international issues in health.

As directed, represents the ASH at national and international health and professional meetings to interpret PHS philosophy, policies, organizational responsibilities and programs.

Reviews Department of Defense plans for the transportation, open testing, and disposal of lethal chemicals and biological agents, and makes recommendations concerning the precautions necessary to protect the public health and safety. The Surgeon General's recommendations are binding on the Secretary of Defense and can only be overriden by the President (50 U.S.C. 1512).

Approves the Joint Federal Travel Regulations of the Uniformed Services on behalf of PHS.

Develops and releases to the general public and to health professionals, reports and advisories about health hazards such as the Surgeon General's Report on Smoking and Health.

At the direction of the ASH, directs, coordinates and evaluates intra and interagency departmental activities mandated by the White House, the Congress, or the Secretary.

Surgeons General of The United States Public Health Service

1. John M. Woodworth
   1871-1879
2. John B. Hamilton
   1879-1891
3. Walter Wyman
   1891-1911
4. Rupert Blue
   1912-1920
5. Hugh S. Cumming
   1920-1936
6. Thomas Parran
   1936-1948
7. Leonard A. Scheele
   1948-1956
8. Leroy E.Burney
   1956-1961
9. Luther L. Terry
   1961-1965
10. William H. Stewart
    1965-1969
11. Jesse L. Steinfeld
    1969-1973

    S. Paul Ehrlich (Acting)
    1973-1977 (Never Confirmed)
12. Julius B. Richmond
    1977-1981
13. C. Everett Koop
    1981-1989
14. Antonia C. Novello
    1990-1993
15. M. Joycelyn Elders
    1993-1994

BACKGROUND DOCUMENT
OFFICE OF THE SURGEON GENERAL
U. S. PUBLIC HEALTH SERVICE

Background

In 1798, the Congress established the U. S. Marine Hospital Service -- predecessor of today's U. S. Public Health Service -- to provide health care to sick and injured merchant seamen. In 1870, the Marine Hospital Service was reorganized as a national hospital system with centralized administration under a medical officer, the Supervising Surgeon, who was later given the title of Surgeon General.

Dr. John Woodworth, the first Surgeon General, established a cadre of medical personnel to administer the Marine Hospital system. On January 4, 1889, the Congress recognized this new personnel system by formally authorizing the Commissioned Corps. The Corps was established along military lines to be a mobile force of professionals subject to reassignment to meet the needs of the Service. Originally, the Corps was composed only of physicians. However, over the years, as the functional responsibilities of the Public Health Service (PHS) and the Corps have broadened, a commensurate broad range of health professionals has been included.

Prior to 1966, the Surgeon General was the head of the PHS, and all program, administrative, and financial management authorities flowed through the Surgeon General, who reported directly to the Secretary. In 1966, pursuant to a reorganization plan issued by President Lyndon B. Johnson, the authorities of the Surgeon General were transferred to the Secretary and delegated to the Assistant Secretary for Health. The Office of the Surgeon General was abolished and the position of Surgeon General became that of a principal deputy to the Assistant Secretary for Health with responsibility for advising and assisting on professional medical matters. In addition, a primary role developed in which the Surgeon General became the PHS spokesperson on certain health issues. (Note: In 1977, the positions of Assistant Secretary for Health and Surgeon General were combined into a single position. This dual title existed until 1981, at which time they were, once again, made separate.)

In 1987, the Office of the Surgeon General (OSG) was reestablished as a staff office within the Office of the Assistant Secretary for Health. Concomitant with this action, the Surgeon General again became responsible for management of the Commissioned Corps personnel system. (Note: The Surgeon

General does not directly supervise all Commissioned Officers; most work in PHS or other agencies and report to line managers of those agencies who may or may not be in the Corps.) In carrying out all responsibilities, the Surgeon General reports to the Assistant Secretary for Health, who, in turn, is responsible for all programs administered by the PHS, and is the principal advisor to the Secretary on all PHS policies and programs.

In April 1987, Surgeon General C. Everett Koop launched as major effort to revitalize the Corps. Actions were taken to enhance all aspects of Corps management, including recruitment, especially of women and minorities, assignment, career development, and communication. Special efforts were made to make sure that Agencies utilizing officers are actively involved in the formulation and review of policies and procedures related to administration of the Corps.

In January 1995, there were 6,300 officers on active duty. Officers were assigned to all of the PHS Agencies and to a number of Agencies outside of PHS, including the Bureau of Prisons, U. S. Coast Guard, Environmental Protection Agency, Health Care Financing Administration, and the Commission on Mental Health of the District of Columbia.

Delegated Functions/Responsibilities of the Surgeon General

The Surgeon General serves as a spokesperson to the Nation on matters of public health, and as an advisor both to the Government and general population about hazards or dangers to health, as well as about actions which can be taken to prevent disease and maintain health.

Using this procedural approach, the Surgeon General has addressed a number of specific issue areas during the last decade including:

- Cigarette smoking and use of other tobacco products;
- AIDS prevention;
- Aging, especially with regard to health promotion;
- Drunk driving;
- Health impacts of abortion;

- o Nutrition;
- o Healthy Children Ready to Learn Initiative;
- o Hearing problems and their prevention;
- o Domestic violence;
- o National Hispanic/Latino Health Initiative;
- o Adolescent health;
- o Teenage pregnancy; and
- o Fluoridation of public water supplies

Office of the Surgeon General/Division of Commissioned Personnel

- o Delegation of management of personnel system to Office of the Surgeon General (Federal Register, Volume 53, No. 33, pp. 5046-5047, dated February 18, 1988).
  - o Under delegation from the Assistant Secretary for Health, the Surgeon General manages the Commissioned Corps personnel system including the development and operation of systems for recruiting, retaining, and utilizing officers.
  - o Performs all operating functions associated with Corps system.
  - o Provides advice and counsel concerning rights and benefits.
  - o Provides guidance and assistance to Agencies related to management of Corps officers.
  - o Serves as central repository of Commissioned Corps records.
  - o Performs specific functions related to appointments, terminations, promotions, ranks, and disciplinary actions and appeals.

Office of the Surgeon General: Authorities Delegated to and Support Given for Certain Functions (Federal Register Vol. 52, No. 69, p. 11754, dated April 10, 1987),

- o OSG releases Surgeon General's reports (e.g., "Smoking and Health," "Healthy People"), under authority of Secretary, DHHS.

- The Surgeon General is a member on Board of Regents of the Uniformed Service University of the Health Sciences, representing PHS on all matters of faculty and students.

- OSG represents PHS on various Boards, including:

    - National Library of Medicine;

    - Armed Forces Institute of Pathology;

    - AMA House of Delegates; and

    - Association of Military Surgeons of the United States.

- Provides support for Surgeon General in issuing warnings to the public on health hazards.

- Provides support for Surgeon General in serving as communication focal point for professional societies regarding health policy.

- Provides support for the Surgeon General as PHS representative at national and international health and professional meetings to interpret PHS philosophy, policies, organizational responsibility and programs.

Interface with Other Governmental Entities

(The nature of arrangements with the other entities listed below vary as to PHS signatory. Some are based upon Assistant Secretary level agreements -- as in the Memorandum of Understanding with the Department of Defense -- while others are based upon agreements to which the Surgeon General is a signatory. The latter arrangement includes certain agreements with the Department of Justice and the Department of Transportation.)

- Department of Defense

    - A Memorandum of Understanding exists relating to provision of Commissioned Corps personnel to meet health needs of DoD in event of emergencies.

    - Officers are provided in other DoD professional and technical areas including Office of Health Affairs, Uniformed Services University of the Health Sciences Faculty, etc.

    - Surgeon General and his staff participate in major ongoing initiatives in national security.

- Department of Transportation
  - Pursuant to a Memorandum of Understanding, approximately 160 PHS officers are detailed to the Coast Guard to provide health services to its members and their dependents. These services are provided under the direction of the Chief Medical Officer of the Coast Guard who is a PHS commissioned officer.
- Department of Justice
  - Pursuant to a Memorandum of Understanding, approximately 400 PHS officers are detailed to the Bureau of Prisons to provide health services to inmates in Federal correctional facilities. These services are provided under the direction of the Chief Medical Officer of the Bureau of Prisons who is a PHS commissioned officer.
  - PHS officers are assigned to manage and provide health services to aliens detained by the Immigration and Naturalization Service.
- Department of State
  - OSG provides staff personnel and additional emergency staff deployed to Office of Foreign Disaster Assistance.
- Department of Commerce
  - OSG, through the Corps, manages and provides health care to the Commissioned Corps of National Oceanic and Atmospheric Administration.
- Environmental Protection Agency
  - Pursuant to a Memorandum of Understanding, approximate 180 PHS officers are detailed to the Environmental Protection Agency to provide technical expertise in environmental health hazards and toxic substances.
- Federal Emergency Management Agency
  - The PHS, through OSG, has a major commitment to deploy officers to provide emergency medical support services in event of civilian or military disaster or emergency.

. . . Sex

put on the agenda of upcoming meetings.

The committee is scheduled to meet Sept. 14 in Washington, D.C., and Oct. 12-13 at an undecided location.

"I think the majority of physicians find such a thing abhorrent," Foster said. "I can't believe it's an idea that's going to take hold immediately or even within the next decade."

Fosters's comments came in response to a copyrighted story by *The Washington Post* stating that doctors at several prominent medical centers around the country — and an unknown number of private physicians — have been helping some pregnant women abort their fetuses because the baby would be the wrong sex.

The number of these cases is small, according to the *Post* story, but some medical officials say there will be an increase in the tests and abortions to let parents select the sex of their children.

Through a prenatal test called amniocentesis, the baby's sex is revealed. In the test, physicians withdraw a sample of the woman's fluid to find genetic and other information.

According to the *Post*, most physicians who agree to do the test to determine sex do it reluctantly.

The newspaper says doctors at Johns Hopkins, Yale, the University of California at Los Angeles and George Washington University will do the test in a few cases.

In the latest issue of the *New England Journal of Medicine*, Dr. John C. Fletcher, a bioethicist at the federal government's National Institutes of Health, advocates that parents be permitted to use such tests for determining sex.

Fletcher says he finally decided "it's a woman's right to decide her reproductive future and if she's going to seek this procedure and abortion anyway, she should at least be able to get the very best medical care."

According to the *Post*, an official with the Hastings Center and Institute for Science, Ethics and Life Sciences at Hastings-on-Hudson, N.Y., said she thinks the procedure is not yet common, but could become so in another two or three years.

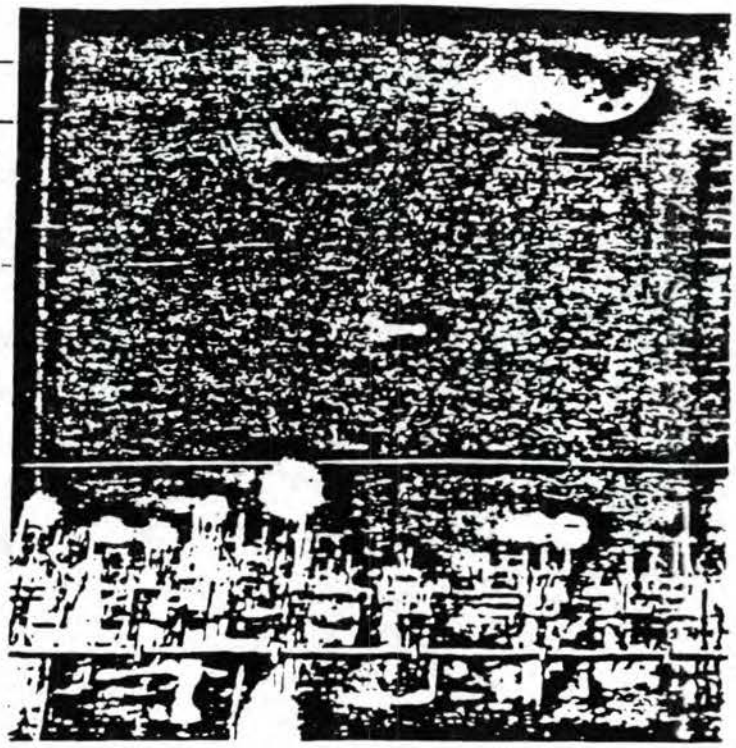
"We included use of amniocentesis for many reasons here at Meharry. But, we do not terminate a pregnancy based simply on a sexual preference," said Eleanor Bell, head of Meharry's department of obstetrics and gynecology.

There may be cases where an abortion is performed when a disease is found through the tests that could only be transmitted to males, she said.

"But I personally think the idea of abortion because of sexual preference is abhorrent and abortion at I would absolutely not perform an abortion for that reason," she said.

"This is clearly an ethical question and I am going to try to get it on the agenda of our next ethics board meeting," she said.

We've got to get some ethics [illegible] with regard to the future," [illegible] this question," she said.



Stages Of Today's Lunar Ecl

Various stages of the lunar eclipse on the Mississippi Gulf Coast are shown in this photograph taken of the Pass Christian harbor this morning. The photograph was made from two negatives, one a time-[illegible] nightfall Wednesday, [illegible] frame that was taken [illegible] different location.

. . . TVA

[illegible] would be given to retaining local employees.

"I'm surprised that they again have misinformed the Hartsville Project Committee," he said.

Kittrell said the effect of laying off [illegible] local residents would be to remove $1 million to $1.5 million in payroll revenues from the community.

"We're talking about $14 million to $20 million in lost payroll revenues per year," Kittrell said. "This is going to upset a heckuva lot of local people."

Schlatter said there is no system-wide layoff schedule to retain local employees because "we have a [illegible] agreement with the unions."

He said the first to be laid off would be employees with less than a year at Hartsville, and other factors would be the amount of service with TVA, the amount of service with any other federal agency and the amount of military service. "Veterans would have preference over non-veterans," Schlatter said.

He said TVA has been in contact with the state Department of Employment Security and the Department of Economic and Community Development to offer unemployment benefits and to minimize the economic effect on the area.

TVA announced on May [illegible] it would delay construction of [illegible] units at Hartsville near Chapman Bend and one at Yellow Creek because the power [illegible] and greatly needed by the time the units [illegible]

. . . Clock

Better get the time in before Sunday.

Daylight Saving Time [illegible] Daylight Time officially [illegible] pollution [illegible] Eastern Daylight Time [illegible]

More of Same — Almost —

[illegible] the other day there is no [illegible] "F" in the Eskimo [illegible] And that perhaps is [illegible] are no columnists on paper on the end of the [illegible]

Harvest budget store

Thursday, Friday, Saturday

MEN'S COTTON FLANNEL SHIRTS

8.99

Assorted [illegible] 100% cotton [illegible]

SAVE 4.99

ADDITIONAL

- Other Groups
  - OSG, through the Corps, provides health personnel to Peace Corps, National Park Service, international health agencies (World Health Organization, Pan American Health Organization), and provides specialized health personnel to State and local health departments, and specialized faculty support to universities.

Do we need a surgeon general?

We don't. Health and Human Services makes job redundant.

As Washington ponders exactly how many abortions and hysterectomies Dr. Henry Foster performed during his medical career, or whether he knew about a syphilis study in 1969, an important question comes to mind: Do we need a surgeon general?

No. We don't.

You wouldn't know it from all the brouhaha, but the surgeon general really doesn't do very much.

The office was originally established in the 19th century to ensure medical care for the Navy.

For years, surgeons general labored in quiet obscurity until C. Everett Koop dragged the old Navy-style uniforms out of mothballs and discovered television.



By Michael Tanner, director of health and welfare studies at the Cato Institute in Washington, D.C.

Nowadays, the surgeon general is little more than the national nanny, nagging us to stop smoking, lose weight, exercise more and never go out without a condom.

Flip through a copy of the Constitution, and you won't find the authorization for the federal government to take the taxpayers' money to establish an office to tell us how we should live our lives.

There are plenty of private groups that are fully capable of instructing us on how to be healthy, wealthy and wise without the government getting involved.

Alcoholics Anonymous can preach sobriety.

The American Medical Association can lecture the couch potatoes on the benefits of losing weight and exercising more.

Planned Parenthood and the Family Research Council can fight it out over when and if we should have sex.

The American Lung Association can tell us not to smoke.

If we want to stop smoking, perhaps we could do something really radical and stop subsidizing tobacco farmers. Instead, we pay people to grow tobacco and then pay the surgeon general to tell us to stop.

Moreover, the government's involvement turns all these health questions into political ones. That's why everyone is so interested in Foster's record on abortion, or former surgeon general Joycelyn Elders' opinion on masturbation. Both the left and the right want access to a government-funded microphone.

Today, the Clinton administration wants to lecture us on safe sex. Tomorrow, a different administration may want to lecture us on abstinence.

We shouldn't be forced to pay for either one.

It's not that these are not all important issues — and I would love to see healthier Americans.

But this is a government that has enough problems trying to deliver the mail. Being the nanny for 260 million Americans seems a little beyond its ability.

If constitutional considerations are not enough to eliminate this office, perhaps budgetary ones are.

Congress is currently searching for ways to cut spending and balance the budget. The surgeon general's office is relatively inexpensive as federal bureaucracies go — roughly $1 million a year. But a million here, a million there, and pretty soon you have real money.

The surgeon general does oversee the Public Health Service. But we already have a Department of Health and Human Services that is supposed to be running the government's health-care programs.

Why not let HHS take over any useful functions of the Public Health Service and dump the rest, including the surgeon general?

If the surgeon general disappeared tomorrow, no one in America would notice — except for the peace and quiet.

What Koop Wrought

Henry Foster and the Very Model of a Modern Surgeon General

By Abigail Trafford

NEWS FLASH! The doctor on the podium advocates sex education in kindergarten and condom ads on television. He says a pregnant woman infected with the AIDS virus ought to have the option of abortion. He reports there's no conclusive data on the possibly harmful effects of abortion on women.

Oh, you're thinking: This must be Henry Foster Jr., President Clinton's nominee for surgeon general, the Tennessee obstetrician who's in trouble on the issue of abortion. Or maybe it sounds like a replay from Joycelyn Elders, who was forced to resign last year, the "Condom Queen" who promoted sex education and talked about masturbation.

But no. It's the familiar voice of an old public health soldier, the legendary C. Everett Koop, surgeon general in the Republican administration of Ronald Reagan. Although Koop has been out of the government since 1989, his ghost still inhabits the office.

Before Koop, the surgeon general was largely a forgotten figurehead of the Public Health Service. After Koop, the surgeon general became a lightning rod in the struggle over the nation's values and character.

Controversy was his lode star. Inflaming critics was his style. The hotter the rhetoric, the more he flourished. How did Koop get away with being so controversial—and so effective?

Whatever happens to Foster's nomination, perhaps future surgeons general who want to pick up Koop's mantle as a national opinion molder on both health and social issues can learn something from the ghost of this surgeon general past.

Part of Koop's success was the force of his hellzapoppin' personality. Part of it was the times—the emerging epidemic of AIDS gave Koop a focus. But part of it was the way he took on the job, turning the position of surgeon general into an independent voice that rose above partisan politics and moral prescriptions. His example helps explain why his successors have had so much trouble:

■ *Koop was a surprise as surgeon general.* He came to Washington from Philadelphia as a super-star pediatric surgeon, an evangelical Christian and arch foe of abortion. His nomination was embraced by the religious and political right, and it horrified liberal



JAMES K.W. ATHERTON—THE WASHINGTON POST

Democrats and many leading women's groups. Koop was nicknamed "Dr. "Kook" and his bitterly contested confirmation dragged on in the Senate for nine months.

But once in office, he astounded friend and foe alike. He horrified his conservative supporters with his statements about early sex education, abortion and AIDS. He delighted liberals and some Democrats who apologized to him for opposing his nomination. The turning point came in 1986 with his landmark AIDS report that called for an aggressive federal response to the disease and showed compassion and support for those infected. By establishing his independence, creating his own constituency and breaking out of the politics-as-usual syndrome, he became enormously popular with the general public.

The problem confronting potential surgeons general today is that no president wants a surprise in that sensitive position. Most high-profile political jobs are filled to satisfy a high-profile political need and garner support from a particular constituency.

The irony is that Dr. Elders fulfilled everyone's expectations as surgeon general—those of her supporters as well as her critics. She behaved just the way she had as director of the Arkansas Department of Health. She was warm, direct and eager to speak her mind on important health issues. This worked well for her back home but didn't translate onto the national scene. As long she acted predictably, critics could just wait for her to self-destruct with her ill-considered statements.

■ *Koop built up a bipartisan constituency.* He went out of his way to establish the position of surgeon general as a public servant responsible to all the people, not to any particular group or party. As he said in a 1987 interview: "I am the surgeon general of the heterosexuals and the homosexuals, of the young and the old, of the moral or the immoral, the married and the unmarried."

By comparison, his successors Antonia Novello and Elders tended to focus on the constituencies that supported them in the first place. Novello, the first Hispanic surgeon general, was hugely popular in the Hispanic community. Elders had a strong following among public health workers and in the African American community. Although very different as surgeon generals, they never transcended their original base of support.

■ *Koop successfully separated medicine from morals.* While he understood that the debate about AIDS was a debate about values, Koop did not tell people how to behave morally. He told them how to protect themselves from disease—and in unusually frank language. Koop's dictum was: "I am the surgeon general, not the chaplain of the public health service." But keeping morals out of the public discussion of medical issues and health policies may be more difficult in today's political climate, especially on the issue of abortion.

■ *Koop served as a counterpoint to President Reagan.* Many in the White House were critical of Koop and felt that he had betrayed conservatives. But Koop's popularity not only protected him against critics within the administration but helped neutralize public criticism that the Reagan administration was insensitive to the AIDS epidemic.

From the start, Koop established his independence from the White House and didn't clear what he said or did through the usual channels. At times, he seemed to be the polar opposite of the president. But in the process, the two older men balanced each other and solidified the middle. Koop, for all the controversy he caused, remained an asset to the Reagan administration.

If there's a reassuring message in the Koop story for Henry Foster and the Clinton administration, it's that he successfully endured those long dark months when his nomination was stalled in the Senate. Whether the Tennessee obstetrician-gynecologist will be confirmed is about politics. Whether he could follow in Koop's footsteps is about rising above politics.

Abigail Trafford is editor of The Washington Post's Health section.

The Foster-Elders continuum

By Ralph Reed

In one sense, President Clinton's choice of Dr. Henry Foster Jr. to be surgeon general is just one more in a long series of botched nominations.

From Zoe Baird and Kimba Wood — Mr. Clinton's two failed picks for attorney general — to the withdrawn nominations of Lani Guinier as civil rights enforcement chief and Bobby Ray Inman as defense secretary, the administration has shown an astonishing ineptitude that has veteran Washington observers shaking their heads in disbelief.

Now as the evidence mounts that Dr. Foster had much wider experience in performing abortions that the administration initially admitted, or perhaps knew, Clinton spokesmen are privately giving the same excuse they gave in the other cases: Incomplete examination of the candidate's background. The question arises: Can't these guys get anything right?

But aside from the issue of competence — or lack thereof — of the president's staff in such matters, the Foster nomination is revealing in other, more important ways. Anyone who thought Mr. Clinton's firing of Joycelyn Elders last month indicated a new-found sensitivity to parents outraged by her attacks on traditional morality should think again. With the nomination of Dr. Foster as surgeon general, Mr. Clinton has confirmed that his administration is dedicated to the promotion of radical social policies out of step with the views — and offensive to the values — of millions of Americans.

You might think that the president would be inclined to pick a well-credentialed, mainstream nominee to replace the volatile Dr. Elders, whose penchant for offensive remarks and relentless promotion of contraception for schoolchildren ignited a political firestorm. Perhaps a prestigious heart surgeon or cancer expert with an impressive record in fighting some of the nation's most serious health problems. Well, no such luck.

Instead, the president chose someone who is not only a long-time advocate of the same failed agenda that Dr. Elders promoted, but has also promoted — as well as performed — abortions. After changing his story several times, Dr. Foster now admits to having carried out 39 "pregnancy terminations" in private practice, and there continue to be serious questions about whether this is the complete story of his personal experience in taking innocent human life, including the issue of whether he performed abortions illegally before 1973.

On other matters, his record is crystal clear. Dr. Foster's close professional and personal ties with the nation's leading abortion provider, Planned Parenthood, are well documented. He served on the board of directors of Planned Parenthood from 1978 to 1981, and is also a member of the National Leadership Committee of Planned Parenthood's Campaign to Keep Abortion Safe and Legal, a group formed to combat the Supreme Court's Webster decision, which allowed states to set restrictions on abortion such as parental consent and notification laws, and bans on third-trimester abortions. The group favors the right to abortion on demand during all nine months of pregnancy, without any restrictions.

If the administration really wanted to reduce teen pregnancy and abortion, it would stop fighting against abstinence-based sex-ed programs.

Aside from his abortion practice and promotion, Dr. Foster is also a longtime advocate of making condoms available to children at school-based clinics and contraceptive-based sex education. He is best known in Tennessee for heading the "I Have a Future" program, which targets disadvantaged adolescents aged 14 to 19. According to the program's own documents, one of its main objectives is to "increase contraceptive availability" for teens to reduce pregnancy rates, with no mention of abstinence or delaying sexual activity. As sociologist Barbara Dafoe Whitehead has documented, such approaches to sex ed have utterly failed in achieving a reduction in teen pregnancy rates. In New Jersey, for example, after the institution of a similar program, births to unwed teen mothers went from 67.6 percent in 1980 to 84 percent in 1991.

At the news conference announcing Dr. Foster's nomination, Mr. Clinton said he wanted him to lead a national campaign against teen pregnancy. It's clear from his past record what kind of campaign that would be. Although Dr. Foster may not be as outspoken as former Surgeon General Elders, his views on teen-age sexual activity and "reproductive health" are nearly identical. Planned Parenthood, on whose board Dr. Foster served, endorses the Sex Information and Education Council of the United States (SEICUS) guidelines for sex education, which advise teachers to discuss masturbation with children aged 5 to 8 and teaches this same age group that homosexuality and heterosexuality are equally valid lifestyle choices.

That Mr. Clinton should nominate a man so closely associated with the abortion industry to the nation's top health post should tell us several things.

First, that his actions belie his rhetoric about wanting abortion to be "safe, legal and rare." From his second day in office, when he signed a series of executive orders reversing existing restrictions on federal funding for abortion, to his support of the radical Freedom of Choice Act, to his attempt to force abortion policies on developing countries in the Third World at the Cairo population conference, Mr. Clinton has shown himself to be completely beholden to the radical, pro-abortion lobby of Planned Parenthood and the National Abortion and Reproductive Rights Action League (NARAL). While waffling on issues ranging from defense to a middle-class tax cut, the president has been more predictable on abortion than on any other issue. He has consistently shown a disturbing lack of respect for innocent human life.

The nomination of Dr. Foster also makes clear that it wasn't Dr. Elders' controversial views and policy prescriptions that led to her dismissal. What got Dr. Elders into trouble was the fact that she didn't understand the administration's first principle of dealing with social issues: Use lots of pro-family, pro-traditional values rhetoric in order to disguise the radical nature of the actual policies being implemented. The fact is, her controversial views on sex education in the schools were par for the course, but her *outspokenness* (some would term it candor) about her views had clearly become a political liability for the president.

With Dr. Foster's nomination it becomes increasingly apparent that the president is more interested in defending the reigning ideology of sex-without-consequences — even if it means riding roughshod over the rights of parents in the process — than he is in actually reducing the rate of teen pregnancy.

Rarely has there been a more thoroughly discredited idea than the notion that widespread availability of contraceptives and knowledge of their use leads to a diminished rate of teen pregnancy and abortion. Today, with much more sex education and availability of birth control than there was 25 years ago, we also have higher rates of teen pregnancy, soaring illegitimacy, and a much higher abortion rate.

If the administration really wanted to reduce teen pregnancy and abortion, it would stop fighting against abstinence-based sex-ed programs, which have a proven track record in the few school systems which have tried them. The Foster nomination is simply a prescription for more of the same: more contraception, more sex ed and more availability of abortion. Washington should know by now that that prescription doesn't work.

The Clinton administration seems intent on assaulting the deeply-held values of the millions of Americans who adhere to traditional morality. November's election results should have sent a strong message to Washington that ordinary citizens will not stand idly by while the federal government undermines the values they teach in their homes and celebrate in their churches and synagogues.

The White House has shown a marked lack of candor in dealing with questions about Dr. Foster's controversial past, and candor is perhaps the most valuable quality in government. In the interest of the many important health issues that currently face the nation, the president should withdraw Dr. Foster's nomination in favor of a surgeon general who will unite and not divide, who will heal and not reopen the wounds caused by the stormy tenure of Joycelyn Elders.

Ralph Reed is executive director of the Christian Coalition.

THE DOCTOR'S WORLD

Surgeon General Fight: Job of So Little Power Is an Engine for Storms

Tug-of-war over a post that is an anachronism.

By LAWRENCE K. ALTMAN, M.D.

WASHINGTON, Feb. 13 The controversy swirling around the nomination of Dr. Henry W. Foster Jr. as Surgeon General should not be a surprise to anyone who knows how drastically the 125-year old job has changed in recent years.

What was once one of the most powerful health positions in the country is now an anachronism, a vestige from the days when the Surgeon General oversaw a huge portion of the civilian Federal health empire. Those duties now fall to the Assistant Secretary of Health and Human Services. The Surgeon General reports to the Deputy Assistant Secretary of Health and has little authority in the department and little staff.

The Surgeon General's position in the Public Health Service was eroded by a series of Government reorganizations, beginning in the 1960's, that left the holder's responsibilities and functions poorly defined.

A Surgeon General's power is now determined almost entirely by the force of his or her personality and how he or she chooses causes and uses the bully pulpit to advance them. There has always been an element of politics in any public health officer's job, but the position seems to have been more politicized in recent years, in part because of the Government's growing role in health care.

Once in office, several recent Surgeons General have expressed views that came into conflict with those of the President who had appointed them as well as with [illegible] superiors in the Department of Health and Human Services, creating splits between leaders of the Federal health bureaucracy and substantial public confusion about who is in charge.

Strong Surgeons General like Dr. C. Everett Koop, who served in the Reagan Administration, have completely overshadowed their superiors at times, weakening their authority and prestige. President Clinton's outspoken Surgeon General, Dr. Joycelyn Elders, did not fare as well and ended up being dismissed by the President because her intemperate remarks on a large number of controversial health issues made her a political liability.

Indeed, in part to ease such tensions, the position was vacant for four years, from 1973 to 1977, when the Surgeon General's office itself and that the Acting Surgeon General, Dr. S. Paul Ehrlich Jr., principally "carried out ceremonial functions." From 1977 to 1981, the Surgeon General's position was consolidated with that of the Assistant Secretary for Health, but since 1981 it has been a separate position.

Underscoring the Surgeon General's lack of power, Senator Joseph R. Biden Jr., Democrat of Delaware, declared in an angry denunciation of the White House's handling of Dr. Foster's nomination, "You could eliminate the entire job and you'd have no impact on the people of America."

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Dr. Foster says he wants to be Surgeon General to help solve many national public health problems, particularly the epidemic of teen-age pregnancy. From a selected group of Dr. Foster's writings that the White House issued over the weekend, a picture emerges of the obstetrician and gynecologist as a caring medical educator, deeply concerned about medical ethics and devoted to improving the health and welfare of the poor.

In one speech for which the date was not given, Dr. Foster, who is black, said he understood outcries that "the intent of family planning is black genocide," but supported family planning with conditions.

"Other areas of health care must be given as high a priority as family planning," Dr. Foster said. Among the other conditions were that all such programs be voluntary and not coercive and that those for blacks include blacks at all meaningful policy making and administrative levels.

Dr. Foster crusaded for more black doctors and also criticized leading medical educators and researchers. In a National Academy of Sciences forum on human experimentation in 1975, Dr. Foster criticized the lack of communication between human volunteers and investigators, saying, "The ghetto tongue most often eludes the university researcher, and vice versa."

While the White House has been severely criticized for sneptly vetting Dr. Foster's nomination process, he has been criticized for his difficulty in recalling how many abortions he performed. In coming to his support, other doctors have said that they could not recall how many hysterectomies or other procedures they had done in their careers. But in this era of medical consumerism and heightened competition, doctors often do keep track of their records, so they can tell patients how many such procedures they have done.

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If Dr. Foster's nomination is approved, he would be one of four United States Surgeons General. The Surgeons General of the Army, Navy and Air Force come from the ranks and oversee the professional standards and care of the military and their dependents. The Public Health Service is a uniformed nonmilitary service, and three of its last four Surgeons General have come from outside the Public Health Service commissioned corps.



Paul Hosefros/The New York Times

Dr. Joycelyn Elders



Associated Press

Dr. C. Everett Koop



United Press International

Dr. Luther Terry



Dr. Thomas Parran

The Surgeon General of the United States Public Health Service, which was founded under another name in 1798, has a broader role than his or her counterparts in the military. He is officially regarded as the nation's spokesman on good health activities, and is expected to alert the nation to things that are harmful or potentially harmful, and to keep the country informed on a variety of health issues.

In an era when the public gets much of its information from television, a Surgeon General of the United States Public Health Service must be willing to talk publicly. That is a relatively new role for doctors,

A bully pulpit has replaced muscle in the health arena.

because not long ago it was considered bad form for doctors to speak to the press.

Yet that very fact creates a quandary for Federal officials because the Surgeon General of the United States Public Health Service is not the official spokesman for the Department of Health and Human Services, which has a separate public relations staff devoted to such functions.

If the Surgeon General is a team player, the mix may work. But if the Surgeon General wants to set his own agenda, he becomes a political liability. So in many ways, appointing a Surgeon General can be a no-win situation.

All [illegible] a few recent Surgeons Gen[illegible] the United States Public Health Service, like Dr. Koop, have been clinicians, most earlier ones were doctors who specialized in public health. Dr. Foster would be first gynecologist in the job, and critics of Mr. Clinton's handling of the nomination have asked why the President did not name an internist or pediatrician, which would have avoided some of the controversial issues.

To many medical leaders, the position calls for a public health spokesman like Dr. Margaret A. Hamburg, the New York City Health Commissioner, or another state or city health officer who is experienced in dealing publicly with politically sensitive issues and who has a grasp of the broad issues in public health. But even some Surgeons General who were public health specialists became controversial for promoting sex education and knowledge about sexually transmitted diseases, as Dr. Koop did over AIDS and similar issues. It was Dr. Koop who wrote the report on AIDS that was mailed to every household in the country to educate the public about the disease and that came under attack from conservatives.

Dr. Koop's appointment was initially opposed by many medical organizations because they feared his conservative views on abortion and other health issues would hamper his ability to address crucial public health issues. At the beginning of his eight-year tenure, Dr. Koop was not a highly visible figure. But as leaders of other countries began speaking out on the importance of the AIDS epidemic, and the White House remained silent on the issue, Dr. Koop joined the chorus. Looking much like an old-fashioned family doctor, Dr. Koop made use of his position to talk frankly not only about AIDS but about the benefits of organ transplantation, the hazards of tobacco and other topics. By taking independent positions on such subjects, he won over the medical establishment.

Dr. Koop's outspokenness carried on a tradition set by one of his predecessors, Dr. Thomas Parran, who had previously been Health Commissioner of New York State where he had made a name for himself with a radio talk he never delivered in 1934. Dr. Parran was scheduled to give a talk on the CBS network on public health needs. His talk was to have included the word syphilis. But network officials, who had seen an advance copy, demanded that he remove the word because they said it was likely to offend listeners. Dr. Parran refused and the show was canceled.

But Dr. Parran's action had an enormous effect. Newspapers around the country printed the suppressed talk. And in 1936 Franklin D. Roosevelt, a former Governor of New York, made Dr. Parran Surgeon General of the United States Public Health Service.

Another predecessor, Dr. Luther Terry, took on the tobacco industry in 1964, when he made public the first report of his advisory committee on smoking and health. Such reports have been issued annually since 1969, in accordance with provisions of the Public Health Cigarette Smoking Act.

Perhaps the number of appearances on television or citations in newspapers is not an important measure of success for a Surgeon General. As Dr. Terry showed, it is more a matter of what programs he started and their outcome.

Watch for colorful Part 2's [illegible]
The New York Times Ma[illegible]

THE

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Founder, Sept. 15, 1982

THE NATION'S NEWSPAPER
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Today's debate: THE NEW SURGEON GENERAL

Ability, not abortion, is test of surgeon general

OUR VIEW **Henry Foster has done what thousands 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

USA Today A-8 2-7-95

Foster isn't fit for job

OPPOSING VIEW **A physician who would perform abortions can't be trusted in such a high national office.**

By Judie Brown

Henry Foster Jr. is a physician who has, during the course of his medical career, opted out of the Hippocratic Oath and bought the lie that abortion is a good thing.

His nomination by pro-abortion President William Jefferson Clinton for the office of surgeon general is a joke, a very bad joke that could cost the lives of many more preborn human beings if Foster is confirmed.

America now knows his dirty little secret, that during his medical career he personally aborted several little children.

This admission alone must cause every responsible politician to pause.

A doctor who has already perpetrated an act that is diabolical in the eyes of millions of Americans is not a doctor who will be trusted, regardless of his political mantle of respectability. After all, do we really want a surgeon general who has already proven his "compassion" with instruments designed to kill?

Foster is not qualified to be surgeon general. He is a man who has admitted to taking the lives of preborn children, and he has made no apologies for his grisly action.

He committed abortion in a hospital setting, and we surmise that he somehow feels this is an acceptable thing. It is not.

Foster's basic studies in biology and his early medical training taught him that a person exists at fertilization. Destroying that person is not a "reproductive activity," as administration officials have suggested; it is a tragedy.

A preborn child is not a cancerous growth or a disease. A preborn child is a human being, and Foster just doesn't get it.

Morally and ethically, regardless of what the law says or does not say, no physician is ever forced to abort a child. Obviously, Foster wanted to do those abortions, and he did do them.

A man who can find reasons to eliminate a tiny baby, a fellow human being, is a man who has trouble separating rhetoric from reality. An abortion destroys somebody. Abortion kills.

The United States does not need a surgeon general who denies such a basic truth in his professional practice, even if all of his other qualifications elevate him to saint-hood — which, I might add, they do not.

Henry Foster must be rejected by the Senate and, most important, by the American people.

His prescription for solving women's problems is deadly.

Judie Brown is president of American Life League, based in Stafford, Va.

The Washington Post

AN INDEPENDENT NEWSPAPER

A28 THURSDAY, FEBRUARY 9, 1995

The Surgeon General Melee

TO HAVE GONE from counting beans to counting abortions is not progress. The first thing to be said about the bollixed nomination of Dr. Henry Foster Jr. to fill the venerable position of surgeon general (created in 1871, greatly reduced in importance when tucked into the lower reaches of the HEW flow chart in 1966) is that having haplessly generated an abortion argument, the administration should not cave on it. Of course, this argument didn't have to be generated—but it was. Dr. Foster's White House patrons should never have started listing numbers of possible abortions performed by him, giving the impression that there was some numerical limit above which he would not be suitable to hold the post and thus, by implication, suggesting that there was something wrong with a physician in his line of specialty performing them in the first place. But they did all of that. At a minimum they should now reject this criterion as a pass-fail test for a prospective government job-holder, whether they or Dr. Foster go through with the nomination or not.

Dr. Foster is an estimable man: dean and acting president of Meharry Medical College in Nashville, founder of the respected "I Have a Future" program, which operated out of two local housing projects and was aimed at delaying sexual activity among teenagers and encouraging responsibility and restraint. Republican Sen. Bill Frist of Tennessee was among his endorsers when the nomination was announced. His program did not offer abortion counseling for teens, but did offer health services and contraceptives. You could argue, if you were given over to board-game, positioning politics, that he was, because of all this, the ideal candidate, above all the ideal successor to his needlessly offensive predecessor, not too much this or too much that, perceived as being a figure of the moderate middle etc. And this evidently is the way his White House backers saw it. But it is an abstract, unavailing way of looking at such things. It is what got them in trouble. And it is what we mean when we say that the nomination was in some respects "too cute," the kind of cute that often ends up harming the innocent nominee and failing spectacularly to deliver its supposed political blessings.

There is one more point. It is only relatively recently—owing to the controversies over cigarettes, AIDS and other matters, and to the assertive personalities of C. Everett Koop and, in a different way, Joycelyn Elders—that the holder of this job has become a highly visible public figure. The job, as former HEW secretary Joseph A. Califano Jr. pointed out on the opposite page yesterday, "carries with it little staff, no programmatic budgets and no clout in the federal bureaucracy." Mostly, it is advisory; it has come to be seen as a preaching position concerning large health questions. Surgeons general do not become government spokespersons for all matters relating to health but generally only a certain few that it is thought beneficial to highlight and harp on. They can in this respect do some good.

But, as Mr. Califano also observed in yesterday's article, it is by no means obvious that the subject chosen for Dr. Foster's attention is especially suited to the office for which he has been nominated. To say that is not to deny the enormous importance of the problems created by teenage pregnancy or the absolute desirability of a national effort to reduce it or to question Dr. Foster's commitment to the objective. It is, on the contrary, simply to observe, as Mr. Califano did, that the huge stress on teen pregnancy as a "medical" issue, a matter to be dealt with in the realm of contraceptives, abortion counseling and health, tends wrongly to depict both the sources of the problem and the efforts that will have to be undertaken to resolve it. The very existence of the tumultuous dispute over Dr. Foster's record on performing abortions and the utterly different ways that record is perceived by different groups of engaged Americans make plain how difficult it is to deal with the subject of teen pregnancy as a "public health issue." We don't know whether, as some have been suggesting for years, the surgeon general's anachronistic job should be abolished; but we do think Mr. Califano is right in saying that it is not the right headquarters for a campaign against teen pregnancy. Of course he can speak out on teen pregnancy. But it should not be the focus of the job, and his office should not be the center of the government's effort. If Dr. Foster weathers the storm into which he has been cast and becomes the surgeon general, he should greatly broaden his areas of concern.

Colbert I. King

THE WASHINGTON POST

THURSDAY, FEBRUARY 9, 1995

A-29

Surgeon General Dismay: They Keep Doing It

Leave it to the Clinton administration to blow something as easy as selecting a surgeon general. In what should have been a slam dunk, the White House has managed to draft a nominee who's already in foul trouble before play gets started. How does Bill Clinton manage to do this to himself time after time?

February being black history month, I looked to the musings of that late African American philosopher-comedienne Jackie (Moms) Mabley for insight. Moms, who had advice for everybody, used to tell undisciplined youths with raging hormones, "Do whatever you want to do, but by all means, know what you're doing." If Moms were around today, she might say the Clintonites' big problem is their tendency to do just the opposite: They swing their mouths in motion before they set their minds in gear. The nomination of Dr. Henry Foster is a case in point.

Having spent a few years of my pre-journalist life on the board of directors of the local area Planned Parenthood of Metropolitan Washington, I'm no stranger to what goes on inside planned parenthood clinics. You don't have to be a clinic operator, however, to know that along with family planning counseling and contraceptive services, some facilities offer the option of terminating pregnancies.

You also don't have to be a political genius to know that in asking a new Republican Senate loaded with a majority or near majority of anti-abortion members to confirm a Planned Parenthood activist as the next surgeon general, the administration was inviting a test of strength with politically energized anti-choice groups. And that was before it was disclosed that the nomi[illegible] respected physician, medical educator and administrator, had performed legal abortions.

What's worse, after giving out erroneous information on how many abortions Foster had performed, the nominee and the administration are now flapping around trying to come up with an exact count, as if the number will make any difference to abortion foes. Stressing the low number of abortions performed by Foster is about as significant to abortion opponents as telling a woman in her first trimester that she is only a little bit pregnant. To the anti-choice groups, one abortion is too many.

With that news out in the open, Bill Clinton—already under the gun on Capitol Hill—must now engage in a divisive and unexpected confirmation battle. And that perhaps is the greatest indictment of all against the White House staff. With the Clinton presidency half gone, administration stumblers and blunderers are still getting him into political conflicts that he neither anticipates nor is ready to fight.

The shame of it all is that Dr. Foster, who began the week with a sterling reputation, could end the month as damaged goods. Former Bush administration health and human services secretary Louis Sullivan, who has known Foster since their undergraduate days at Morehouse College in the 1950s, says the nominee is "a decent guy, a conciliator, who would be an effective surgeon general." Sullivan wants to know how it could come to this. That part's easy.

The White House chased Foster for all the wrong reasons. As an African American physician with strong credentials in fighting teenage pregnancy, Foster was seen as the perfect makeup call after Bill Clinton's unceremonious



jettisoning of Dr. Joycelyn Elders, an outspoken but popular figure in the African American community. The tactic had worked before when Clinton found himself in a tight spot with his most loyal constituency over his dumping of Lani Guinier. After that fiasco, the White House let it be known that Guinier's Justice Department post as Civil Rights Division chief would be filled with another black. After months of delay, the White House appointed Deval Patrick, a young but able lawyer, and presto, the administration was held harmless in the black community.

In the rush to achieve the same result this time, the administration underestimated its opposition, failed to do its homework and—just as bad—failed to give Foster time to do his.

What's even worse, officials hoped to use Foster's high-profile work on teen pregnancy in Nashville as a principal theme in his job as surgeon general, when they knew full well that the significant work on the issue in the context of welfare reform will occur within the bastwick of a conservative Congress and among faceless administration policy wonks with little personal knowledge of poverty and only textbook and dinner party understanding of what it means to grow up black and poor in America.

Foster, like his predecessor, would be out and about touting abstinence and more personal responsibility and making Bill Clinton look good, while real policy gets set in Washington. For that reason alone, Foster might well regard the coming struggle as a blessing in disguise and consider his options.

Anyway, why should someone of Foster's reputation want to get involved with these klutzes? In pickup basketball games in my old neighborhood, there were some guys who were never guarded very closely because they could be counted on to double-dribble or blow layups at a crucial moment in the game. They were said to be "self-checked." That about sizes up this administration.

The writer is a member of the editorial page staff.

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REP. LOWEY STATEMENT ON FOSTER NOMINATION

WASHINGTON, DC --- Congresswoman Nita M. Lowey (D-NY), Co-Chair of the House Pro-Choice Task-Force issued the following statement today on Dr. Henry Foster's nomination as Surgeon General.

"We are here today to send a very strong message that the majority of Americans will not allow a narrow band of extremist special interest groups to derail Dr. Foster's nomination. We will not permit Dr. Foster to be branded with a scarlet letter "A", and we will not allow him to be victimized by a radical right litmus test. We will not tolerate the harassment of doctors, whether it occurs in front of clinics or on Capitol Hill.

"Roe v. Wade is the law of the land, and the idea that performing a legal, medical procedure could even possibly disqualify Dr. Foster is an outrage. Frankly, the number of abortions that Dr. Foster performed is irrelevant. The fact that Dr. Foster performed abortions should not disqualify him to serve as surgeon general.

"Around the country, anti-choice extremists target doctors and their patients for harassment and violence. On Capitol Hill, anti-choice politicians seek to criminalize abortion and marginalize the doctors who perform them. Today, both have set their sights on Dr. Foster.

"Anti-choice organizations and the Christian Coalition helped elect the new anti-choice majority, and the bill for that support has come due. In fact, opposition to Dr. Foster is just a beginning -- the radical right has promised "a summer of life" that will completely roll back the right to choose. We are prepared and we will fight these efforts every step of the way

"Dr. Foster must be allowed to go through the confirmation process. He is the President's nominee, and we fully expect that the President will fight for his confirmation.

"Dr. Foster has won praise from many quarters. He has delivered over 10,000 babies and has provided quality prenatal and postnatal health care to their mothers. His work in reducing teen pregnancies through the "I Have a Future" program was cited by President Bush as one of the nation's Points of Light, and his nomination has been endorsed by the AMA, the National Medical Association, and the American College of Obstetricians and Gynecologists, among others. He deserves the chance to go through the confirmation process."

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A-5 2-13-95 Wash. Post

Administration Mobilizes Behind Foster

Embattled Surgeon General Designee Gets Support From Panetta, Shalala

By Gary Lee
Washington Post Staff Writer

The Clinton administration, facing renewed attacks from GOP leaders over the abortion and sterilization records of Surgeon General-designate Henry W. Foster Jr., yesterday said it remains enthusiastic about Foster and will push to the end for his confirmation.

As the debate over Foster continued over the weekend, White House Chief of Staff Leon E. Panetta upbraided Democratic lawmakers who had publicly criticized the White House handling of the case. "We will fight for his nomination," Panetta said on NBC's "Meet the Press."

Panetta and other White House officials sought to mobilize public opinion behind the 61-year-old Nashville obstetrician-gynecologist by emphasizing his delivery of thousands of babies and development of a community program to combat teenage pregnancy during his 38-year medical career.

"If people focus on his qualifications, on his background, what he's about as an individual, then he'll be affirmed as a surgeon general," Panetta said.

"Why can't we have baby doctors as surgeon generals?" asked Health and Human Services Secretary Donna E. Shalala on ABC's "This Week With David Brinkley."

Since his nomination, Foster, acting director of Meharry Medical College in Nashville, has come under constant fire from conservative lawmakers and antiabortion groups. After initially underestimating the number of abortions he had performed, Foster acknowledged that he was the doctor of record in 39 abortion cases and administered a drug trial program in which 55 other pregnancies were terminated.

Conservative Republicans, who are marshaling a staunch opposition to the nomination, said that misstating the number of abortions he had performed raised questions about Foster's credibility.

> *"If people focus on his qualifications ... he'll be affirmed as a surgeon general."*
>
> — Leon E. Panetta, White House chief of staff

But yesterday, former vice president Dan Quayle suggested that the fact that Foster performed any abortions may disqualify him for the job. "I think when you nominate someone for surgeon general, you ought to have a person that can unify the country as much as possible," Quayle said on "Meet the Press." "And when you have someone that has performed a number of abortions, there will be a large segment of the population ... that will be opposed to that."

"The White House did not do its homework," added Quayle. "This was handled poorly and shows incompetence."

"I don't think he will be confirmed," Sen. Phil Gramm (R-Tex.) said on "This Week With David Brinkley."

Besides his abortion record, Foster's critics have pointed to his report in a medical journal nearly two decades ago that he performed hysterectomies on severely mentally retarded patients during the 1960s and '70s.

Asked about that, Panetta said: "This was something that was accepted practice at the time that he wrote the articles. . . . That practice has changed, and Doctor Foster's views have changed as well."

Democratic Sens. Barbara A. Mikulski (Md.) and Joseph R. Biden Jr. (Del.) last week openly criticized the White House handling of the nomination. "I am, quite frankly, angry that I have to occupy any of my time with this," Biden said at a news conference.

In response, Panetta criticized the lawmakers for trying to avoid addressing the abortion question.

"They're basically saying, 'God, why do I have to face this kind of controversial issue?' " Panetta said. "Because dealing with teenage pregnancies is a controversial issue. Because dealing with doctors who confront those issues is controversial. So what? That's what the name of the game is all about."

But Panetta acknowledged that the White House handling of the case was not perfect. He said the problems stemmed from the fact that both HHS and the White House had been responsible for vetting Foster. "And that should not happen," he added.

Specter sees Foster being 'railroaded'

WASH TIMES

NORTH CONWAY, N.H. (Reuters) — Sen. Arlen Specter, Pennsylvania Republican, complained yesterday that surgeon general nominee Henry W. Foster Jr. is being "railroaded" and hinted he might break ranks with the GOP and support the gynecologist's nomination.

Speaking at a Republican fundraising event in New Hampshire — where the first presidential primary takes place — Mr. Specter said Dr. Foster should be given a hearing before lawmakers decide whether they will vote for or against him.

"I don't like seeing a person railroaded before they are given a chance to express himself," said Mr. Specter, who is eyeing the White House and positioning himself as the only pro-choice candidate in the GOP field.

In an interview with Reuters, the senator stopped short of saying he would vote to confirm Dr. Foster but added, "I will break ranks [with fellow Republicans] if that is what I think is right."

Gore and Nominee Take Fight to Tennessee

A-12 2-14-95 NY Times

By DOUGLAS JEHL
Special to The New York Times

WASHINGTON, Feb. 13 — The White House abruptly changed plans today and decided not to send its nominee for Surgeon General to Capitol Hill today. Instead, it sent Vice President Al Gore to Tennessee with the nominee, Dr. Henry W. Foster Jr., to highlight the physician's work in combating teen-age pregnancy.

The schedule shift was made after a meeting Sunday evening in which the White House officials responsible for shepherding the nomination through the Senate decided that they should lay more groundwork before dispatching Dr. Foster to confront his critics directly.

The Clinton Administration also tried more vigorously than before to turn the focus away from Dr. Foster's candor about how many abortions he has performed over the years in his practice as an obstetrician, and toward the issue of abortion rights. That is an issue on which President Clinton's deputies believe they have the support of a majority of Americans, and which will ultimately win them backing for Dr. Foster in the Senate.

Both Mr. Gore and the White House spokesman, Michael D. McCurry, pointed to opponents of abortion rights as the reason the nomination was in peril. "The truth is that there are extremists within the right-to-life movement who have now hooked Republicans and Congress by the nose and they're dragging them around," Mr. McCurry said in his midday briefing.

Using unusually blunt language, Mr. McCurry accused the anti-abortion forces of insisting on Dr. Foster's defeat as a reward for having helped elect Republican candidates last November.

But even as the Vice President appeared with Dr. Foster in a low-income housing complex in Nashville to promote the nominee's work in helping to reduce teen-age pregnancy, the White House was conceding that it faced a major battle.

Not a single Republican in the Senate has declared support for Dr. Foster, who has given conflicting accounts of the number of abortions he has performed in his 38-year medical career. And while the White House has vowed to fight vigorously on his behalf, it has won public backing from only a handful of Democrats in the Senate.

"I think he's going to be very hard to confirm," Speaker Newt Gingrich said at a meeting in Georgia today. "I think it's going to be a very embarrassing set of hearings."

After Sunday, when top Administration officials had appeared on television to defend Dr. Foster's record, White House officials said the nominee would make courtesy calls in the Senate this afternoon. To pave the way, it helped to arrange for the publication in The Washington Post of an article by Dr. Foster that ran under the headline, "Why I Want to Be Surgeon General."

A shift of plans in preparation for a confrontation on Capitol Hill.

But at a strategy session Sunday evening, a White House team headed by Erskine Bowles, a deputy chief of staff, concluded that it was too soon to subject the 61-year-old gynecologist and obstetrician to the charged atmosphere on Capitol Hill. Those who took part in the discussions said they had calculated that a quick trip by Mr. Gore with Dr. Foster, the acting director of Meharry Medical College in Nashville, to their home state might attract television cameras and public attention to the project that earned Dr. Foster national recognition.

"We are not going to let the extremists defeat this man," the Vice President vowed in Nashville this morning. He sat at Dr. Foster's side. The Associated Press reported, in a crowded 10-by-12-foot apartment at a housing project converted for use by the nominee's I Have a Future program, which preaches sexual abstinence and tries to build students' self-esteem.

In fighting back today for Dr. Foster, the White House pointed to an acknowledgment by Senator Phil Gramm, the Texas Republican who has been a prominent opponent of the nominee, that the National Republican Senatorial Committee donated $175,000 last fall to an anti-abortion group in the expectation that it would be used on behalf of Republican candidates.

Mr. McCurry charged that the group, the National Right to Life Committee, and other anti-abortion forces were now demanding a payback for their work in helping Republicans win election.

White House officials said tonight that they would not be prepared to dispatch Dr. Foster on his first round of courtesy calls until Wednesday. Instead, they said they planned a meeting at a White House office building on Tuesday in which they would try to enlist the support of leaders from a wide range of religious, health and education groups.

Among those to be represented at the session, at which Dr. Foster will speak, are representatives of the National Abortion Rights Action League and the National Organization for Women. But Administration officials took pains to note that most of those who would attend were representatives of groups like the American Nurses Association and the American Association of Dental Schools, which have not made abortion rights their primary focus.

SURGEON GENERAL FUROR

What was once one of the most powerful U.S. health posts has become an anachronism. A bully pulpit is one of the few vestiges from the days of glory. *Science Times, page C3*

Liberals assured Foster has support of administration

By Paul Bedard
THE WASHINGTON TIMES A-4 2-15-95

The White House scrambled yesterday to assure liberal special-interest groups it stands four-square behind embattled surgeon general nominee Henry W. Foster Jr.

The effort came as feminists, homosexual-rights and other groups expressed concern that the administration would withdraw the nomination after enlisting their support to campaign for the 61-year-old obstetrician-gynecolo gist from Nashville, Tenn.

"Nobody in this community is going to stick their necks out for Clinton anymore," warned Steve Michael of ACT UP, the activist AIDS group. "We don't trust him."

The White House rejected suggestions that it is moving away from Dr. Foster, who raised a storm of controversy when he gave conflicting totals on the number of abortions he has performed and conceded that he had sterilized retarded women.

"I think this is a fight you take to a vote," said White House Chief of Staff Leon Panetta, who was traveling with President Clinton in California. Mr. Panetta said Dr. Foster "is not backing away. He has a sense of confidence that is reassuring."

He said appearances by Dr. Foster to defend his reputation had "helped turn some of the momentum around."

But Republicans said the nomination is doomed. To prove their point, the Senate majority whip's office is counting opposing senators.

An aide to a key Republican leader said that "if we've got 41 votes, the leadership is ready to move" and warned in a letter to the White House that the nomination is dead. It takes 60 of the 100 votes in the Senate to stop a filibuster.

Only a handful of senators have endorsed the nomination of Dr. Foster to replace former Surgeon General Joycelyn Elders, who was fired for her remarks on teen sex, legalizing drugs and masturbation.

Sen. John B. Breaux, Louisiana Democrat, meanwhile said there is "almost no" Republican support for Dr. Foster. The chief deputy Democratic whip also told the Los Angeles Times that, even among Democrats, "you'd probably have some that are not going to vote for it."

Dr. Foster plans to begin touring Senate offices today to make his case for getting the job as America's top doctor.

Mr. Panetta's strong message of support was echoed by Donna Shalala, secretary of health and human services, and Erskine Bowles, deputy White House chief of staff, at a private White House meeting with representatives of several interest groups.

"Everyone was hopeful that the administration would stand behind this nominee, and every indication was that they would," said Daniel Zingale of the Human Rights Campaign Fund, the nation's largest homosexual-rights lobby.

But other AIDS activists at the meeting expressed concern over Dr. Foster's lack of experience on AIDS-related issues and his flip-flop on supporting condom distribution. His acclaimed teen pregnancy-prevention program also endorses the distribution of condoms, but he said in a recent TV interview that he does not favor handing out condoms.

ACT UP was not invited to the meeting but distributed a letter opposing Dr. Foster. Mr Michael said the group will fight Dr Foster because of his opposition to condom distribution and because of reports that Nashville's Meharry Medical Center, where Dr Foster was recently acting president, discouraged doctors from treating AIDS patients.



Dr. Henry W. Foster Jr. plans to lobby Capitol Hill for support.

One attendee said the meeting of 75 liberal activists "was a pep rally for Dr. Foster. But we didn't hear anything we haven't heard before," adding that the administration's "coalition for Foster is fragmenting."

The official of another AIDS activist group said the White House wants the groups to organize a news conference for today or tomorrow to voice support for Dr Foster.

A White House official, however said the meeting was called simply to let Dr. Foster address interest groups directly.

Miss Shalala told those gathered "not to believe what is in the press" about Dr. Foster, said an attendee.

White House officials said they expect Senate hearings to begin next month and that Dr. Foster's nomination will be voted on by the full Senate in late April.

Other groups that attended included Planned Parenthood, the National Organization of Women, the National Abortion and Reproductive Rights Action League, the American Association of University Women — which has led a grass-roots effort on behalf of Dr Foster — several medical and religious associations and the National Education Association

Sen. Specter Offers Boost for Foster, but Others Are Pessimisti

By Helen Dewar
Washington Post Staff Writer

Henry W. Foster Jr., President Clinton's embattled choice for surgeon general, got a boost yesterday from a leading Senate Republican supporter of abortion rights along with a discouraging prognosis from nose counters in both parties.

Sen. Arlen Specter (R-Pa.) told a news conference he came away impressed after a brief meeting with the Tennessee obstetrician-gynecologist, although he stopped short of saying he would vote to confirm Foster.

Specter's comments came as Foster continued visiting key senators, including Nancy Landon Kassebaum (R-Kan.), chairman of the Labor and Human Resources Committee, which will hold hearings on his nomination next month. Kassebaum, who has complained about White House handling of the nomination, has taken no stand on it and declined to comment after her meeting with Foster.

Specter said he believes Foster should be given a chance at Senate hearings to clear up confusion over his performance of abortions and hysterectomies and reiterated that he believes no nominee should be disqualified for performing abortions—"however many."

"I think he's an impressive man. He's come up on a tough road," Specter said. He added that Foster is "entitled to a hearing, and I think the Senate ought to listen to him and evaluate his credibility."

In what appeared to be a warning to senators who would disqualify Foster for performing any abortions, Specter cautioned that such arguments could prompt a full-fledged debate on abortion rights in the Senate. Many Republicans, including House Speaker Newt Gingrich (Ga.), are urging colleagues to keep the Foster controversy from turning into a fight over abortion. If it came to a showdown, most Senate Republicans would not vote to disqualify a physician who performed abortions, Specter said.

But Senate Majority Whip Trent Lott (R-Miss.) and Sen. John Breaux (D-La.), chief deputy Democratic whip, said they believe Foster faces a difficult fight for confirmation on the Senate floor.

"It's uphill, it's shaky" and "politically costly" for Clinton, Breaux told reporters. "I really felt it was a fight he didn't need to have," Breaux added. By contrast, Senate Minority Leader Thomas A. Daschle (D-S.D.) said Wednesday that he was encouraged that there had been a "turnaround" in Foster's favor.

Republicans took a whip check of senators earlier this week and it came out "pretty strong" against confirmation of Foster. Lott said in response to a reporter's question: "I think they have a tough battle if it is brought up," he added. Lott declined to discuss specific results of the head count.

Several Foster supporters have said they are counting on support to pick up as time goes on, unless there are further damaging revelations.

Meanwhile, FBI Director Louis J. Freeh sent a letter to White House counsel Abner J. Mikva expressing his concern about a news report suggesting that confirmation hearings were being delayed because the FBI had not completed its background check on Foster.

"The report is complete and will be sent to the White House tomorrow," Freeh said yesterday. Freeh was concerned the report ated the impression that the FBI was b used to help facilitate the Foster nomina

White House press secretary Mac McCurry said yesterday that the FBI b ground check would be reviewed and ter's nomination sent to the Senate soo ber that.

The receipt of the background check quickly accelerates what administration cials had said was a process under which mal nomination and hearings would not be until mid-March.

But McCurry said any suggestion that White House was relying on the FBI to slow on its checks to give the White Ho time to build a better political case for F ter "is pure, total bunk."

Staff writers Ann Devroy and Pierre Thomas contributed to this report.

AZ 2-18-93 Wash. Post

Clinton to back Foster 'all-out'

Background check concluded by FBI

ASSOCIATED PRESS

The FBI completed its background report on President Clinton's embattled nominee for surgeon general yesterday as Mr. Clinton pledged "to wage an all-out fight" to see Dr. Henry W. Foster Jr. confirmed by the Senate.

Press Secretary Michael McCurry said the White House counsel's office was reviewing the FBI report on Dr. Foster and assembling other necessary paperwork, such as financial disclosure forms, to forward to the Senate.

He rejected suggestions the White House wanted to delay Senate hearings on Dr. Foster's nomination in hopes that opposition to the nomination would subside.

Mr. Clinton, in an interview with ABC Radio's Tom Joyner, expressed hope Dr. Foster would surmount Senate opposition.

"I know a lot of people are trying to defeat him, but I think they basically have a political ax to grind," he said.

The president said extreme elements of the Republican Party were opposing Dr. Foster because the obstetrician-gynecologist performed some abortions during a nearly 40-year career.

"Dr. Foster should not be disqualified from serving, particularly given the whole weight of his experience in life, and I'm going to fight for him and I believe we'll get him confirmed," Mr. Clinton said. "It's certainly a fight worth making."

Mr. Clinton expressed hope that "there will be enough common sense and fairness in the Senate to stand up to that extremism."

"At least I'm going to wage an all-out fight to see that it happens."

Mr. Clinton's interview with Mr. Joyner took place Thursday night. A transcript was released yesterday.

Mr. McCurry said the Foster nomination would be submitted to the Senate "at the first appropriate and available moment."

"We believe the momentum is on Dr. Foster's side now," Mr. McCurry said. "More and more senators are indicating that they are keeping an open mind, that they're interested in hearing from him. . . . I would expect this to move as quickly as we can."

Sen. Nancy Landon Kassebaum, Kansas Republican, who will preside over the Senate Labor and Human Resources Committee's hearings on his nomination, promised "a fair and complete hearing."

Mrs. Kassebaum, questioned after a speech to the Chamber of Commerce of Greater Kansas City, said the panel would hold hearings as soon at it receives all the necessary paperwork. She has said the hearings probably will begin in early April.

Since Dr. Foster's nomination was announced two weeks ago, he has been under attack from pro-life groups and conservative lawmakers. They have criticized him both for having performed abortions and for what they call a lack of credibility — because he has given varying answers about the number of abortions he has performed.



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

Wash. Times 14A 2-24-95

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 people 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.

THE NEW REPUBLIC

MARCH 6, 1995

A VOTE FOR FOSTER

To the White House spin doctors searching for a new surgeon general, Dr. Henry Foster, a moderate black physician who opposes condom distribution and preaches a "just say no" approach on teen pregnancy, seemed just the nominee to counter the Republican tide—and make everyone forget about Joycelyn Elders. Instead, Foster's inadequately vetted nomination has turned into another in a seemingly endless series of White House disasters. Now that Foster is under attack from the religious right for having performed abortions, and then being inaccurate about how many he performed, we are tempted to say the fiasco serves the White House operatives right.

But at least the White House's calculations amounted to an attempt, albeit transparent, to reach out beyond the Democratic Party's liberal base. The attack on Foster, by contrast, emanates from the most intolerant wing of the American right. And the Republicans are exploiting this fervor—rather than acknowledging that Foster has broken no laws, or that his approach to contraception and teen pregnancy largely mirrors their own (one reason George Bush made Foster's "I Have a Future" program a Point of Light). The Republicans, not the president, are playing the politics of polarization. Clinton was right to dispense with the mealy-mouthed pseudo-endorsements that he offered following the right-wing attacks; they were all too characteristic of his indecision and invited further trouble. Now, Clinton should stick to his nominee.

We say this out of no great enthusiasm for Foster. He seems to be a decent community-minded doctor with good intentions, diplomatic skills, modest managerial ability—and not much else. (Meharry Medical College apparently decided not to promote him to permanent president shortly before Clinton plucked him from obscurity.) His attempt to medicalize the issue of teen pregnancy is corrosive. Pregnancy is a medical event; teen pregnancy, especially among poor inner-city black women, is not a medical question. It is a social and political issue. If the administration wants to turn the surgeon general's job into a bully pulpit for a real public health issue, it should be AIDS.

Then there is Foster's White House-aided fine-tuning of his record. He first "guessed" that he performed only a dozen or so abortions, a number revealed to be too low by a factor of three. (He also directed a small study of an abortion-inducing drug, and sterilized severely retarded women at a time when this was accepted practice.) This "mistake" would be more forgivable if it had not come in the same press release in which Foster claimed, preposterously, that all these procedures "were primarily to save the lives of the women or because the women had been the victims of rape or incest."

Still, Foster is no sinister liar, much less someone whose "lack of candor about his abortion record disqualifies him from serious consideration," as *The New York Times* intoned. Rather, his equivocations and errors of recollection strike us as about par for the nomination game as it is played these days. Besides, abortion, not Foster's "credibility," is the real issue. Either abortion is murder, in which case one is too many, or abortion is an often needed, if regrettable, procedure that should be legally and safely available. On this basic question Foster has been far more candid about his beliefs than some Republicans who have been expressing doubts about him—Bob Dole, to name one.

He's also more forthright than many pro-choicers. He says he "abhors" abortion and considers performing one a sign of "failure." For this, he has been awarded the opprobrium of a group called the National Coalition of Abortion Providers, which brooks no acknowledgment of the real distress involved in having, or administering, an abortion. But Foster's ambivalence reflects an understandable, utterly mainstream American view: that an abortion is a wrenching decision, albeit one that can't always be avoided, it is not murder; it should be legal.



If the Clinton administration cannot successfully defend this position, then it has truly lost all political effectiveness. Foster is a decent figure, sane on abortion, responsible on teen pregnancy, someone who opposes—to our mind, wrongly—condom distribution in schools. If a nominee this moderate cannot be confirmed, who can be? If he goes down, the extreme religious right will have won the privilege of nominating this country's surgeon general. It should be denied that privilege, for everyone's sake. •

WASHINGTON TIMES
3-8
A10

Dodd backs Foster

A key Senate Democrat said yesterday he is satisfied that Dr. Henry W. Foster Jr., President Clinton's nominee for surgeon general, knew nothing of a controversial syphilis study in 1969.

"He has absolutely no recollection," Sen. Christopher J. Dodd, Connecticut Democrat, said after meeting with Dr. Foster. "The idea that he would approve of a process that didn't treat black men for syphilis . . . is incredible."

Questions have been raised about when Dr. Foster learned about a government study that left black men with syphilis untreated. Dr. Foster was vice president of the Macon County (Ala.) Medical Society when it was briefed on the U.S. Public Health Service's Tuskegee Project on May 19, 1969.

Dr. Luther McRae, who was president of the society at the time, has said he will testify that Dr. Foster knew about the study.

Mr. Dodd serves on the Labor and Human Resources Committee, which will vote on Dr. Foster.

Opposition

Foster's Prospects Dim Among Republicans; Clinton Offers Another Defense

By Ann Devroy and Helen Dewar
Washington Post Staff Writers

Republican opposition mounted yesterday to President Clinton's announced nominee for surgeon general, Tennessee physician Henry W. Foster Jr., despite efforts by the White House and some Senate Democrats to rescue the appointment.

Senate Majority Leader Robert J. Dole (R-Kan.), who had taken the position that the Senate should hear from Foster before passing judgment, said yesterday, "If it gets any worse, they probably shouldn't send it [the nomination] up here."

Sens. Phil Gramm (R-Tex.), Don Nickles (R-Okla.) and Dan Coats (R-Ind.) all issued statements saying Clinton should withhold the nomination, either because Foster performed abortions during his medical career or because he has issued conflicting statements about that issue.

Assessing Foster's chances, Dole said, "I think it's in real trouble."

The day after Foster corrected the record of how many abortions he has performed or supervised, Clinton offered another defense, the third in three days. "Those who believe that all abortions should be criminal have tried to define him," Clinton said at a news conference. "They will try to seize upon this nomination to negate the work of a man's life and define him in cardboard cut-out terms."

Clinton added, "I support him. I want him to have his hearings. I believe the Senate will support him. We should not back away."

At a Capitol news conference, several Democratic senators affirmed their support for Foster, with Sen. Frank R. Lautenberg of New Jersey calling the anti-abortion opposition a "witch hunt." Said Sen. Carol Moseley-Braun of Illinois: "The issue really is not abortion in this debate. The issue is the extremist attacks which will result in a sign going up: Surgeon general wanted. No physician need apply."

But Republicans seemed even more outspoken against Foster after his first public effort to clear up the issues over abortion on ABC's "Nightline." Foster said that his career has been devoted to delivering babies and preventing unwanted pregnancies with abortion only a minuscule part of it.

"I abhor abortions," Foster declared in the interview, in which he also acknowledged he had given erroneous information on his involvement in the procedure. He said he had been listed as the physician on 39 abortions, not the fewer than a dozen he said last week, and said he supervised a drug trial of 55 women who used a drug to abort. Those, he said, he had not considered abortions he was responsible for, so did not add them in his list.

Foster's explanations of the differing numbers drew some scorn in Congress. Coats, a member of the Senate committee that will conduct nomination hearings, said, "There is a litmus test, but it is not abortion. The litmus test is truth-telling, and on this point, the president's and Dr. Foster's version of events differ from day to day."

Gramm announced he will "strenuously oppose" Foster's confirmation and Sen. Orrin G. Hatch (R-Utah) said Foster faces a "very, very uphill battle." Gramm said, "I think the president would be well served to put this behind him."

"The nomination of a physician whose medical practice has included the routine performance of abortion to serve as America's chief spokesman on public health is clearly inappropriate and divisive," Gramm said.

While he said repeatedly that his objection was to what he described as a "routine practice" of performing abortions, Gramm, who plans to announce shortly his candidacy for the Republican presidential nomination in 1996, said he would choose someone who never performed abortions if he were president.

He said there are "literally hundreds of thousands of doctors" who had not performed abortions and who could have been chosen.

At a news conference on another subject, Hatch was asked about Foster and said: "The way it's been handled has just been horrendous." Hatch said he felt "sorry for him because he clearly is a pretty nice guy" but believed "the lack of candor, the continual back and forth considerations" have hurt him.

Coats offered a similar assessment. "It will be a controversial and contentious two months for the president and Dr. Foster if they insist on going forward with this nomination."

Talk-radio audiences fault Clinton and Foster

Wash. Times 2-11-95 A-16

By Jay C Price
[illegible]

The credibility of surgeon general nominee Dr Henry W Foster Jr and the problems President Clinton has had in making nominations supported by the mainstream are both issues of concern to radio talk show audiences

"A lot of people are upset about the way Foster has waffled and changed his story" about the number of abortions he's performed, said Dave Ingram, a producer at radio station WJNT, a talk station in Jackson, Miss

He said the furor over Dr Foster was discussed "constantly" on that station yesterday, and there were no calls of support for the nominee

Despite the overwhelming opposition to Dr Foster, Mr Ingram noted there was more caller criticism directed at Mr Clinton

Most of the comments were directed at his [Clinton's] incompetence in making appointments

"people were saying Clinton can't appoint anyone who can make the grade with most Americans, and several even said Hillary's fingerprints are all over this nomination."

Connie Kovas, general manager at Radio WGL, a talk station in Fort Wayne, Ind., said the Foster nomination has been a "very hot topic" there as well and that opposition to Dr. Foster has been strong

"Most of our people are very suspicious of any nomination coming down from this president," she said

Calls received on Capitol Hill have been more mixed Senate Majority Leader Bob Dole has received more than 800 calls about Dr Foster "They've been running 5 to 1 against" the nominee, said spokesman Clarkson Hine

Sen Dan Coats, Indiana Republican, who said yesterday he'll ask the president to withdraw the nomination, has received "hundreds of calls" about Dr Foster, a spokesman said "The overwhelming majority have been opposed" to his nomination, Tim Goeglein said

Mr Coats is a member of the Senate Labor and Human Resources Committee, which will hold confirmation hearings on the nomination next month Other members of the committee who've received calls that have either been predominantly or exclusively against Dr Foster were Sens Judd Gregg, New Hampshire Republican, Claiborne Pell, Rhode Island Democrat, Slade Gorton, Washington Republican and Spencer Abraham, Michigan Republican However, the number of calls they have received has been small

As of noon yesterday, Sen Barbara Mikulski's offices have heard from 11 opponents of Dr Foster and 81 supporters, her press secretary said The Maryland Democrat said yesterday she is "outraged" by all the attacks against the nominee

Sen Nancy Landon Kassebaum, Kansas Republican and committee chairman and the person the panel most pro life groups say they intend to target has received "hundreds" of calls about the Foster nomination and the calls have been evenly divided, aides said

Calls to the office of Sen Bill Frist, Tennessee Republican, who stood beside Mr Clinton when he nominated Dr Foster, a Tennessee native son, have been "mixed," a staffer said

Theresa Bourgois, committee spokeswoman for Sen Ted Kennedy, the panel's ranking Democrat and the minority staff has received about 200 calls about Dr Foster The vast majority were from supporters," she said

That wasn't the case among callers to The Fred Honsberger Show on Radio KDKA in Pittsburgh yesterday "Basically, a lot of people were against the nomination," said Greg Jena the show's producer "There's been concern about the honesty factor, that he didn't own up to everything at the very beginning"

Rush Limbaugh also discussed the Foster nomination at length yesterday and gave particular emphasis to Dr Foster's appearance on ABC TV's "Nightline" the night before On "Nightline," Dr Foster said he had performed 39 abortions in his career, not "fewer than a dozen" or "one" as he or those speaking for him had said previously

Mr Limbaugh said he would watching the White House closely for any signs the president might be withdrawing the nomination

Keith Spence, executive producer of talk shows on Radio WLS in Chicago, said "5 to 10 percent of the calls that have come in to WLS' large AM station have been they don't want an abortionist Surgeon General He said comments have contributed only 5 to 10 percent of callers to WLS smaller FM talk station

Charles Jacoy, a talk show host on Radio KMOX in St Louis, said calls he's received about Dr Foster have been "split 50 50 in terms of abortion"

But he added, "The overwhelming opinion from callers on both sides of the abortion issue has been that the White House should show political cowardice for failing to stand firmly behind its nominee

Instead, it's allowed him to dangle"

Clinton faces hard sledding on budget, surgeon general

WASH TIMES 2-6

Battle lines between the White House and Congress also are being drawn on

• The nomination for surgeon general of Henry W Foster Jr., the obstetrician and gynecologist who admitted last week to doing less than a dozen abortions after lawmakers were told he had done only one "therapeutic" procedure in his career On yesterday's talk shows, Republicans confirmed the process has gotten into "serious trouble"

"Will it be in some difficulty? Yes," Mr Dole said yesterday on NBC's "Meet the Press"

The pro-life Kansas Republican, who would like to succeed Mr Clinton, said he had not yet decided whether he will vote to confirm Dr. Foster "I don't like what I hear, what I read," he said

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Photo by Ross D. Franklin, The Washington Times

Among friends: Dr Henry W Foster Jr (center) the nominee for surgeon general, enjoys a moment yesterday with House backers (from left) Kweisi Mfume, Henry Waxman, Harold Ford and Donald Payne

Democrats edge away from Foster

Abortions date back to '60s

By Paul Haskins
[illegible]

President Clinton's nomination of Dr Henry W Foster Jr to be surgeon general fell further into jeopardy yesterday when it was revealed he had performed more abortions than he had said and Democrats joined Republican critics

At the same time, it was revealed that Dr Foster also performed a small number of hysterectomies to sterilize severely mentally retarded women two decades ago

A senior administration official who requested anonymity told the Associated Press that Dr Foster performed the sterilizations at a time when the medical community believed such procedures were justified as providing health benefits to the women

Dr Foster mentioned his sterilization work in an article in the January 1976 issue of the Southern Medical Journal He wrote that obstetricians and gynecologists "must guard vigilantly against the injudicious and indiscriminate removal of the normal uterus"

"Most gynecologists perform hysterectomy for sterilization only when there are other, more generalized indications for removal of the uterus," he wrote "Recently, I have begun to use hysterectomy in patients with severe mental retardation"

He said the procedure was justified because it could provide "significant hygienic benefit to these severely handicapped individuals

By the late 1970s, Dr Foster stopped doing the procedures as medical opinion changed on the propriety of removing healthy uteruses from mentally retarded women, the administration official told the AP

"These types of suggestions smack of eugenics at its worst," said Eric Ueland, a spokesman for the Senate Republican Policy Committee "[The White House] should speedily withdraw Dr Fos

see FOSTER, *page A12*

FOSTER

From page A1

ter's name. Otherwise one would be left with no other belief except that the White House endorses this position."

Defending his career yesterday, Dr Foster said he is "standing strong," as administration, congressional and medical officials rallied round in support of his nomination.

He mounted his defense as reports surfaced that a former colleague said that Dr Foster, as an obstetrician-gynecologist at John A Andrew Hospital in Tuskegee, Ala., from 1965 to 1973, sometimes performed abortions when complications with the mother occurred.

At the time, Alabama law banned abortion except when the pregnancy endangered the health of the mother.

A spokeswoman for the Department of Health and Human Services did not know how many abortions Dr Foster performed at Andrew or if all were legal.

"Realistically, I don't see how any obstetrician can say he never has done an abortion. It's the nature of the business," a former Foster colleague, Dr Calvin Dowe, told the Associated Press.

Dr Foster this week said he has done 39 abortions since 1973, all while he taught and practiced at Meharry Medical College in Nashville, Tenn.

He said he led a study on an abortion pill that worked in 55 of 60 pregnancies, although Dr Foster said he "abhors" abortion and considers it a personal failure.

Also yesterday, pro-life groups distributed an old Planned Parenthood news release announcing the creation of Physicians for Choice, "dedicated to preserving abortion rights in America."

Dr Foster was on that group's steering committee. He also served as a member of Planned Parenthood's National Leadership Committee to Keep Abortion Safe and Legal.

His ties to Planned Parenthood, Physicians for Choice and the Planned Parenthood abortion committee were not mentioned on his White House-distributed biography.

While White House spokesman Michael McCurry said opponents of the Foster nomination have an "extreme right-to-life view" and a "taste for the blood of this fight," Sen Joseph R Biden Jr yesterday said it is time to withdraw the nomination.

"It was a political blunder in the extreme," said the Delaware Democrat, the ranking minority member of the Senate Judiciary Committee. Mr Clinton "shouldn't have sent him up. I'm going to vote against him."

Under White House pressure, Mr Biden later flip-flopped and said he would "withhold my final judgment."

Rep W.J. "Billy" Tauzin, Louisiana Democrat, introduced a bill to eliminate the position of surgeon general. Rep Robert K. Dornan, California Republican, introduced similar legislation this week.

Even the New York Times called on Mr Clinton to find another nominee.

"Although Dr Foster is a highly respected obstetrician, his lack of candor about his abortion record disqualifies him from serious consideration. Misleading statements by candidates for high position simply cannot be condoned," the paper said.

House Speaker Newt Gingrich focused on the White House's poor handling of the nomination and excuses that it did not know enough about Dr Foster before picking him a little more than one week ago.

"If they have that kind of intelligence about Chechnya and Bosnia and Iran, it's a very sobering comment on the White House staff," the Georgia Republican said. "Two years into the administration — how could they be this grotesquely wrong?"

In a desperate attempt to save the nomination of the 61-year-old, the White House pushed groups to speak out in favor of Dr Foster.

It also won an invitation from George Washington University's medical school to have Dr Foster speak to 150 students and a bank of TV cameras yesterday afternoon.

Joining the students and press were about a dozen top White House officials, who handed out advance texts of the doctor's speech and afterward blocked reporters from asking him questions. In attendance were Mark Gearan, special presidential assistant for communications, and John D. Podesta, White House staff secretary.

Dr Foster gave an eight-page defense of his medical practice and pledged to fight to replace Dr Joycelyn Elders, who was fired as surgeon general in December for suggesting that masturbation be taught in schools.

"I am standing strong and I appreciate the strong support of the president," said Dr Foster, who attended medical school at the University of Arkansas with Dr. Elders.

In a crucial passage of his speech, Dr Foster slipped and said he had done "illegal abortions." He quickly corrected himself.

"My opponents say that this nomination is about abortion. I have dedicated my entire career to taking all medical steps to meet the needs of my patients and that includes performing illegal abortions when it's necessary.

"I believe in the right of a woman to choose and I support the president's belief that abortion should be safe, legal and rare."

He also made a strong case for fighting AIDS, although AIDS activist Wayne Turner [illegible] disrupted the speech to ask why Dr Foster had changed [illegible] the distribution of condoms as an aspect of his award-winning Have a Future program to combat teen pregnancy in Nash[illegible].

Wash. Times

Baptists oppose Foster nomination as surgeon general

NASHVILLE, Tenn. (AP) — The Southern Baptist Convention will oppose President Clinton's choice for U.S. surgeon general, leaders of the nation's largest Protestant denomination said yesterday.

Southern Baptists, whose 15.4 million members include Mr. Clinton and Vice President Al Gore, oppose abortion and preach sexual abstinence until marriage — two points on which Baptist leaders criticized Dr. Henry W. Foster Jr.

"This is not our sole reason for opposing him, but the man has acknowledged doing at least 39 abortions," said Richard Land, head of the Southern Baptist Christian Life Commission, which deals with public policy issues for the denomination.

Southern Baptist Convention President Jim Henry planned a news conference today to urge Southern Baptists to contact their senators about Dr. Foster's nomination.

Dr. Foster, an obstetrician from Nashville, was nominated Feb. 2 to replace Dr. Joycelyn Elders as the country's top public health officer. Dr. Elders was fired after saying schoolchildren should be taught about masturbation.

Dr. Foster's nomination quickly ran into problems after the White House disclosed he had performed at least one abortion, then fewer than 12. That number was revised to 39, plus 55 women who had abortions in a study that Dr. Foster supervised.

Some opponents objected to the abortions, others to the lack of reliable information coming from Dr. Foster and the White House.

Southern Baptists oppose abortion except to save the life of a mother. They also favor teaching abstinence to teen-agers and oppose government distribution of contraceptives to teens.



Dr. Henry W. Foster Jr. was chided by Baptists on two points.

Dr. Foster, on leave as dean of Meharry Medical College in Nashville, made a name for himself by fighting teen-age pregnancy in Nashville's housing projects.

His I Have a Future program aims to delay sexual activity in teen-agers through a variety of tactics, including abstinence and contraception. Condoms are available to those who request them.

Mr. Land said the I Have a Future program may teach abstinence but it is not mentioned in the program's promotional brochure.

"We think the government shouldn't be distributing condoms. The focus should be on teaching of abstinence, that sex is an adult activity, best dealt with by adults, not minors," Mr. Land said.

The program's director, Dr. Lorraine Williams Greene, said the brochure clearly states that handing out contraceptives has not been enough to fight teen pregnancy.

"We do believe in abstinence and being responsible," the doctor said.

THE WASHINGTON POST A6 2-23-95

Southern Baptist Leaders Urge Opposition to Foster

Positions on Abortion, Sex Education Criticized

By Laurie Goodstein
and Ann Devroy
Washington Post Staff Writers

Leaders of the Southern Baptist Convention, the nation's largest Protestant denomination and President Clinton's own, asked their 15.4 million members yesterday to lobby against the nomination of Henry W. Foster Jr. to be surgeon general because he has performed abortions and backed sex education in public schools.

"Any doctor who is willing to deny the Hippocratic oath and extinguish human life, rather than protect it, is an individual whose moral vision for America is fatally flawed," Richard D. Land, executive director of the convention's Christian Life Commission, told a news conference in Nashville.

Foster, an obstetrician-gynecologist from Nashville, is best known for founding the "I Have a Future" program in the housing projects there to prevent teenage pregnancy. The Southern Baptist Convention also has made teenage pregnancy prevention a priority through its international "True Love Waits" abstinence campaign.

But yesterday the Southern Baptist leaders said they do not approve of Foster's program because it does not sufficiently emphasize abstinence and makes contraceptives available to teenagers. Land called this "the failed 'safe-sex' model" of sex education and also criticized Foster's involvement with the Planned Parenthood Federation of America.

The Southern Baptist leaders said they believe Foster deserves a Senate confirmation hearing, at which they hope to testify. Because Clinton is a Southern Baptist, said James A. Smith, director of government relations for the convention's Christian Life Commission, "We do feel a special obligation to make sure that the rest of America understands that the president . . . is not acting in the mainstream of Southern Baptist opinion."

Foster's pregnancy prevention program also was faulted.

White House officials said they are optimistic that enough GOP moderates or abortion rights supporters will be willing to vote for Foster to get him confirmed. Among GOP senators who fit that category are James M. Jeffords of Vermont, Nancy Landon Kassebaum of Kansas, Arlen Specter of Pennsylvania, John H. Chafee of Rhode Island and Mark O. Hatfield and Bob Packwood of Oregon. The White House also has not given up on Bill Frist, Foster's home-state senator, who came to the Oval Office for the presidential announcement of Foster's appointment but then started backing away from him.

But Smith, who lobbies for the Southern Baptists in Washington, said: "The Senate Republican leadership needs to stop being so squeamish and . . . stand forthrightly behind the pro-life views they say they hold. I am distressed when I see the Senate Republican leadership cowering at Bill Clinton's challenge over this as an abortion issue. . . . It's time for the Senate Republican leadership to get engaged in the culture war."

Several other large conservative groups—including Focus on the Family, the Christian Coalition, the Catholic Campaign for America and the Family Research Council—also have made defeating Foster a focal point in their drive to end abortions.

A senior White House official said the counsel's office and the Office of Government Ethics, which review all nominations, are expected to complete their work by early next week. The White House anticipates formally sending the nomination to the Senate by the end of next week.

Foster, who has kept out of sight the past week, will make selective appearances and speeches between now and the opening of his hearings sometime next month. Today he plans to attend a lunch with Senate Democrats.

A senior official said that while the opposition of the Baptists was unwelcome news, in the political setting of confirmation hearings, "We think Dr. Foster's message will be very appealing" because it addresses traditional values that the Southern Baptists also espouse. "He has been an advocate of abstinence. He is a strong advocate of reducing teenage pregnancy. His career has been an affirmation of family values," the official said.

No. 2 Senate Republican opposes Foster nomination

WASH TIMES 3-5 A4

Lott suggests eliminating post

By Joyce Price
THE WASHINGTON TIMES

Senate Majority Whip Trent Lott says Dr Henry W Foster Jr is "clearly the wrong choice" for surgeon general, adding that it is "about time we abolish the position again."

The Mississippi Republican's use of the word "again" referred to President Richard Nixon's gutting of the post in 1972. He spoke yesterday on CNN's "Evans & Novak."

Mr Lott said he "absolutely" intends to oppose the Foster nomination.

He also said he believes Senate Majority Leader Bob Dole of Kansas opposes the nomination and will fight Dr. Foster's confirmation.

The nomination is vehemently opposed by many conservatives, unhappy that the 61-year-old obstetrician-gynecologist has given differing accounts of how many abortions he has performed.

Last week, the nomination was further threatened by allegations from a former colleague that Dr. Foster knew about and approved the continuation of a government study that left black men with syphilis untreated.

Dr. Foster has denied those claims by Dr. Luther McRae of Mount Vernon, Ga., who served with him in the Macon County Medical Society in Alabama in the late 1960s.

Explaining his opposition to Dr Foster yesterday, Mr Lott said "It's not just a question of abortion. It's incompetence by the White House. It's misinformation and misleading. It's inaccuracies in what Dr. Foster says. It's the syphilis testing. It's a lot more than just the abortions."

Mr Lott also mentioned "incompetence" on the part of the nominee. "Why did they lose their accreditations when he was head of the OB-GYN section and other departments [at Meharry Medical College in Nashville, Tenn.]?" Mr. Lott asked.

It "remains to be seen" whether Dr. Foster will lose the confirmation fight, Mr. Lott said. "You know, [the administration is] trying to pick off some of the Republicans by going to them one by one."

At the same time, "more and more" negative information about the nominee "continues to come out," Mr Lott said, citing Dr. Foster's "racist comment about 'white, right wing extremists'" opposing the nomination.

Dr. Foster may face Senate confirmation hearings this month. He would succeed Dr. Joycelyn Elders, the nation's first black surgeon general, who was fired in December for suggesting masturbation be taught to schoolchildren.

"There are a lot of people in America, doctors, that could do that job," Mr. Lott said. "You know, frankly, I think it's about time we abolish the position again."

Other Foster opponents have made that suggestion. Mar Wittmann, legislative affairs director of the Christian Coal said President Clinton has p physicians for surgeon gene "pursue a left wing agenda condom distribution."

"He's using the Surgeon eral's Office to promote not a eral health agenda that s America, but rather a pol agenda that serves a narrow of his party," Mr. Wittmann s.

"It would be better to abolis position of surgeon general leave it unfunded if it's just g to be used to serve a poli agenda."

Democrats freely fire on Clinton

By Donald Lambro
THE WASHINGTON TIMES

Once again the Clinton White House is under attack for incompetence and poor policy decisions, but this time the chief complainers include some prominent Democrats in Congress.

Throughout the first two years of his presidency, Mr. Clinton had to contend with a drumbeat of Republican criticism, but he usually could count on broad support within his own party, even in the worst of times.

NEWS ANALYSIS

But a series of missteps in recent weeks on the baseball strike, the budget and the nominee for surgeon general have shaken some of Mr. Clinton's major allies in Congress, and they now openly ridicule his leadership and his management of the White House.

Democrats who once confined their criticism of Mr. Clinton to private remarks now are willing to say what they think of the president and his policies on the record. And, increasingly, they are staking out their own positions on the issues.

"When leaders in your own party can beat you up in public, you've lost all your credibility as president," said a veteran Democratic Party adviser who did not want to be named.

"What this criticism means is that in the wake of last November's losses, Democrats are putting their self-preservation first for 1996," longtime Democratic adviser Ted Van Dyk said.

"What you're seeing is a whole lot of Democrats who are worried about 1996 and who are now unafraid to challenge the president," Mr. Van Dyk said.

Mr. Clinton's nomination of Dr. Henry W. Foster Jr. to be the surgeon general has sparked the strongest Democratic criticism of his presidency. The White House has acknowledged serious mistakes in issuing incomplete and inaccurate information about abortions Dr. Foster performed.

But that concession has not satisfied Democrats who will have to vote on the nominee.

"Unfortunately, the White House did not do the best job of putting Dr. Foster's nomination forth, and that's just the way the White House is," said Sen. Barbara A. Mikulski of Maryland, a member of the Senate Democratic leadership.

Her slap at the president was followed by one from Sen. Joseph R. Biden Jr. of Delaware, the ranking Democrat on the Judiciary Committee. Mr. Biden complained that the White House had put Democrats in the uncomfortable position of having to defend a nominee when "no deep thought was given before the nomination was sent up."

"Why don't we just go out and find the single best doctor in America and appoint that doctor?" Mr. Biden said Friday. "There's got to be someone out there that's not controversial and incompetent."

Mr. Biden said he intended to vote against Dr. Foster, but he later amended his position, saying he would keep an "open mind" on the nomination.

Sen. Christopher J. Dodd of Connecticut, the new chairman of the Democratic National Committee, said: "The fact that the White House or the Health and Human Services Department didn't do a very good job in vetting this issue is of some significance."

But unhappiness over the Foster nomination is only a small part of congressional Democrats' growing disillusionment with the administration.

The budget proposal Mr. Clinton sent to Congress last week sparked an unusual outpouring of criticism from Democrats. Many said they were disappointed the president did not offer an aggressive plan to cut the deficit.

Sens. Bill Bradley of New Jersey, Daniel Patrick Moynihan of New York and Bob Kerrey of Nebraska were among the Democrats who criticized the Clinton budget for failing to deal with a string of $200 billion deficits forecast for the rest of this decade.

Mr. Kerrey, who may challenge Mr. Clinton for the party's nomination in 1996, said the budget revealed a failure of "presidential leadership and action."

When Mr. Clinton made an unsuccessful attempt to settle the baseball strike, one of the first lawmakers to declare he did not think it was a good idea for Congress to become embroiled in the labor fight was House Minority Leader Richard A. Gephardt.

In December, the Missouri Democrat undercut the president by proposing a middle-class tax cut days before Mr. Clinton unveiled his own tax-cut plan. And when Mr. Clinton this year sent a bailout plan to Congress to rescue the Mexican economy after the devaluation of the peso, "no one wanted to touch it with a 10-foot pole," a House Democratic aide said.

WASH TIMES
2-15

WASH POST 3-13 A5

ramm Threatens Filibuster Against Foster

Surgeon General Nominee 'Has Trouble Leveling,' Senator Says

By John Schwartz
Washington Post Staff Writer

Sen. Phil Gramm (R-Tex.) said esterday he would try to block the omination of surgeon general-desnate Henry W. Foster Jr. by filiister if the matter reaches the oor of the Senate.

Gramm previously had stated that will "strenuously oppose" the Fosr nomination and has predicted that e Nashville obstetrician-gynecolost will not be confirmed, but had opped short of threatening a filibusr—an unusual measure for a memr of the Senate's majority party.

earing on NBC's "Meet the ," Gramm denied that he op- Foster for his views. But the nator said he could not abide the ct that Foster had performed abor- ons and involuntary sterilizations d had given inconsistent answers to the question of how many abortions he had performed. "This is a person who has trouble leveling," Gramm said. "And there is one litmus test, and that is being honest."

Foster has said a misunderstanding with a White House aide caused information to be released that he had performed only one abortion and that a second estimate of fewer than a dozen abortions stemmed from reliance on faulty memory. A later review led to the figure of 39 abortions performed during his 35-year career—an incidence that Gramm yesterday characterized as "routine performance of abortion." Foster also supervised a drug trial in which 55 women terminated their pregnancies.

Last month the White House revealed that Foster had performed hysterectomies on severely retarded women in the 1970s for sterilization and "hygienic" reasons. Many medical ethicists and historians have said that at the time, such hysterectomies were considered part of accepted medical practice.

Gramm said the previous surgeon general, Joycelyn Elders, was "the most divisive surgeon general that we've ever had in the history of the country." Of Foster, he said, "This is the wrong person at the wrong time in the wrong job."

The filibuster threat is part of a recent pattern by Gramm of drawing a sharp contrast between himself and Senate Majority Leader Robert J. Dole (R-Kan.), Gramm's chief rival for the Republican presidential nomination. Dole has less freedom to confront the White House than Gramm does because of the majority leader's responsibilities in running the Senate.

When asked whether such a filibuster might constitute gridlock, Gramm responded, "Gridlock is sometimes a good thing."

Gramm also said he would not propose a constitutional amendment to restrict abortion rights if elected president because "I don't believe there's a consensus in the country to amend the Constitution." He said he had supported his party's antiabortion platform in the past, but, "We recognize . . . that we don't have unity of purpose on abortion, that we're going to have to recognize that there are good Republicans who differ." Gramm said he would oppose taxpayer funding for abortion unless the mother's life is in danger.

Staff writer Helen Dewar contributed to this report.

Foster Showdown Stretched Out

WASH POST A19 3-10

■ Bad news for those of you looking for quick showdown over the confirmation of **Henry W. Foster Jr.** as surgeon general. The nomination generated instant controversy as antiabortion groups railed against the Nashville gynecologist for having performed abortions during his career. The abortion rights groups rose up in his defense and the administration has declared that it is going all-out in his support.

The stage is set—and gathering dust. Seems Foster is still making the rounds, the various groups r and against him are still filing their testimony and stions and the Senate Labor and Human Resources Committee may not get around to confirmation hearings until perhaps May.

WASH TIMES

White House defends Foster as opposition grows in Senate

By Paul Bedard
and Nancy E. Roman
THE WASHINGTON TIMES

Senate Republicans yesterday indicated that surgeon general nominee Henry W. Foster Jr. faces an increasingly uphill confirmation fight as the White House again dubbed the doctor's critics "extremists."

White House spokesman Mike McCurry said Republican presidential candidate Sen. Phil Gramm of Texas was using the nomination issue to push an anti-abortion agenda. Dr. Foster is a gynecologist who performed abortions as part of his practice in Nashville, Tenn.

"It would be unfortunate if extremists in the Senate took a view on choice, made it a litmus test and prevented the nomination from going forward on that basis," said Mr. McCurry.

On Sunday, Mr. Gramm threatened to block the nomination with a filibuster.

While not a surprise, the announcement keeps the pressure on Senate Majority Leader Bob Dole, who is competing with Mr. Gramm for the Republican presidential nomination.

Mr. Dole is being lobbied by pro-life groups, who vociferously oppose the Foster nomination, and committee aides said there is no reason for Mr. Dole to allow the nomination to come to the floor unless he can kill it.

"The most likely scenario is that things get very bad and the nomination is defeated," said one committee aide. "Then Dole pushes legislation to abolish the office. It's more difficult to do that when somebody is nominated for that position."

Rep. Robert K. Dornan, California Republican, has introduced a bill to abolish the office of the surgeon general.

Sen. Nancy Kassebaum, Kansas Republican and chairman of the Labor and Human Resources Committee, before which Dr. Foster will appear, has set March 24 as the deadline for written testimony to be submitted.

Mrs. Kassebaum would like to hold the hearings in early April. However, spokesman Michael Horak said that until the testimony is in, the committee will not know whether there is time to hold the hearings before Easter recess, which begins April 7.

"Kassebaum has been realistic in her belief that Dr. Foster's nomination is going to be very, very difficult," said Mr. Horak.

Republican Sens. Daniel R. Coats of Indiana, John Aschcroft of Missouri and Slade Gorton of Washington are the only three senators on the committee to publicly oppose the nomination.

Administration AIDS czar Patricia Fleming went to bat yesterday for Dr. Foster, urging representatives from medical groups, state and local government officials and AIDS activists to support the black former head of Meharry Medical College.

At a meeting in the White House Roosevelt Room, Ms. Fleming distributed a letter from Dr. Foster in which he encourages the sexually active to use condoms. He had earlier downplayed discussion of condom use.

He also stresses abstinence in his March 10 letter to Ms. Fleming.

Dr. Foster said the surgeon general must teach Americans that "the surest way to avoid the sexual transmission of the HIV is to abstain sexual activity. And it means continuing to spread the word to those who are sexually active that the correct and consistent use of latex condoms is highly effective in preventing HIV transmission."

Dr. Foster said spending on AIDS research should not be pitted against spending for other diseases. But he stressed that AIDS "must remain a special concern because it is an infectious disease that is fatal, that has no cure, and that typically strikes people in the prime of life."

Shuttle telescope takes look at galaxy

HOUSTON (AP) — The space ... lieved that most galaxies formed ... clusters of ...

General

Washington Times A-13
2-6-95

Dr. Foster's nomination

The Clinton administration can't seem to get it right when it comes to the issue of choosing a qualified surgeon general. Dr. Henry W. Foster Jr., the Nashville obstetrician/gynecologist who President Clinton named on Thursday as his surgeon general nominee, appears to have solid medical credentials, but his work and philosophy in the area of adolescent pregnancy and sex education are troubling.

Dr. Foster's work with Planned Parenthood and the health-promotion initiatives he began in two Nashville housing projects advocate abortion, condom distribution to teens and sex education programs that are far outside the mainstream.

The surgeon general has little bureaucratic power, but he is the preacher in the bully pulpit on matters involving public health. Dr. Foster said that, if confirmed, he would focus on cutting the teen pregnancy rate, now at 2,800 a day, and focus on the issue of abstinence.

The trouble is, on this issue, Dr. Foster doesn't appear to be much different from Dr. Joycelyn Elders, the outspoken surgeon general who was fired in December after a series of statements about such matters as the possible merits of legalizing drugs and the benefits of teaching masturbation in public schools.

The major public health issues facing our country—teen pregnancy, the declining numbers of two-parent families, AIDS and sexually transmitted diseases — are all connected to unplanned children and the decline in moral values.

What the Clinton administration fails to understand is that a major ailment needs drastic medicine. We need a surgeon general who can speak forcefully and confront the problems head-on, not one who speaks from both sides of his pulpit.

In the fight against out-of-wedlock births and family values, we need a surgeon general to speak in clear, concise tones of right and wrong about how to strengthen the family unit and the best way to guide our youths to be productive citizens. We already have too many advocates who say don't do it, but be safe if you do and abort if neither works.

This is where Dr. Foster's credentials may be lacking, especially if he wants to stress abstinence. He has served on Planned Parenthood's board of directors from 1978-1981 and as been on the group's advisory board since 1981. he has also served on the National Leadership Committee to Keep Abortion Safe and Legal, a subpanel of Planned Parenthood since 1989. Although his "I have a future" program encouraged young people in two public housing projects to delay sexual activity, it also distributed condoms. He has delivered thousands of babies and conducted abortions, fewer than a dozen, he says, mainly to save lives or in cases of rape and incest.

It is no surprise that a president who advocates the right to abortion would nominate someone who shares that philosophy. But you have to wonder about the reasons behind this particular choice. Mr. Clinton did not have to pick an obstetrician. What's wrong with heart surgeons? But when he did choose an obstetrician, he should have known that the question of abortion would come up. Still, the salient fact that Dr. Foster supported abortion and had performed it himself failed to materialize on the official biography issued by the White House, Health and Human Services and indeed the doctor's office as well. They were revealed after a series of queries from The Washington Times and other media.

After two-and-a-half years in office and a bloody trail of botched nominations behind him, one would think that Mr. Clinton by now knows that telling the truth and then getting it out in dribs and drabs has tremendous political costs. These are bound to promise to take center stage when Dr. Foster's confirmation hearings are held by the Senate Labor & Human Resources Committee. If the senators are skeptical about this candidacy already, it's hard to understand.

LETTERS

USA Today A-8
2-7-95



By Tim Dillon, USA TODAY

NOMINEE: Nashville gynecologist/obstetrician Dr. Henry Foster Jr. and his wife, St. Clair Foster, flank President Clinton at announcement of nominaton.

Face reality; urge nominee for surgeon general to cooperate with parents, promote abstinence

Republican senators considering the nomination of Dr. Henry Foster for surgeon general ought to distinguish between what can and cannot be done regarding abortion and youthful sex.

Like Dr. Joycelyn Elders, Foster has supported abortion and distribution of condoms to youngsters. However, he has, unlike most apologists for such strategies, also led a program to promote abstinence — honestly working to make abortions rare.

The real question should center around the role of the surgeon general and how Foster would use his office.

One of the most outrageous things about Elders was the role she saw for the federal government, especially in cases where minor children and their parents differed about the desirability of the children engaging in sex. Elders appeared to weigh in the feds on the children's side against parents, seeming to hold that parents' arguments for abstinence were both futile and worthless. It is little wonder so many parents despised and feared her activities.

Republican senators should ask nominee Foster if he will work with and for parents seeking to promote abstinence, or against them.

It is unrealistic to expect that any Democrat would be considered for high health office without passing the abortion-rights litmus test. So concentrate attention where progress might be made — working with parents to promote abstinence and honestly working to make abortion rare.

James G. Thomson, Chesapeake, Va.

Joseph A. Califano Jr.

The Medicalization of Teen Pregnancy

Dumping the issue on the surgeon general ignores the lessons of the past 20 years and is doomed to fail.

In the late 1970s, 1 million teenagers—about one in nine 15- to 19-year-old girls—got pregnant each year. I was the Carter administration's point man on the issue, because inside the Beltway we treated it largely as a health matter, and I was secretary of health.

In the mid-1990s, 1 million teenagers—about one in nine 15- to 19-year-old girls—get pregnant each year, and President Clinton has nominated a new surgeon general to attack the problem. I wish him luck, but I fear that Washington's continued medicalization of teen pregnancy and dumping the issue on the surgeon general—a health post that carries with it little staff, no programmatic budgets and no clout in the federal bureaucracy—ignores the lessons of the past 20 years and is doomed to fail.

Sexual intercourse among teens does create an enormous demand for medical treatment. Many sexually active teens become victims or transmitters of diseases like AIDS and gonorrhea. Of the million teens who become pregnant each year, about 400,000 have abortions, which for some can create or aggravate mental health problems. Of the more than 500,000 who don't have abortions or miscarriages, thousands have pregnancies complicated by maternal smoking, drinking or drug abuse and by premature delivery and low-weight babies. The health system is responsible for dealing with medical matters such as these. Biomedical science can also contribute discoveries, such as condoms and other contraceptive devices, that reduce the incidence of pregnancy and curb transmission of sexually transmitted diseases.

But medicalization over 20 years has not reduced teen pregnancy in America, nor has it stemmed the spread of sexually transmitted diseases among teens. Life for American teenagers is not just a bowl of condoms.

Today, more unmarried teens are having children. Almost 80 percent of unmarried women who have a child before finishing high school live in poverty. Teen pregnancy costs the government more than $34 billion a year in welfare payments ($13 billion), Medicaid bills ($15 billion) and food stamps ($6 billion).

The persistence of the problem is a sorry reflection of the social forces at large for the past 20 years: poverty and broken families that lead some teens to seek love and status by having a baby, anything-goes moral standards, the declining authority of family, church and school and a mass culture that treats sex not as a serious personal responsibility—often not even as an act of love—but as a glittering consumer item to be exploited and consumed at the moment of desire. Our teens grow up in a society where personal discipline is more necessary—and less popular—than ever. And for them, popularity is everything.

Sex education is not simply a medical subject. It is most effective in elementary and secondary schools in tempering promiscuous conduct and teen pregnancy where students share the same values. Parochial schools where children profess the same religious beliefs (whether Christian, Jewish or Muslim) and schools in rural areas where parents share common values are more likely to have effective programs than are large urban schools, where concern for social and religious differences drives school officials to medicalize sex education, and in the process detach teen sexual conduct from human and moral values.

What many call sexual liberation has brought with it unhappy consequences for millions of teens: the pressure to experiment with adult behavior before they are ready, emotionally, economically or morally, to shoulder adult responsibility, and the wrenching disruption of life and education caused by an unintended pregnancy and its consequences. This is not liberation. It is bondage for the child-mother and the mother's child.



Responsibility to deter conduct that causes teen pregnancy—promiscuity, alcohol or drug use, failure to use a condom, lack of a loving family, lack of hope—rests not with the U.S. surgeon general, federal bureaucrats and politicians but with parents in the first instance, as well as with teachers, social workers, clergy and those who set the moral standards and mores of our times. By medicalizing the teenage pregnancy crisis we have relieved them of their responsibility and trivialized the complexity of the solutions.

Dealing with teenage pregnancy requires a one-on-one discussion of values and morality, something difficult to do for a Washington political appointee. Such discussions best take place between parent and child or (and this is especially important for children with no families) in the privacy of a school counselor's office, parish house or community or local government social service agency.

For most of us the birth of a child is an occasion of great joy and hope, a consecration of new life. But for hundreds of thousands of teenagers—particularly the majority who are unmarried—the birth of a child can usher in a dismal future of unemployment, poverty, family breakdown, emotional stress, dependency on public agencies, alcohol and drug addiction and health problems for mother and child. Preventing such tragedy and comforting those in such pain requires a lot more than a medical degree and a fancy federal title.

The writer, secretary of health, education and welfare from 1977 to 1979, is president of the Center on Addiction and Substance Abuse at Columbia University.

The Washington Times

CAL THOMAS

Reincarnation . . . and obfuscation

The nomination of Henry W Foster Jr to replace Joycelyn Elders as surgeon general is another sign that the Clinton administration has completely failed to understand the message of the last election It continues to impose on this country people and policies rooted in a philosophy that has proved to be an utter failure

Dr Foster was less than forthcoming about his views and how many abortions he has performed Even the pro-choice Kansas Republican Sen Nancy Kassebaum said she was disturbed by the misleading information given to her by the White House concerning Dr Foster

But there is more to this than misinformation and disinformation Dr Foster has close ties to Planned Parenthood, which has a view of sex and education that has exacerbated, not solved, one of the major problems our country faces Planned Parenthood is not interested in changing sexual behavior but rather in avoiding the unwanted physical consequences of premature sex Yet one has to wonder why it has failed so miserably in achieving that objective California may be the best state to judge the results of the philosophy held by Planned Parenthood and its devotees, who include the nominee for surgeon general



Henry W Foster Jr

Mike Males, a graduate student in the doctoral program of the School of Social Ecology at the University of California, Irvine, has studied tabulations from the California Center for Health Statistics covering 46,500 births among school age (ages 18 and younger) adolescents in the state in 1993 In 85 percent of these births the fathers ages are identified The statistics show two very different types of "teen age" motherhood

The first involves peer schoolboy partners, ages 18 and younger, who average about one year older than their girlfriends These are the targets of the Elders-Foster-Planned Parenthood condom squads and the focus of the chastity vs condoms war Boys in this category accounted for about 13,400 births among school girls in California in 1993, only 29 percent of the total

In 33,200 births among California girls ages 11 18 (71 percent of the total), the father was a past high school adult man averaging over 22 years of age five years older than the mother, on average These adult fathers who are responsible for nearly three-fourths of the 40 700 births among senior high girls average nearly 23 years old The adult men who father half the 5,900 births among junior high girls (ages 11 15) average 22 1 years of age, 6½ years older than the mothers In 6,000 births among California schoolgirls in 1993, the fathers were over age 25 Also surprising was that one-fifth of the births fathered by schoolboys (about 3,000) were by adult, post-school women

As Mr Males notes, this isn't about "children having children" or "teen motherhood" It is adult sex with school-age youths

For more than 30 years, Planned Parenthood and its disciples such as Drs Elders and Foster have targeted elementary school children with their brand of sex education Dr Elders wanted to teach elementary kids how to masturbate and use condoms But in California in 1993, elementary schoolboys fathered no children Senior high boys, though, were responsible for 41 percent of the births and adult men fathered more than 50 percent of babies born to girls between ages 11 and 15

Numerous studies including some by Planned Parenthood research arm the Alan Guttmacher Institute show that most sexually active girls under 15 are victims of rape by substantially older men Mr Males writes it is a fact that "adolescents reflect adult values and behavior" We are deceiving ourselves when we think we can make adolescents behave differently than the irresponsible adults who surround them and who pump sex into everything from movies and television to music and advertising

We would be far better off working to reduce the 71 percent figure (post-high-school adult men fathering children with teen-age girls) than focusing on the 29 percent figure (peer schoolboy partners)

Dr. Foster isn't really "Elders Lite"; he is Dr. Elders reincarnated. Her ideas have been proved not to work. His are just more of the same. We deserve a surgeon general who will focus on the real health needs of the country, not condone those whose behavior is detrimental to our society's well being When is this administration going to get it?

Cal Thomas is a nationally syndicated columnist

Robert D. Novak

Scrutinizing the Numbers

THE WASHINGTON POST A-29
THURSDAY, FEBRUARY 9, 1995

When fax machines around the nation's capital Monday afternoon started spitting out a sheet of paper whose contents endangered President Clinton's new nominee for surgeon general, it became clear how little this White House has learned about operating effectively in Washington.

The word passed by presidential aides was that the alleged fragment of a 16-year-old transcript that had Dr. Henry Foster Jr. suggesting he had performed nearly 700 abortions was either a forgery or a mistake. That claim, said administration officials, came from the nominee himself.

A forgery surely it is not. The odds are heavily against an error in transcription. Instead, Foster is in deep trouble. After over two years in office, the Clinton team neither fully explored its nominee's record nor pointed out to him the traps on the road his predecessor as surgeon general, Dr. Joycelyn Elders, failed to negotiate.

Considering the president's precarious political condition, it would have been thought he would pick a non-controversial public health officer to fill what had been a low-profile, third-level job prior to the flamboyant Dr. C. Everett Koop's arrival in 1981. But Clinton has turned the post into an affirmative action slot, insisting that another African American be selected.

Foster, acting director of Meharry Medical College in Nashville, disclosed in the "vetting" process prior to his selection that he had performed a few abortions. After some backing and filling once his nomination was announced, he last week set the number at "fewer than a dozen"—which were "primarily" for rape, incest or saving the life of the mother.

A discrepancy in numbers threatens the nominee.

There the matter might well have stood had it not been for a woman in Pittsburgh named Randy Engel, who works for the Michael Fund—an organization engaged in genetic research from a pro-life standpoint. She remembered that this same Dr. Foster, then chairman of the obstetrics department at Meharry, was a member of an ethics advisory board named by the secretary of health, education and welfare (HEW) that met in Seattle on Nov. 10, 1978.

At this writing, Clinton administration officials are still trying to find a transcript of that hearing. Why did Engel have so little trouble finding it? "I walked downstairs in my home and got it," she told me. The fuller transcript makes obvious that the single page faxed around Washington is not forged. What's more, Foster may have difficulty proving he is misrepresented.

Under discussion that long ago day in Seattle was an experimental technique called fetoscopy by which sickle cell anemia, a genetic disease afflicting mainly African Americans, could be diagnosed in the fetus. The specific procedure, which apparently proved a failure, was described at the meeting by HEW official Barbara Mishkin as using the fetoscope "on mothers who have elected to have abortions for reasons totally unrelated to the research." After the fetus's bloodstream had been analyzed, the abortion would take place.

Mishkin explained, according the transcript, that this was not therapeutic research because it was not "designed to provide therapy for the fetus." At this point, Dr. James Gaither, chairman of the advisory board, turned to Foster and said, "Hank, would you say something about the science of this?" Foster replied that he "say something about the science and the ogy."

The remarks he made sound, to the l at least, more medical than sociologica example, discussing the possibility of inf But in passing, he uttered the words tha now come to haunt him: "I have done a amniocentesis and therapeutic abortions, ably near 700." These are two different p dures, and it seems clear that the 700 to the abortions.

The early administration denials c written off. The document is valid. This same Dr. Foster the president nominat defies credulity to believe Foster di correct this transcript when it was circ 16 years ago.

So, Health and Human Services officia directing reporters to other doctors who present in Seattle, claiming they will that Foster could not have said what is scribed. It is no trifling point. It wou impolitic for the new surgeon general to performed that many abortions. It w suicide for him and poisonous for the pre if he is now lying about his past.

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Richard Cohen

The Doctor Is In/Out

THE WASHINGTON POST

THURSDAY, FEBRUARY 9, 1995 A-29

For his nomination of Dr. Henry Foster Jr. as surgeon general, President Clinton has been attacked from both ends of the political spectrum. When journalists come under the same sort of criticism, they comfort themselves with the canard that the truth lies somewhere in the middle. Clinton, never mind journalists, would be wrong to reach the same conclusion. In this case, all his critics are right. His middle is a moral muddle.

The primary issue, of course, is whether Foster performed no more than a dozen abortions, as he apparently maintains, or 700, as a confusing transcript of a 1978 hearing purportedly indicates. But it's not clear if the number 700 refers to abortions or amniocentesis, which are two different procedures. To a strict anti-abortionist, though, the numbers game is without moral difference. What's clear is that the man has performed abortions.

The upshot is that the White House is once again embroiled in one of those messy nomination fights that bespeak poor staff work, and has gotten the Senate, which likes its nominations neat, in an uproar. To make matters worse, Kansas's Sen. Nancy Kassebaum, a rare pro-choice Republican, was erroneously told by a White House aide that Foster had performed only one abortion. The figure is off by either 11 or 699. Either way, Kassebaum is steamed.

And so are certain pro-choice legislators on the Democratic left. One of them, Rep. Patricia Schroeder (D-Colo.), said she and others were sending Clinton some bottles of spray starch to strengthen his resolve. FedEx, UPS or whatever service she used, the starch apparently arrived too late.

Clinton has now reaffirmed his support of Foster, but not before the White House characteristically backed off a bit. It suggested that if Foster's abortion figure went over, say, one dozen, it would have problems with the man. Apparently, the president is pro-choice only until the number 13. After that, he's a regular Phyllis Schlafly.

In the end, the Foster flap may turn not on abortion but on credibility. No matter how many abortions he performed, if he was less than candid about his record, his nomination is doomed. Under those circumstances, his critics would be entitled to their outrage, and the administration would be correct to withdraw and start anew. As luck would have it, the White House has some experience in these matters, having chosen two attorney general nominees before a third, Janet Reno, finally made it.

That sorry record is precisely what many in this town are now recalling. But a more apt precedent is the gays-in-the-military flap, which contributed greatly to the public perception that Clinton was not a New Democrat after all but just an old fashioned liberal. He holds the view that a person's sexual orientation does not matter, just as long as he or she caused no trouble and did his or her job. Imagine!

That proposition, so sensible I still cannot understand the fuss, was nevertheless political dynamite. So what did Clinton do? He hemmed. He hawed. He backed and he filled. In the end, he satisfied no one—not those who thought he was right and not those who thought he was a woolly minded former hippie who didn't know squat about military service and, of course, showers.

Now we have a repetition of that experience. To the accusations that Foster may have performed many abortions, Clinton should have said, "So what?" Abortions are legal and Clinton—remember—is pro-choice. To many people, particularly women, it was the single most important difference between Clinton and George Bush. This, in other words, was a wedge issue, not to mention a matter of principle. The wedge, though, has been blunted, the principle fudged.

Clinton might also have reminded p that the man under consideration is a gyn—precisely the field where a physici likely to have to perform abortions. That nature of the practice. You counsel your tient, treat her, maybe prescribe birth co measures—and if that fails, continue obligation by, sometimes, performing an tion. On a good day, you deliver a baby another day, you have to perform an abort

Given the facts, Foster presented Clint chance to remind people that there is a di ence between him and the conservative publicans who now control the House, Sen and—maybe more important—talk radio a difference that matters to a great m people. Instead, the White House reac weakly. Why? Does it think it's going to the votes of the anti-abortion crowd? chance. Have the midterm elections chan matters so radically that what was principle October became expediency in Novemb Maybe.

Whatever the reason, the White House l left the impression that its position on abort is a variation on its gays-in-the-military co promise: Don't ask, don't tell and don't, heaven's sake, take a firm stand.

Wash Times A 11 2/1/95

Foster flap only latest nominee faux pas

By Stewart M. Powell
THE WASHINGTON TIMES

The failure of the White House to anticipate the abortion controversy surrounding President Clinton's nomination of Dr. Henry Foster Jr. as surgeon general revives questions about the way the administration chooses potential appointees.

Senior presidential aides struggled yesterday to end six days of embarrassment and political damage from Mr. Clinton's choice of Dr. Foster, an obstetrician gynecologist from Nashville, Tenn., who said he performed abortions during 38 years of medical practice.

Administration staffers pored over Dr. Foster's medical records to try to pinpoint the actual number of abortions. This became an issue when the administration's count started changing, enabling Foster critics to challenge his credibility.

Other questions were raised over the administration's failure to anticipate the controversy sparked by the selection of a physician who acknowledged performing any abortions, given the fact that the abortion issue continues to divide the nation.

Dr. Foster is the first high-ranking appointment announced by the White House since the Republican takeover of Congress. The post of surgeon general requires Senate confirmation.

White House Press Secretary Michael McCurry, reaffirming Mr. Clinton's support for his nominee, said yesterday the staff is reviewing ways to improve the screening of appointees.

"There's no one on staff who would say that we served the president and the nominee as best we could" in handling the Foster nomination, Mr. McCurry said.

"We should have done a better job and we're now looking forward to getting everything prepared for what we know will be a hard fight but we believe a very successful and effective fight on behalf of the nominee."

The administration's past troubles on appointees have stemmed from a variety of causes. But they share common denominators. Either the White House staff has been surprised by information that emerged about a nominee after the name was made public, or the staff failed to appreciate the political significance of the information.

In the category of poor information, the White House offered a coveted Supreme Court nomination to then-Senate Majority Leader George Mitchell in April before determining whether the Maine Democrat was interested. He wasn't.

A similar embarrassment befell Mr. Clinton in January 1994 when he nominated retired Navy Adm. Bobby Ray Inman to serve as his second defense secretary. Within weeks, Mr. Inman abruptly withdrew, complaining loudly about media scrutiny of his roller-coaster record in private business in Texas. The White House was criticized for failing to recognize Mr. Inman's mercurial temperament.

Supposedly poor staff work also led Clinton to nominate C. Lani Guinier as chief of the Justice Department's civil rights division in April 1993 without the president knowing about her little-noticed academic writings on boosting the political clout of blacks.

Mr. Clinton later withdrew Mrs. Guinier's nomination, saying he found his Yale Law School classmate's views "anti-democratic [and] difficult to defend."

The president encountered similar setbacks finding an attorney general.

He first nominated Connecticut corporate lawyer Zoe Baird for the Cabinet post after she acknowledged to White House aides that she and her husband had hired an illegal alien to serve as a nanny and had not paid Social Security taxes on the employee. White House aides failed to foresee the political uproar that ensued when Mrs. Baird's statement became public. Mr. Clinton eventually withdrew her nomination.

His second choice, U.S. District Court Judge Kimba Wood, was on the verge of being nominated when the White House learned she also had used an illegal alien as a nanny. Mr. Clinton then selected Janet Reno, the Dade County, Fla., prosecutor.

Christopher J. Deering, a political scientist at George Washington University, offered an understanding view of the problems facing Mr. Clinton in his personnel selection.

"It's always tempting to criticize the White House when some element of a nominee's background comes out and proves to be embarrassing," Mr. Deering said. "But every recent president has found it difficult to discover every little tidbit about a nominee that might cause trouble on Capitol Hill."

WALTER MEARS

Washington Times

Detours that lead to distraction

Just when President Clinton needs it least, he faces another detour into a nomination hassle, latest in the long series that has distracted his White House from the start.

Not that he's the first president to encounter such disputes. It goes with the job. But it keeps happening to Mr. Clinton, over questions unasked, issues left unchecked, pitfalls unforeseen until it is too late to avoid awkward and politically embarrassing struggles.

This time, the suddenly controversial nominee is Dr. Henry Foster Jr., to become surgeon general. Senate opposition is swelling over abortions Dr. Foster performed and the credibility of both the nominee and the administration in describing his record.

Ironically, Dr. Foster was chosen to fill a job that was a trouble spot for Mr. Clinton until he ousted Surgeon General Joycelyn Elders, who kept igniting firestorms with her comments about drug legalization, sex education and, finally, the suggestion that schools should consider teaching children about masturbation.

All this over a job that is basically no more than a platform, with no real power over health policies or programs. The common-sense objective would have been to find a politically safe choice, and that seems to be what the administration thought it had in Dr. Foster.

He was, after all, endorsed at first by his friend and fellow Tennessee physician, Sen. Bill Frist, a Republican. Mr. Frist said Wednesday that Dr. Foster should not be judged on the abortion issue. But the senator isn't saying how he'd vote on confirmation.

Dr. Foster had earned kudos for his efforts to curb teen-age pregnancies — had been honored for it in 1991 by President George Bush.

Mr. Clinton knew, before choosing Dr. Foster, that he had performed abortions, but the situations and numbers involved are now in dispute and the White House is tardily reviewing the record.

The number doesn't matter to anti-abortion absolutists. To them, one abortion is enough to vote against confirmation. In addition, Sen. Don Nickles, Oklahoma Republican, said Dr. Foster sounds to him like Dr. Elders in favoring the distribution of condoms to young people.

"So it looks like we're going to be into another Dr. Elders fight," Mr. Nickles said in a TV interview.

That and the credibility questions contribute to a nomination pattern that dates from Mr. Clinton's failed 1993 selections of Zoe Baird and then Kimba Wood to be attorney general. Both withdrew because of controversies over employing illegal aliens as household help.

Then there was the dropped selection of Lani Guinier to head the Justice Department's civil rights division. Mr. Clinton said he disagreed with some of her views but hadn't known of them in advance. That was followed by the unexpected withdrawal of Bobby Inman, who said he hadn't wanted to be Mr. Clinton's defense secretary and wasn't going to put up with attacks on his business affairs, and his overdue payment of taxes for his household help.

Those personnel problems got in the way of Clinton efforts to push his own programs. The new dispute will too, at a time when he wanted to focus on proposals aimed at helping the middle class and at reclaiming the middle-of-the-road identity he campaigned on in 1992. The campaign to challenge him in 1996 is already taking shape, with Republican candidates ready to roll.

Mr. Clinton said Wednesday he believes Dr. Foster should and will be confirmed by the Senate. Two days before, he'd seemed to hedge a bit.

"If the facts are no different than I understand them to be, I don't understand why he'd be in trouble."

Dr. Foster may be in trouble because the record was unclear and, indeed, misstated at the outset.

Thus after a review said to have involved the White House counsel's office, the Department of Health and Human Services and Mr. Clinton's personnel people. There's been revolving door management in that personnel office, which may account for some of the problems.

But there is no shortage of resources to check and question a nominee o.. potential problems, making it all the more puzzling that the anti-abortion movement could so quickly come up with data that the White House missed.

"There's no one on staff who would say that we have served the nominee and the president as best we could," White House press secretary Mike McCurry conceded Wednesday. "We should have done a better job."

Walter R. Mears is vice president and columnist for the Associated Press.

'Elders lite'

Differences in style, not substance: Activists expect new Surgeon General nominee will pursue the Joycelyn Elders agenda—without the headline-grabbing bombast

by ROY MAYNARD



Contracts and tax cuts aside, the nomination of Henry Foster to replace ousted Surgeon General Joycelyn Elders could be the first test of the new Republican Congress's willingness to battle the White House on social issues. Dr. Foster—Family Research Council President Gary Bauer calls him "Elders Lite"—could be even more dangerous than the outspoken Dr. Elders, whose views he mirrors.

Dr. Foster, a 61-year-old Tennessee gynecologist, has performed abortions himself, according to news reports. He sponsored a program in Nashville called the "I Have a Future Program," which attempted to curb teen pregnancy with self-esteem building and condom distribution. During his nomination speech, Dr. Foster said he plans to focus on AIDS research and smoking. His nomination brought swift response, from both conservatives and liberals in Congress. President Clinton asked conservatives and pro-life groups to give his nominee a chance, and Tennessee Republican Sen. Bill Frist has endorsed him.

But other senators have expressed reservations: Dan Coats (R-Ind.) said, "It's one thing to be an advocate for a major anti-smoking campaign. It is quite another to be an advocate for an 'every child must have a condom' campaign."

James A. Smith of the Southern Baptist Convention's Christian Life Commission agrees.

"Now we have the 'Condom King,' as opposed to the 'Condom Queen,' Elders," Mr. Smith said. "There is no difference in policy aims, goals, or intentions here. President Clinton chose a Joycelyn Elders who is not quite so bombastic. This is actually more dangerous, more deceptive because they will still be able to campaign for their failed 'safe sex' agenda, but they won't have the burden of having Elders as the poster child for it."

More Senate opposition to Dr. Foster is vital, he said.

"I think Senate Republicans have a chance here to show that they have not lost the nerve to address the cultural issues and to deny Bill Clinton this surgeon general. If they don't, it will be an abject failure on the Republican Party's part."

Many of the early salvos from pro-life groups [illegible] Parenthood [illegible] but have yet to deny [illegible]

"Once again the [illegible] shows it does not know [illegible] tremendous change in Congress [illegible] ber," said Kristi Hamrick, press [illegible] the FRC. "The problem with the Clinton administration policies on teen health issues is not with the spokesperson, it's the message. In Dr. Foster the administration has chosen someone who has worked with and is very supportive of many contraceptive-based sex education programs. These programs are disasterous, they are a failed policy, but he remains supportive."

Title 10 and the clout of Planned Parenthood have been behind those programs for the last three decades, she explains—and Dr. Foster has strong ties to both. He was a board member for Planned Parenthood during the mid-1970s and still serves as one of the group's public policy advocates. He's on a committee to "Keep Abortion Safe and Legal," which pushes abortion on demand without restrictions—up through the third trimester, without parental consent or waiting periods.

And because he has gone on the record as heartily endorsing the goals of SIECUS, the Sex Information and Education Council of the United States, his views on sex education are no different from those held by Dr. Elders, critics argue. SIECUS advocates discussing masturbation with children ages 5 through 8—the very topic of discusson that got Dr. Elders fired.

According to the SIECUS guidelines, a sexually healthy adult is one who [illegible] tolerance for people with different sexual values and lifestyles." A sexually unhealthy adult could be hobbled by faith. "Conflicts may result in teenagers and adults who have been raised in a religion that does not [illegible] human sexuality."

In fact, the lauded "I Have a [illegible] gram," launched by Dr. Foster, has [illegible] tion of abstinence or delaying sex [illegible] focuses on delaying the possible [illegible] teen sex.

The government already spends about $4 million annually (on condom based and [illegible] clinic-based programs, and what [illegible] gotten for that?" asked Ms. Hamrick. "Our teen pregnancy rate has doubled [illegible] years; our teen birth rate has doubled."

It's time to stop focusing on the [illegible] ties of new White House picks, she said, and pay closer attention to the [illegible]

"Dr. Foster is advocating the [illegible] policies," she said. "When I start to learn more about him, my personal [illegible] that the Clinton administration [illegible] the boat again. I wasn't surprised [illegible] Hillary Clinton's whole campaign [illegible] to these kinds of policy [illegible]

END STORY of Level 1 printed in FULL format

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HEADLINE: In Nashville, A Portrait of Compassion; Critics Missing 'Total Picture'

BYLINE: John Schwartz, Washington Post Staff Writer

BODY:

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

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

But here, those who know Foster find the portrayal of him by antiabortion activists to bear little resemblance to the community-minded former medical school dean whose hard work and easygoing manner have made him popular with all segments of society in a city his friend, Rabbi Randall M. Falk, describes as the buckle on the Bible Belt."

The Rev. Bill Sherman of Woodmont Baptist Church, for example, said he and his congregation oppose abortion except in such cases as rape, incest and medical necessity. But he thinks Foster is "an admirable man," and said that many of Foster's attackers are focusing solely on abortion and missing "the total picture." "He's not a politician -- he's a doctor!" said Henry Vorvay, whom Foster delivered in 1970 and who is now a Meharry Medical College student.

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

On ABC-TV's "Nightline" last Wednesday, viewers saw a defensive, faltering Foster, far different from the articulate advocate people have come to know here. But friends figure that with no previous political experience, Foster was unprepared for the harsh attacks of antiabortion groups and the intense media scrutiny that quickly followed Clinton's announcement of his choice. "I imagine that all of this sudden glare of the spotlight has been a little overwhelming," Falk said. "Because things he's said have been misinterpreted, he's almost afraid to make a statement."

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

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

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

After completing medical training in 1965, Foster became chief of obstetrics and gynecology at the John A. Andrew Memorial Hospital of Tuskegee University, where he founded a regional program to provide health services to poor mothers and children that became a model for others across the country. He came back to Meharry in 1973, eventually becoming dean of the medical school.

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

Linda Williams, Foster's assistant from 1973 until 1990, said that Foster ...ld scrutinize the weekly stack of patient surveys, looking for complaints ...t his staff, and follow up personally. "It was very important that the ...ents were treated with dignity," Williams said.

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

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

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

surgeon general and stressing the importance of sex education.

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

The program has earned national recognition. President George Bush named the program one of the thousand "Points of Light." Though success is hard to measure, Williams Greene points to the fact that between 1988 and 1991, there has only been one unintended pregnancy among participants in the program, versus 59 in a similar group of young people in other Nashville housing projects who did not participate.

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

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

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

Turning the city's medical services over to Meharry made good business sense. Renovating General would have cost much more but the racial implications of entrusting them to a black institution threatened to scuttle the deal. When former Meharry president David Satcher left Meharry to head the Centers for Disease Control in Atlanta, Foster as acting president had to recruit the physicians needed to bring the negotiations to a successful conclusion. Meharry general counsel Richard Jackson said, "A lot of them came because of their belief in him."

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

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

Meharry's board of trustees rejected Foster's bid to become president of the medical school because of shortcomings as an administrator, Meharry sources

. Jackson acknowledged that management is not one of Foster's strengths. ...stead, Jackson said, Foster's most comfortable role is similar to that of a ...ibal elder."

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

@CAPTION: HENRY W. FOSTER JR.

GRAPHIC: Photo:

LANGUAGE: ENGLISH

LOAD-DATE-MDC: February 12, 1995

GOP Warned Not to Forget Family Values

Religious Right Voices Concern on Party Agenda

The Washington Post
Sunday
February 12, 1995 A-33

By Thomas B. Edsall
Washington Post Staff Writer

'-ders of the religious and cultural right :contented with a Republican Party legis- 'genda and slate of prospective presiden- .ididates they see as failing to deal with he moral and social concerns that helped pro- uce GOP victories last November.

"The notion [among some Republican strate- ists] that pro-family voters have no place to go s wrong, and that kind of thinking could de- troy Republican hopes for the future if it ever ecame widely embraced," said Gary L. Bauer, former Reagan administration official who is ow president of the conservative Family Re- earch Council.

Bauer said that he and James Dobson, head f the group Focus on the Family, "made it lear in recent weeks" in meetings with Repub- .can Party officials "that if the party wants to ontinue to get the pro-family and pro-life vote" hey are "going to have to get over any hesitan- y for making the case for family values."

Patrick J. Buchanan, the commentator who an unsuccessfully for the GOP nomination in 992, yesterday told the Conservative Political ction Conference (CPAC) that he would wel- me the opportunity to take on those who modify the tough antiabortion language Republican Party platform.

yone who tries to rip that plank out of he platform will have to come over Pat Bu- hanan," he told the cheering audience.

And on Friday, Ralph Reed, executive direc- or of the Christian Coalition, warned the Re- ublican Party that evangelical Christians and ntiabortion Catholics will refuse to vote for a Republican ticket that includes a presidential or ice-presidential candidate who favors abortion ights.

Reed complained that in some Republican uarters, Christians and moral conservatives are still being told that the social issues are osers, that we must downplay values and we nust sublimate our Christianity, especially if ve want to get into the White House in 1996."

For Reed, the strong warning to the GOP narked a shift from his past role as a concilia- or. It suggested that he has faced growing riticism within conservative Christian ranks or his past willingness to postpone some of the nore controversial elements of the conserva- ive social agenda, including school prayer, and willingness to consider alteration of the lan- in the GOP abortion plank.

Reed, who spoke at the CPAC gathering, defended his willingness to put off social issues in favor of passage of the GOP "Contract With America," disputing critics who "charge that the contract ignores social issues. Now we know better. It includes welfare reform; it discourages illegitimacy and encourages work and responsibility. . . . It includes a tougher crime bill and a tougher anti-pornography bill."

One factor in the discontent is the decision of both former vice president Dan Quayle and former education secretary William J. Bennett not to run for president, leaving many conservatives without a candidate with strong appeal to the Christian and social-issue right.

Quayle, who gave the closing address at the CPAC gathering, stressed values issues and noted that if he had run, his slogan would have been "putting the family first."

Many people who are conservative on social issues also have grim memories of the early 1980s, when they agreed to temporarily postpone action on many of their issues in order to give first priority to the Reagan administration's tax and budget economic proposals, only to end up without strong administration support later on.

Bauer said two clear areas of concern are the "hot button" issues of abortion and religious freedom embodied in school prayer. In language stronger than Reed's, Bauer warned that putting an abortion-rights supporter on the GOP presidential ticket or abandoning the party's antiabortion plank "would absolutely guarantee an explosion and perhaps even a third party."

But, he said, he and Dobson have voiced a broader concern to Republican leaders that there is a larger, and generally unaddressed, issue of "what is happening to the heart and soul of the country, . . . the sense that our society is becoming morally base and our culture more uninspired."

White House Widens Effort On Behalf Of Its Nominee

By ROBIN TONER
Special to The New York Times

WASHINGTON, Feb. 11 — The Clinton Administration continued its efforts this weekend to salvage the nomination of Dr. Henry Foster Jr. as Surgeon General, scheduling an array of Administration officials for the Sunday television talk shows on his behalf and trying to rally support among physician and other medical groups.

But the White House also found itself responding to new reports. According to The Associated Press, Dr. Foster wrote in a 1976 medical journal that he had performed hysterectomies to sterilize some severely mentally retarded women.

A White House official said today that Dr. Foster was very much in the mainstream of medical practice at the time he performed those hysterectomies. "That was consistent with medical theory and practice at the time," said John Podesta, the White House official. "It's changed in the intervening years, and Dr. Foster along with the rest of mainstream medicine no longer accepts the sterilization of mentally retarded women by hysterectomy as appropriate, although other medical reasons might justify the procedure."

In the article, published in the January 1976 issue of the Southern Medical Journal, Dr. Foster indicated that doctors must "guard vigilantly against the injudicious and indiscriminate removal of the normal uterus." But he also indicated that hysterectomies could provide "significant hygienic benefit" to some severely mentally retarded women.

"Recently I have been to use hysterectomy in patients with severe mental retardation," the article said. "Hysterectomy can be done either for sterilization or to eliminate the menses, which is of significant hygienic benefit in these severely handicapped individuals."

White House officials said they knew about Dr. Foster's performance of these hysterectomies before submitting his name in nomination. They generally brushed aside the significance of this report.

Dr. Foster, whose nomination has touched off opposition because he performed abortions, was back home in Tennessee this weekend, officials said. Next week, he will begin courtesy calls to Senators, they added. In the meantime, Mr. Podesta of the White House said, "We're working with a broad range of doctor groups, other medical groups, religious and educational groups, and prochoice groups to rally support behind him."

On Friday, a dozen medical groups, including the American College of Physicians, the National Medical Association and the Tennessee Medical Association, joined the obstetricians and gynecologists in supporting the nomination and the American Medical Association reaffirmed its support of the nominee.

The American College of Obstetricians and Gynecologists also rallied to Dr. Foster's defense.

"In spite of Dr. Foster's illustrious record, there are some who would deny him a hearing before the nomination process has even begun," said Dr. Ralph W. Hale, executive director of the group. "The key word here is process, that is a full fledged discussion of his qualifications before

NY TIMES 2-12-93 1:23

2-13-95 A-19

The divisive Foster nomination

The following remarks were made yesterday by Sen. Phil Gramm, Texas Republican, on ABC's "This week with David Brinkley."

First of all I think people need to understand that the surgeon general has no official function in government other than advocacy. The surgeon general doesn't run anything, doesn't administer any programs. Their job is working with every element of American society, trying to promote something we all agree on — good health. Their job is promoting public health issues and their ability to work with everybody is critically important in doing that job.

When you go back to Joycelyn Elders and you look at how divisive she was, and you look at the need to bring everybody together and getting someone who can work with all elements of American society, I think the fact that you have a physician who, as a routine practice of medicine, performed abortions; who performed involuntary sterilizations and who has had a very difficult time putting together his own history in working with the White House — I think all of those things, if combined, to undermine the kind of physician — to undermine him and his ability to do the kind of position that's called for.

In fact, I'm a little bit concerned that in Congress we're now talking about eliminating the surgeon general position. I think that's a mistake. I think we need someone who's advocating nutrition, who's advocating good health practices. And I think that what has happened here — mostly because of our experience in the Clinton administration — that this position has become polarized.

My basic position is this. The president has a right — he was elected — to appoint people who agree with him. I think the position is not the issue here. What is the issue is can a person who routinely performed abortions, who performed involuntary sterilization procedures and who has a very difficult time coming up with the number of such procedures that were performed be an effective advocate for public health in America in 1995? I think the answer is no.

Shalala concedes mistakes on Foster

Process isn't issue, White House says

By Laurie Kellman A-1
THE WASHINGTON TIMES 2-13-95

The White House conceded yesterday that it botched the troubled nomination of Henry W. Foster Jr. as surgeon general, and it tried to turn the debate away from the Clinton administration's credibility problems.

"We have admitted that we started badly, that there was some misinformation," Donna Shalala, secretary of the Department of Health and Human Services, said on ABC's "This Week." "The important point now is to get back to the candidate and to the qualifications of this candidate."

"You know, this isn't a vote about White House process," said White House Chief of Staff Leon Panetta on NBC's "Meet the Press." "This is a vote about the qualifications of this surgeon general. Let that be the issue."

Lawmakers from both sides of the aisle were not about to comply with that request.

Sen. Daniel R. Coats, Indiana Republican, rebuked administration officials yesterday for suggesting that problems with the nomination were orchestrated by "attack groups" that oppose abortion, such as the "radical right."

"This is a litmus test, not on abortion, this is a litmus test on the truth," Mr. Coats said on the CBS program "Face the Nation."

Dr. Foster, 61, a health policy fellow at the Washington-based Association of Academic Health Centers, was nominated to replace Dr. Joycelyn Elders, who was fired in December after she advocated

see FOSTER, page A20

FOSTER

From page A1

teaching schoolchildren about masturbation.

Problems rose shortly after President Clinton announced Dr. Foster's nomination Feb. 2. Relying on his memory, Dr. Foster first said he had performed fewer than a dozen abortions in his 38-year career. Dr. Foster then said he had actually performed 39 abortions and supervised drug tests that terminated the pregnancies of 55 other women.

Meanwhile, a transcript circulated by a pro-life group quoted Dr. Foster as saying he had performed as many as 700 abortions.

And Saturday, the White House released documents showing that Dr. Foster had performed hysterectomies on severely retarded women in the 1970s, when it was an accepted medical practice.

Two prominent Clinton allies in the Senate issued harsh rebukes of the administration Friday for sending up the nomination without having performed thorough research.

"Unfortunately, the White House did not do the best job in putting Dr. Foster's nomination forth, and that's just the way maybe that White House is," said Sen. Barbara Mikulski, Maryland Democrat.

"Why don't we just go out and find the single best doctor in America, appoint that doctor?" asked a visibly irritated Sen. Joseph R. Biden Jr. of Delaware, ranking Democrat on the Senate Judiciary Commitee. "There's got to be one out there that's not controversial and incompetent."

Yesterday, Mr. Panetta tacitly challenged the senators to summon the nerve to deal with the "real issue," which he described as prevention of teen-age pregnancies.

"God forbid that we ought to make senators uncomfortable about having to deal with issues like this," Mr. Panetta said yesterday. "They're basically saying, 'God, why do I have to face this kind of controversial issue?' "

"The fact that the White House or that HHS didn't do a very good job in vetting this issue is of some significance, but it's not the central question," Sen. Christopher J. Dodd, Connecticut Democrat and general chairman of the Democratic National Committee, said yesterday on "Face the Nation." "That's the tempest in a teapot. The real issue here is whether or [illegible]

He said the "radical right" is trying to block a fair hearing for Dr. Foster before the Senate Labor and Human Resources Committee, of which he is a member. "There is an effort to destroy this man," Mr. Dodd said.

"This is not limited to what Mr. Dodd calls the radical right," countered Mr. Coats, who also sits on the committee, adding that the nomination is in "clear trouble."

"What we're really talking about here are untruthful statements by the White House daily," Mr. Coats said.

Mr. Panetta and Miss Shalala admitted the White Hosue botched the nomination but vowed that President Clinton and Dr. Foster planned to fight for confirmation.

"There's no question that we could have served the president better in this process," Mr. Panetta said, defending a White House that has seen at least nine botched high-level nominations and Cabinet resignations.

"It's not going to happen again, I can assure you," Mr. Panetta said.

"There was no intent here to misinform the public or members of the Senate," Miss Shalala said.

But the Clinton administration officials' comments clearly showed the White House did not foresee the abortion controversy or prepare Dr. Foster for the scrutiny.

"Listen, there's no question that when you come to this town and start getting the rap that you sometimes get when you're nominated for any position, that you're going to take some hits," Mr. Panetta said. "He knows that now."

In fact, the administration yesterday was still investigating Dr. Foster's background more than 10 days after Mr. Clinton announced the nomination, Miss Shalala said.

"No one more than I deeply regrets relying on his memory," she said.

Critics said the administration's failure to thoroughly vet the Foster nomination undermined the well-respected Tennessee doctor.

"They've just basically hung Dr. Foster out to dry," former Vice President Dan Quayle said during his appearance on "Meet the Press."

After withdrawing Thursday from the race for the Republican presidential nomination, Mr. Quayle predicted yesterday that the Foster issue will likely linger through the 1996 contest.

It shows incompetence, and that's going to be very much of an issue in 1996, competence."

T. GREENBERG PATRICK BUCHANAN A-19 2-13-95 Kans. Times

Attitude adjustment . . . and retreat

The next native of Arkansas slated to become surgeon general of the United States sounds like a welcome step up — despite some confusion about how many abortions Henry W. Foster, M.D., may have performed in a long and distinguished career and why. Here's hoping the good doctor has been leveling with the American people, because he doesn't belong in high office if he hasn't been.

Whatever one thought of his predecessor's policies, there was no questioning Joycelyn Elders' candor about them. One would like to think that any confusion about Dr. Foster's record originated with the White House's inept-as-usual bureaucracy — rather than with Dr. Foster himself, who has a fine reputation as a physician and educator.

Dr. Foster represents a welcome change in at least one way. His major contribution to combating illegitimacy and teen-age pregnancy doesn't seem to be training in technical proficiency but in simple self-respect.

For example: Back in 1987, the doctor started an after-school program in Nashville called "I Have a Future," which encourages young women to postpone sexual activity and childbearing till they have built lives of their own and are ready to assume parental responsibilities. The program is said to combine [illegible]ng, job training and classes [illegible] family life. And it seems to be [illegible]ng. There are few pregnan[illegible]ong the students, and many [illegible] their education beyond [illegible]ool.

Just as the most erogenous zone is the mind, so the best prophylactic is the respect for self. Dr. Foster would seem to recognize as much.

Surely the last surgeon general understood all this, too, but Joycelyn Elders seemed always to be talking about the mechanics of sex rather than its moral and ethical significance. Her breezy presentations tended to overlook the connection between sex and the deepest and most sacred of human feelings. It is no coincidence that marriage is a sacrament in most traditions, and that it is ringed about by safeguards prudential and providential in all civilizations worthy of the name.

By presenting sexual activity as a branch of physical hygiene or maybe consumer ed, with about as much romance and meaning as flossing, mod sex educators have just about done in a higher dimension of life. Sex ed can reduce love, longing, jealousy and passion — enough material for several biblical epics and no end of grand operas — to a form of physical education. Or maybe gymnastics.

Some days it seems as if the whole society, under the tutelage of our politically correct elites, has decided to go marching up Fool's Hill en masse.

Surely something has gone wrong when abortion becomes just another form of birth control. Human life itself has been devalued. This latest appointee of the Clinton administration stressed that any and all abortions he had performed were done in-hospital and for therapeutic reasons. Over the course of his medical career, Dr. Foster noted, he also must have delivered some 10,000 babies. Such comments reflect a new (and old) attitude toward abortions — that they are justified only when the life or health of the mother is in danger.

At least one of the abortion-on-demand crowd noticed the change in political and moral atmosphere. Ellen Goodman, whose newspaper column serves as a kind of social barometer, expressed her discomfort with this return to a more life-revering past. "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."

Her unspoken but obvious thesis is worth exploring. Only when the law permits abortions for bad reasons, or no reason, as it largely does now, is the abortion lobby going to be "comfortable." But how comfortable, or secure, will anyone be in a society that takes life so lightly?

What happens to a civilization when the taking of human life, whether for good reasons or bad, is considered the business of only the takers? People may differ on moral issues; what disturbs is the relatively new assumption that morality no longer matters in public discourse or policy — that it needn't be argued, that the subject is closed, and the taking of human life should be permitted for any reason or no reason.

When a nominee for surgeon general wishes to present reasons for his actions and explain the abortions he has performed, that alone is a hopeful sign. The mad pendulum may be swinging back at last — not toward values all share, or reasons all will agree with, but at least toward the recognition that values and reasons do matter to society, and should be taken into account. They are not just private concerns that allow us to do anything we wish to others or to ourselves. If that's not much progress, it is progress.

Paul Greenberg is editorial page editor of the Arkansas Democrat Gazette in Little Rock and a nationally syndicated columnist.

The bungled candidacy of Dr. Henry Foster Jr. is shaping up as a major intellectual and moral triumph for the pro-life movement.

For, by the manner in which the White House chose to defend Dr. Foster, it virtually conceded that abortion is a morally suspect act, that any doctor who routinely does abortions is disqualified to be surgeon general of the United States.

Look at how defensive the White House was.

First, word was put out that Dr. Foster had performed, in three decades as an obstetrician-gynecologist, just one abortion. When that story collapsed, the fall back position was fewer than a dozen — only in cases of rape, incest, or to save the life of the mother. Day after day, the revisions trickled out.

On "Nightline," Dr. Foster sought, almost pathetically, both to emphasize the number of babies he had delivered, and minimize the number of abortions. At one point he blurted, "I abhor abortion."

Unstated moral premise of Dr. Foster's "Nightline" appearance: Delivering babies is wonderful; performing abortions is terrible.

Why did the White House and Dr. Foster not admit that he did abortions, declare it irrelevant how many, and hail his courage?

Answer: The White House and Dr. Foster know most Americans, no matter their stand on "a woman's right to choose," believe in their hearts that the act of abortion is repugnant and sordid.

When Dr. Foster was in school, doctors took the Hippocratic Oath, vowing never to participate in abortions. Doctors who did abortions were outcasts. Had anyone urged that President Eisenhower name an abortionist as surgeon general, it would have been considered a crude joke.

In treating abortionists as pariahs, were we morally retarded? Or is America morally retarded today, when national leaders call abortion a "legal medical procedure" of no moral significance?

By their desperation and duplicity in trying to hide the number of abortions Dr. Foster performed, the White House gave us its answer. They have conceded there is something deeply shameful and morally suspect about the act.

Mr. Clinton's militant allies recognize the ground given away. The National Coalition of Abortion Providers has denounced Dr. Foster for "equivocation and political cowardice in the face of criticism for doing what is legal," and called on him to withdraw.

With Dr. Foster's withdrawal, or defeat, the time is ripe for major advances by right-to-life. Their ranks strengthened by 50 new pro-life House Republicans and half a dozen senators, they have the numbers. The other side is divided and confused in the wake of the Foster debacle, and the moral high ground has been yielded.

Added to Dr. Foster's statement that he abhors abortion is the first lady's comment, postelection to Newsweek, that abortion is "wrong," and the remark of Kate Michelman, perhaps America's best-known abortion activist, to a Philadelphia journalist: "We think abortion is a bad thing. No woman wants to have an abortion."

Now if abortion is abhorrent, "wrong" and a "bad thing," and our president is on record as saying he wants to make it "rare," why not set about making it rare?

Let Congress vote to defund any organization — from Planned Parenthood to the U.N. Family Planning Association — that finances abortions. Decent people should not be forced to pay for deeds Dr. Foster says are abhorrent and Hillary Rodham Clinton says are wrong.

Second, let Congress hold public hearings — bring in ethicists, biologists, doctors — to discuss when life begins, and demonstrate what abortion does, both to a preborn child and to its mother.

In the 22 years since Roe vs. Wade technology has advanced enormously. Premature babies are being saved at earlier and earlier stages. New sonograms and imaging machines enable doctors to see a child at every stage of development.

Let the country see. Let a new generation of young be taught the truth. Let those other victims of abortion, women — who were pressured, abandoned, lied to — describe what it was like, what it did to them physically, mentally, spiritually. A new GOP Congress should go after the abortion industry with the same brio that the old used to go after the oil industry and the tobacco industry.

Hopeful result: a law declaring the unborn child a person under the Constitution, and a second forbidding abortion after "viability," a point that would surely end all third trimester abortions and some second-trimester abortions.

Mr. Clinton might just sign it to get the issue "behind him" for '96. If so, we will be on the way to ending abortion in America, just as the abolitionists were on the way to ending slavery when they got the slave trade stopped.



Patrick Buchanan is a nationally syndicated columnist.

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.



COUNTERPOINTS
By Michael Gartner

Not sound bites on TV, which at least knows the ethics of sound bites. Not instant analysis by anchormen, 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 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.



USA TODAY

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 deepening 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 that diverse perspectives on today's issues. Wednesday: Linda Chavez on another affirmative-action debacle. Thursdays: Lars Erdich. Mondays: Tony Snow. Tuesdays: Michael Gartner.

▶ Foster nomination, 12A

KEN ADELMAN

Unexpected complications that could prove fatal

Grand title, negligible staff, undefined responsibilities, 80- to 85-hour work week, small office, multiple application forms, several investigations, possible (likely) controversy, with reputation risked. Relocation to Washington without financial help. One-half past salary. Ability to take criticism without rebuttal essential.

Why would anyone apply? The latest Foster controversy sends three big messages: Washington remains brutal, abortion remains incendiary, and reach-back by black Americas remains unappreciated.

Granted, glaring incompetence of the Clinton administration accounts for most, but not all, of the woes of Dr. Henry W. Foster Jr. — just as it did for those of Vince Foster Jr., who took his own life because of White House stress. As Abba Eban once remarked, "politics is not for the fainthearted." But it's become unsuitable for the stouthearted, as well.

The Washington Vince and Henry Foster found differs markedly from the Washington found a quarter-century ago. Public service, once presumed noble, is now presumed ignoble. Suspicion pervades the city. Officials, now even nominees to become officials, are presumed guilty until proven innocent. The price is high on such a novice but obviously good individual as Dr. Henry Foster.

The price is even higher on our political system. It is no coincidence that such palpably good individuals as Dick Cheney, Dan Quayle, Jack Kemp, and Colin Powell refuse to pay the personal price to run for president. Place them among Abba Eban's "fainthearted," or call them normal humans who don't wish to subject themselves to today's culture of accepting (or even encouraging) abuse. They simply did not want to be painted as some distorted caricature, as has Dr. Henry Foster.

"Ever since Feb. 2, when President Clinton and Secretary [Donna] Shalala publicly called me to serve, 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," said Dr. Foster last week. That's sad.

It is most tragic that the ruckus over abortion, incompetence of the White House, and Dr. Foster's lack of hardball political experience overwhelms his example of reach-back.

Second, and nearly as sad, is the re-emergence of abortion as a wedge issue. The Foster nomination, especially the way it was handled, gave new jolt to the body politic already racked by the abortion issue for the past quarter-century.

It is particularly damaging to Republicans to have pro-life again become the litmus test for candidacy or confirmation. All single-issue politics are damaging, as James Madison clearly knew when writing Federalist 10, but one filled with religious and moral justification becomes even more so.

Had the issue finally receded, as many Republican leaders hoped, the party's past image of meanness and exclusivity would have receded as well. That abortion has again moved into prominence hurts the party and contributes to the overall cruelty of Washington politics.



Third, the Foster nomination turned out badly since it turned away from a celebration of an accomplished black American reaching back to others in his community.

Throughout U.S. history, successful Jews traditionally reached back to downtrodden Jews, as have Italians, Armenians, Vietnamese and other ethnic groups. Less evident (at least) and less prevalent (in fact) has been black reach-back.

Too few successful blacks do reach back. To take just one example, Michael Jordan did not reach back to take up a social cause even after his father's murder took him away from basketball. His successor, basketball star Charles Barkley, contends that he's no role model and has no desire to become one.

Black Americans' special (but not exclusive) obligation to help take care of their flock has a hero in Dr. Henry Foster. His nationwide "I Have a Future" program, to attack illegitimacy and laud abstinence, was precisely the right message to precisely the right target population.

Giving inner-city kids genuine heroes — black Americans who give of themselves, as well as their wallets — seems the best way to tackle our mammoth inner-city problems.

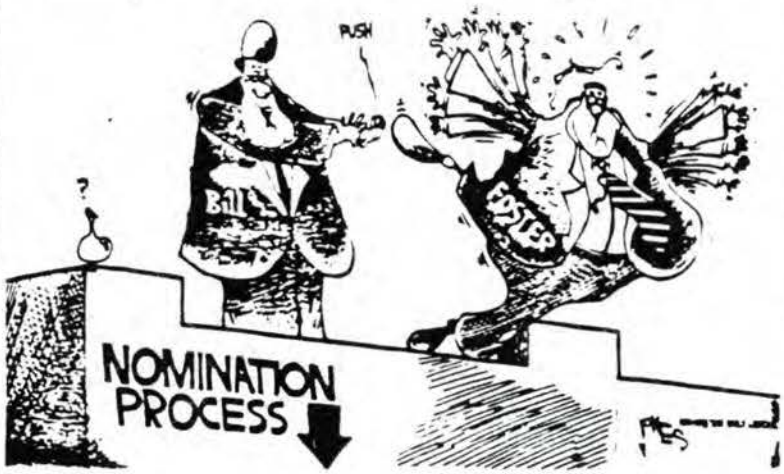
It is most tragic that the ruckus over abortion, incompetence of the White House, and Dr. Foster's lack of hardball political experience overwhelms his example of reach-back.

Conservative Republicans should thus blast the Clinton team's handling of this issue, reiterate their views about abortion, and then vote to confirm an obviously good man who furnished us a model of how a successful African-American should act.

Ken Adelman is a columnist for The Washington Times and is nationally syndicated.

TONY SNOW A-20 2-16-95 Hirsh Times CLARENCE PAGE

Temperature readings on Dr. Foster



Dr Henry Foster Jr has become the Greta Garbo of American politics. Nobody knows quite what to make of the man. Depending upon who's doing the telling, the 61-year-old obstetrician-gynecologist is either an amiable country doc or the Mengele of the Meharry Medical School, a surgeon who sterilized women of low intelligence and limited means.

By now, everyone in America knows the president's nominee for surgeon general has performed abortions and that he has enormous difficulty explaining when, how many and why. His performances have been so embarrassing that the administration has tried to slap the "extremist" label on anybody who tries to pry a straight answer from the man.

Despite all this, Dr Foster seems to have enjoyed a perfectly normal career — which is precisely the problem. The triumph of wonder drugs and gosh-golly machines has transformed medicine from a healing art into a form of gadget-happy mysticism. Doctors no longer feel constrained just to fix broken body parts. They have begun mulling over more fundamental questions, like who how to fix up the human race.

Dr Foster has ridden this wave. Late last week, the administration revealed that he performed a series of involuntary sterilizations — perhaps hundreds — on retarded women between 1965 and 1973. Clintonites quickly explained that everybody in the obstetrical profession was doing that sort of thing back in the 1970s.

But that's just not true. Although the U.S. Supreme Court upheld involuntary sterilization in a 1927 case involving a retarded 18-year-old mother in Virginia, physicians began shying away from the practice of eugenics after Adolf Hitler gave playing God a bad name. By the early 1970s, all but a handful of states had outlawed or restricted the practice of removing a woman's reproductive organs without her permission. Furthermore, doctors and philosophers had mounted a furious debate about the propriety of performing such operations even with the consent of the person involved.

The few who still performed complimentary hysterectomies explained their handiwork with a pretty standard argument. Retarded people cannot delay gratifications as well as the rest of us. They are easily exploited by sexual predators. They make poor parents because they can't cope with the stresses of handling young children. Therefore, fix them — rather than dooming their kids to misery.

In a 1981 article for the Florida State University Law Review, Deborah Hardin Ross identified the missing ingredient in this logical chain — compassion. "Involuntarily sterilized persons tend to perceive sterilization as a symbol of reduced or degraded status of punishment synonymous in their minds with castration, and of self as deviant and unworthy of parental rights."

Since then sterilization has fallen out of vogue as a way of holding down unwanted pregnancies and abortion has taken its place. In a public relations bungle worthy of the White House, the American College of Obstetrics and Gynecology voted on Valentine's Day to make medical schools teach abortion procedures to all obstetrics students. Institutions that refuse will risk losing their accreditation. In the future, students who wish to obey the Hippocratic Oath will be treated like extremists, and every potential Ob Gyn will have to master a procedure performed by only about 13 percent of the profession.

But the field of reproductive medicine abounds in surprises. Technology soon will let families use in vitro fertilization to customize their babies by picking out embryos with genetic characteristics. So while Dr Foster cleans the bottom of the gene pool, his colleagues have begun to manipulate what goes in as well.

Henry Foster's backers are right. He has been vilified by people who don't know him, and he deserves a chance to restore his good name. But members of Congress have an obligation to demand answers — about his career in the operating room, about the Meharry Medical School which lost its accreditation when he was in charge, and about the ethics of a profession that seems to be moving unchecked into a new age of eugenics.

The position of surgeon general has become a silly thing. Ever since C. Everett Koop came to Washington people in the office have focused on three things: condoms, cigarette smoke and military uniforms stolen from the prop room of "The Love Boat." The Foster hearings, if handled like an inquiry and not an inquisition, offer a chance to preserve the tedium. Inquiring minds might want to shift attention from abortion to the broader question: Whatever happened to a doctor who was content just to heal someone?

Tony Snow is a Washington-based editorial page columnist for the Detroit News and is nationally syndicated.

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, Texas Republican, a possible presidential candidate, was pretty upfront about why he didn't like Henry W. Foster Jr. He said he does "not believe a

Abortion 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.

doctor who has performed abortions as a matter of routine practice could bring Americans together" on issues of medical policy. Oh? Dr Foster could hardly do worse than Mr Gramm.

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

Dr 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 that number to 39. Organized anti-abortion activists alleged he performed many more. Is one enough? Is 500 too many? Even if Dr Foster's original estimate had been correct, it would not have silenced the rage from the radical right, or calmed Mr Clinton's nervousness.

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

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

Much has been made of how Mr Clinton's staff seemed stumbled with their response to criticism of Dr Foster and they have apologized. But what about the bigger question: Why should Dr Foster's having performed abortions be an issue at all?

Mr Clinton ran as a pro-choice candidate in a pro-choice party in a year when moderate Republican leaders [illegible] — to the point that their own extremists from pushing an anti-abortion platform so Draconian that it allowed for no exceptions even for rape and incest.

Capitol Hill Republicans would prefer that Americans not think too much about their views. Americans tell pollsters that they do not want abortion [illegible] but they also do not want to see it made illegal again. We answer it, yet we must address it.

We also would like young people to practice abstinence outside marriage. But as one Atlanta doctor said on CNN, "If it was that easy and the cable guys and ABC would just [illegible] you would think they had done a lot."

Let's keep it the point as Americans can understand [illegible].

We Americans are not [illegible] to have the tough questions [illegible] and we can't [illegible] and we have [illegible] the right freedoms and we have to exercise [illegible] We have a [illegible] to understand and [illegible] and [illegible] and politicians of both parties [illegible] to hide [illegible] the glare of [illegible] hindsight.

On the issue [illegible] we [illegible] that there was [illegible] of the [illegible] came to a position that [illegible] the [illegible] and [illegible] differences [illegible] we [illegible] and [illegible] and [illegible] and politicians of both parties [illegible] and [illegible] those who helped the Administration [illegible] a reasonable [illegible] ground.

[illegible] the Foster [illegible] [illegible] a [illegible] of high character and a long record of [illegible] public service, [illegible] he performed some abortions, [illegible] 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 [illegible] will [illegible] that a [illegible] doctor [illegible] and abortion. But a [illegible] can be [illegible] disagreement [illegible] and [illegible] Liberal [illegible] and [illegible] can [illegible] [illegible] [illegible]

D-21 N.Y. Times 2-3-93

Clinton's Pick As Top Doctor Seeks Support In the Senate

By JERRY GRAY
Special to The New York Times

WASHINGTON, Feb. 15 — With a majority of the Senate still undecided on the fate of his nomination to be Surgeon General, Dr. Henry W. Foster Jr. went to Capitol Hill today to begin lobbying for support.

As the White House pursued a cautious strategy that it hoped would build up political support for Dr. Foster's confirmation in the next few weeks, the opposition's plans were also taking shape.

Addressing a point that many Republican leaders have fretted over, Speaker Newt Gingrich said today that opponents of the nomination should avoid the divisive issue of abortion. "I would focus on the incompetence of the White House and the potential dishonesty," Mr. Gingrich told reporters, "and I would never touch the abortion issue."

To win confirmation, Dr. Foster must first gain the backing of the Senate Labor and Human Resources Committee after its hearing on the appointment. If the nomination survives that process, Dr. Foster would need a majority vote in the full Senate, where Republicans hold 53 seats to the Democrats' 47.

An aide to Senator Trent Lott of Mississippi, the majority whip, said today that Mr. Lott had not yet conducted a head count of Republicans, nor did he expect one soon.

Telephone calls today to the offices of the 9 Republicans and 7 Democrats on on the Labor and Human Resources Committee indicated that 14 of them had not decided how to vote on the nomination.

All of the Democrats on the committee have said Dr. Foster's abortion record should not be used to deny him the job of Surgeon General.

Two of the committee's Republican members — Senators Nancy Landon Kassebaum of Kansas, who heads the committee, and James M. Jeffords of Vermont — support abortion rights. A third Republican committee member, Senator Bill Frist of Tennessee, who is a doctor and a longtime friend of the nominee, said he is leaning toward supporting the nomination but first wants Dr. Foster to clear up the confusion over his abortion record.

"Frankly, I don't think many members have had more than a superficial look at his record," said Mike Horak, a spokesman for Senator Kassebaum. "If we don't have a hearing for another month, a lot of things could change both ways."

President Clinton nominated Dr. Foster two weeks ago as Surgeon General, and the 61-year-old obstetrician-gynecologist from Tennessee was immediately thrust into the center of a political firestorm when it was disclosed that he had performed abortions. More trouble developed after Dr. Foster offered at least three accounts of the number of abortions he had performed.

The White House made sure today that Dr. Foster's first meetings with members of the Senate were friendly ones. His only visits were with two Democratic supporters — the Senate minority leader, Tom Dashcle of South Dakota, and Patty Murray of Washington.

"There are a lot of lies out there, but I'm going to have my day," Dr. Foster told Senator Dashcle. "That's what the hearings are for. I want people to see my entire record, my whole life's work, to see me in total."

On Thursday he is scheduled to meet with Senator Kassebaum and Senator Edward M. Kennedy of Massachusetts, the ranking Democrat on the committee.



Foster care

A new GOP litmus test: The unraveling nomination of Dr. Foster

by ROY MAYNARD

Incompetence or even just inattention—these are the excuses being offered up inside the beltway. Dr. Henry Foster became the Clinton administration's latest quagmire in recent days: First were the revelations he performed abortions, but couldn't find a story to stick with on just how many, and later evidence emerged that he sterilized mentally retarded women during the 1970s.

With the balanced budget amendment vote closing in fast and a new crime bill on its way, President Clinton didn't need this fight—and observers are wondering why he has chosen to do battle. "There is one lobby that Bill Clinton can't say 'no' to," said the Southern Baptist Convention's James A. Smith. "That's the abortion lobby. Throughout his administration, that has been the case."

Mr. Smith points to President Clinton's first action in office: to issue five executive orders repealing pro-life policies of the Reagan and Bush administrations. Later, Mr. Clinton remained a strong advocate of the Freedom of Choice Act, although it eventually died in Congress. He attempted to get the Hyde Amendment repealed, which would have allowed taxpayer funding of abortion on demand.

"And the big one was that abortion be a part of health care reform," Mr. Smith said. "I think that helped kill health care reform. This administration has been pro-abortion since Day 1."

News reports are sketchy about how Dr. Foster was chosen, and how President Clinton reacted to the firestorm. *Time* magazine reported that President Clinton knew all along that Dr. Foster had performed abortions; he just underestimated the reaction of the Republicans. Later, during a staff meeting, the president demanded of his staff, "How do I answer the question that either this guy is lying, or I've got an incredibly inept White House staff?" He chose to blame the staff and stick by his nominee. But others say the correct answer was 'C' None of the Above.

'Staff error is an easy excuse,' contended *The Washington Post*'s Charles Krauthammer last week. "The deeper problem is that the Clinton White House inhabits an ideological milieu in which the views of former civil rights nominee Lani Guinier and (former Surgeon General Joycelyn) Elders are considered mainstream and moral alarm at abortion is considered alien."

If the White House was unprepared for this fight, that's simply more evidence that the administration is out of touch with mainstream Americans, says Mr. Smith.

"It's not even in Washington itself that you see the insularity," Mr. Smith said. "It's within the Clinton White House and administration. They believe they're mainstream and they express shock and alarm when the real world finds out that one of their people advocates these radical policies. There are pockets of realism in Washington where people understand how radical some of these policies are, but the White House doesn't expose itself to those."

Trouble with Dr. Foster emerged when Sen. Nancy Kassebaum (R-Kan.) asked HHS Secretary Donna Shalala if the new nominee had performed abortions. Ms. Shalala answered "one." The number later rose to "less than a dozen," then 39 when Foster was confronted on ABC's *Nightline*.

But on that program, he admitted that an early 1980s study he directed tested an abortion-causing drug—that made the number even higher. Now, some pro-life groups have pushed the number to "700—and the White House has had trouble explaining that.

Mr. Smith says those numbers—while they remain lightning rods—aren't as important as the underlying philosophies.

"The problem isn't just [whether he's] qualified to be surgeon general. Instead, [on a] wide range of issues," he said. "It's all about a world view he advocates, which the administration shares, which he would vigorously pursue. He believes that 'safe sex' is the proper message, that abortion is necessary—all of this means that he would be another Joycelyn Elders, a divisive factor in the nation and will fail to be a good surgeon general by definition."

In fact, the recent firestorm has even cost Foster a bill in the House that would abolish the position of Surgeon General entirely.

As a side note, columnist George Will questioned Dr. Elders on a Sunday morning talk show. He asked whether a pediatrician would be qualified to be surgeon general. After all, he said, smoking is [illegible] abortion. Dr. Elders countered that, unlike abortion, smoking is a "destructive" action.

Enthusiastic support: *Pastor of a Nashville church applauds a speaker at a pro-Foster rally Friday.*

PAUL GREENBERG

Washington Times 2-19-95 B-1

By the standards of our times

First, a cautionary tale. The story came out last weekend and, if it made your paper at all, was probably buried inside. Here in Little Rock, it appeared on Page 7A under the headline "Six Japanese tell of WWII research, including dissections of live humans."

It seems that 50 years after the end of World War II, a 74-page book has been published about a biological warfare unit of the Japanese army that performed experiments on human subjects. In exchange for not having to face war-crimes trials, six members of Unit 731 detailed its activities in Manchuria, where they injected germs, chemicals and gangrene-inducing shrapnel into humans to study the effects. At least 3,000 people from China, Russia, Korea and Mongolia were subjected to these experiments. "Sometimes dissections were carried out without anesthesia," according to one former member of the unit. "They would let out a horrible shriek but then fall silent right away."

Surely somewhere in the Imperial War Office the activities of Unit 731 were duly logged, explained and euphemized as scientific research. Just as in Berlin, similar assignments on a massive scale were to be described as population transfers. It was all in accordance with accepted policy and current regulations. Everything was legal. All the papers were in order. Long after the war, the noted intellectual Hannah Arendt attended the trial of Adolf Eichmann in Jerusalem. Here was her opportunity to look into the very heart of darkness. All she found was an upwardly mobile, lower-middle-class ex-salesman who had hit upon a successful career in political administration. Her discovery profoundly insulted many who preferred to think that Evil wears red socks, smells of fire and brimstone and is immediately identifiable. Instead, Hannah Arendt had identified its most salient characteristic in this technolo[illegible]nced century. She called it the Banality of Evil.



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In 1995, elective abortion is both accepted policy and the law of the land. Yet the nomination of Henry Foster, M.D., as surgeon general of the United States has stirred questions about this perfectly legal, constitutional procedure. It seems some Americans are still uncomfortable about the widespread practice of abortion, including Dr. Foster, who says he finds it "abhorrent."

The debate over his confirmation, he adds, is ironic, since "my life's work has been de[illegible]ted to making sure that [illegible]eople don't have to fac[illegible]ice of abortions." The doctor points out that he has performed fewer than a dozen abortions, or rather only 39, during a long, 38-year career in medicine, and these principally for therapeutic reasons. So what's all the fuss about?

But the latest Authorized Version of the number of abortions performed by Dr. Foster doesn't include those in a drug trial of a vaginal suppository that induced abortions in 55 of the 60 women to whom it was given for no clear therapeutic reason. If he found abortion abhorrent, why did he supervise this test at Meharry Medical School?

Dr. Foster explained why in a televised interview last week: "To keep my veracity. We are in a medical setting. We had a research grant. We have to do that to train our residents. We were in a multi-center study with the Upjohn Co., and we tested a product, a suppository, not a mechanical procedure, to train residents. That's a part of keeping our program accredited, and at that time, and, like now, 20 percent of all universities survive on grant funds. That was a grant."

Dr. Foster has made it clear how a physician, and not just a physician, can be induced to do something he finds personally abhorrent: Use a chemical agent instead of a mechanical procedure, ensuring the key element in carrying out any morally dubious policy — distance. Call it reproductive health care. Do it in the name of scientific research. Or grantsmanship. Or accreditation. Do it for the unit, the team or, in this case, the school. Depersonalize the decision. Keep telling yourself it is all legal, constitutional, etc.

Dr. Foster also participated in the sterilization of mentally retarded women at a Tuskegee hospital in the 1970s — in order, he wrote at the time, to obtain "significant hygienic benefits to these severely handicapped individuals." The procedure has since been mercifully abandoned, but Dr. Foster was not doing anything illegal or unconstitutional. ("A White House official said Saturday [Feb. 11] that Foster was very much in the mainstream of medical practice at the time he performed those hysterectomies." — Robin Toner in the New York Times.)

Indeed, Dr. Foster's long and distinguished career would seem to conform admirably to the medical, social, legal and constitutional standards of our times. There is nothing in his record that violates official policy. When it comes to his performing abortions, as the good doctor noted the other day, his "patient records and operative logs" are all in order.

One hopes that all the support for Dr. Foster out of the White House does not turn out to be the usual prelude to a cave in, and that Henry Foster — unlike Lani Guinier — will get his day in front of a congressional committee. By now the doctor may have been sufficiently sensitized by this arduous process of confirmation to make a good surgeon general. His statements against abortion and in favor of sexual abstinence for teen-agers would seem to make eminently good sense, socially and morally. Like old Noah in the Book of Genesis, he seems a righteous man *in his generation*.

The hearings on Dr. Henry Foster's nomination offer the American people something more important than an opportunity to judge his fitness for high office. Confirmation hearings can be about a lot more than confirmation. They offer an opportunity to explore the medical, social, legal and constitutional standards that have shaped his and all of our attitudes on matters of life and death, science and morality. The hearings could even offer a clear look at the banality of evil. It would be interesting to see how many of our distinguished leaders could recognize it.

Paul Greenberg is editorial page editor of the Arkansas Democrat-Gazette in Little Rock and a nationally syndicated columnist.

Foster hearings not likely before May

Senate panel still needs documents

By Paul Bedard
THE WASHINGTON TIMES

The sidelined confirmation hearings for embattled surgeon general nominee Henry Foster Jr. will be delayed until May because the administration has failed to promptly turn over records of the gynecologist's private practice and teen-pregnancy program, according to Senate aides.

Investigators on the Senate Labor and Human Resources Committee said that while the White House has provided many of the hundreds of documents sought by the panel, it has been slow to deliver key background reports.

"If the White House doesn't cooperate, then we won't hold hearings. We hold the trump card," said Mike Horak, spokesman for Sen. Nancy Landon Kassebaum, Kansas Republican and chairman of the committee.

A White House spokeswoman, however, said the administration had turned over every item sought by the committee. "All of the information should be there. ... We have actively and vigorously cooperated. We're interested in having hearings soon," the spokeswoman said.

Aides to Senate Republicans opposed to Dr. Foster's nomination have accused the White House of stonewalling the panel's investigators, but Mr. Horak conceded that the White House has cooperated somewhat.

Mrs. Kassebaum, however, won't schedule confirmation hearings for the Nashville doctor until her committee receives information in three critical areas:

• Financial disclosure. The White House in its FBI background investigation provided massive amounts of financial information, but the committee wants it in a different form.

• Private practice. The committee is still seeking details on Dr. Foster's involvement in abortions. He has given widely differing accounts of the number of abortions he has performed. It also is seeking information about his involvement in a study to develop an abortion pill and his knowledge of a syphilis study while he was a doctor at Tuskeegee Institute in Alabama.

• His "I Have a Future" teen-pregnancy-prevention program. The committee is seeking documentation to back up Dr. Foster's contention that the program he started while a department head at Nashville's Meharry Medical Col-

see FOSTER, page A11

• GOP congressman says Clinton is playing games with records on Mexican bailout plan. A12

WASH POST A2 3-17

Foster Vows to Become Surgeon General

By John Schwartz
Washington Post Staff Writer

Pledging to fight for and win the job of surgeon general, Henry W. Foster Jr. yesterday defended his record and attacked critics he called "extremists."

Speaking to the National Newspaper Publishers Association, a coalition of African American publications, Foster said recent attacks portraying him as an abortionist make a mockery of his record as a gynecologist, educator and public health official. "As your surgeon general—which I will be—I will do my part to raise the health status of all Americans," he said, "especially those who for too long have not gotten the health care they need."

Despite Foster's confident tone, his nomination is adrift. The Senate Labor and Human Resources Committee has postponed hearings, possibly until May. And Senate Republican leaders have said they might not bring the nomination to the floor for a vote.

Foster has been attacked for having performed abortions during his career and for his initially inconsistent responses to questions about how many he had performed. Opponents have said Foster's credibility is in question.

But yesterday's speech showed no sign of surrender. Foster talked about his upbringing in Pine Bluff, Ark., his medical education at the University of Arkansas and his work to ensure adequate health care for the poor and minorities, first in Tuskegee, Ala., and later at Meharry Medical College in Nashville.

In a brief question-and-answer session following his prepared remarks, Foster was asked whether the opposition to his nomination was part of a systematic attack on minority appointees. "That's an excellent question," Foster said. He reminded the audience that President Clinton has nominated more nonwhite officials than had any previous administration. He added, "I cannot say that there is an orchestrated effort to pick out minorities [for attack], but I can tell you it certainly looks fishy."

Noting that abortion is "a legal procedure," Foster said antiabortion activists "want to turn the clock back" and "want to see criminalized the right of American women to choose."

In a February talk at a Nashville church, Foster called his opponents "white right-wing extremists." Clarifying the point yesterday, Foster said, " 'White' was a slip, clear and simple—but I do not back away from that with respect to 'extremists.' "

Foster ays race plays part in attacks

Finds pattern in opposition

By Lisa Nevans
THE WASHINGTON TIMES

Surgeon general nominee Dr. Henry W. Foster Jr. said yesterday that there is something "fishy" about attacks on minorities in the Clinton administration, again raising the issue of race in his nomination fight.

"I can categorically say that minorities are certainly being attacked," Dr. Foster said at a Black Press of America lunch held by the National Newspaper Publishers Association.

"I cannot say that there's an orchestrated effort to pick out minorities, but I can tell you it certainly looks fishy."

The comments marked the second time recently that the 61-year-old obstetrician-gynecologist cited race in his fight for confirmation.

Last month Dr. Foster said "white right-wing extremists" were trying to thwart his nomination to advance a "radical" agenda.

At the time, White House spokesman Michael McCurry said Dr. Foster's use of the word "white" was a slip of the tongue. The spokesman accused Republicans of planning to use the race issue to win white votes.

The White House had no immediate response about Dr. Foster's comments yesterday.

Dr. Foster responded to a ques-

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FOSTER

From page A1

tion at the lunch about attacks on minorities by saying President Clinton, "more than any other, has brought diversity to his administration."

Pro-life groups and conservative lawmakers have criticized Dr Foster for performing hysterectomies on severely retarded women and for doing abortions in the past He and the White House have given several different tallies of the number of abortions he has performed.

Questions also have been raised about when Dr. Foster learned of a government study that left black men with syphilis untreated. Dr. Foster was vice president of the Macon County Medical Society in Alabama when it was briefed on the U.S. Public Health Service's Tuskegee Project on May 19, 1969.

Dr. Luther McRae, who was president of the society, has said he will testify that Dr. Foster knew about the study.

After his speech yesterday, Dr Foster said his use of "white" last month was a slip, but he refused to back off the characterization of his foes as extremists.

"I know there is an agenda by a significant minority who want to turn the clock back, who want to see criminalized the right of a woman to choose," he said, noting that abortion is legal. "That's what this is all about."

Kristi Hamrick, spokeswoman for the Family Research Council, called Dr. Foster's views "extreme" and said he is raising the race issue to "avoid dealing with the problems of his own record."

"One of our concerns with this nominee is his judgment What would he do with the bully pulpit?" Mrs. Hamrick said "The fact he starts raising the race card makes us wonder."

Several minority nominees and administration officials have run into trouble in the past two years:

- Law professor Lani Guinier withdrew her name for a key Justice Department post after coming under fire for her writings on civil rights.
- D.C. Corporation Counsel John Payton withdrew his name for the same Justice post after the Congressional Black Caucus complained that he had not voted in recent elections.
- Agriculture Secretary Mike Espy resigned after he became the target of an independent-counsel investigation into alleged ethical improprieties
- Surgeon General Joycelyn Elders, a frequent target of conservative groups, was fired over her suggestion that schoolchildren be taught about masturbation
- And this week, Attorney General Janet Reno requested an independent-counsel investigation of Henry Cisneros, the secretary of housing and urban development and the highest-ranking Hispanic in the administration.

The Rev. Jesse Jackson, who delivered an invocation yesterday, praised Dr. Foster, former acting president of Meharry Medical College in Nashville, Tenn., as "an esteemed medical doctor and a man of integrity."

"Dr. Foster, let nothing break your spirit," Mr. Jackson said.

If the Foster nomination fails, the civil rights leader said, it will show that black men live under a "glass ceiling" lower than the one blocking the career advancement of white women.

In his speech, Dr. Foster defended his record, saying his life has been devoted to bringing healthy babies into the world and bettering the health of poor people and those in rural areas.

When people ask why he wants to be surgeon general, Dr. Foster said, he replies: "When you have the good fortune to participate in the miracle of life, it is difficult to stand and watch on the sidelines so many waste the gift of God. It is difficult to see so much suffering because of lack of prevention, quality health care and the values that prevent things from taking place in the first place."

He noted that President Bush recognized his Nashville program to prevent teen pregnancy as a "point of light."

> ***"I can categorically say that minorities are certainly being attacked."***
>
> *— Dr. Henry Foster*

Dr. Foster also spoke of a program he developed in Tuskegee to combat infant and maternal mortality by putting teams of doctors, nurses, dentists, social workers and nutritionists on buses to go to rural women who would not come to clinics.

Many of the women had never seen a doctor, he said, and infant and maternal mortality dropped because of the program. "Now that's the Tuskegee story that Henry Foster was involved in," he said.

Dr. Foster said he was "incredulous" upon learning of the Tuskegee Project on syphilis from newspaper reporters in 1972 when he became president of the Macon County Medical Society. He added that he immediately began work on a plan to identify the men so they could be treated.

He characterized his nomination battle as "the fight of my life," but he added, "My fight is no tougher than the fight to improve the health of all Americans and give our young people a future."

WASH TIMES 3-10 A19

PAUL GREENBERG

A man of our changing times?

Many of us would like to give the Clinton administration's latest nominee for surgeon general the benefit of the doubt. Only the doubts keep multiplying, and the benefit gets harder and harder to give Henry W. Foster Jr., M.D., a man of his unthinking times.

This nomination was already troubled by various inconsistencies in the doctor's statements. For example, it wasn't easy to pin down the number of abortions he had performed or why.

It also turns out that, back in the 1970s, Dr. Foster took part in the sterilization of mentally retarded women. It's hard to imagine how the retarded could give any kind of informed consent to such a procedure, but the practice was acceptable then. Indeed, as the White House would put it, the doctor was "very much in the mainstream of medical practice at the time he performed those hysterectomies."

The doctor now is said to have been connected with another mainstream scandal in the history of American medicine: The Tuskegee Project. This was a study of 400 black men who were known to have syphilis — but showed no symptoms of it — when the U.S. Public Health Service began the project in 1932. The men were not treated for the disease so their long-term health could be compared with that of a control group — 200 black men free of the disease. The object of the experiment was to see if it was worthwhile to treat latent syphilis with the ineffective means then available.

But by the 1960s, penicillin — an effective treatment — had been available for decades. Nevertheless, this cruel study was continued, and the 400 subjects remained untreated, incredible as that decision may seem today. The Public Health Service even enlisted the cooperation of local physicians in the project, doubtless to give itself some cover. Doctors from the Public Health Service met with the Macon County Medical Society (Henry Foster, vice president) on May 19, 1969, and persuaded the local physicians not to help some 90 surviving patients should they show up seeking treatment.

Accounts of the meeting in 1969 differ. Dr. Foster says he didn't learn of the experiment till 1972, when it came to light and provoked national outrage. "Had I learned the facts of the study any earlier," says Dr. Foster, "I would have been equally outraged then." The doctor says he can't remember attending that meeting in 1969, although a colleague — Luther McRae, now practicing in Georgia — puts him there. "There weren't too many of us," recalls Dr. McRae. "There were about three members who didn't show. I remember where Dr. Foster sat. I was at the end of the table, and to my left he was sitting two or three chairs down."

That is what may be most disturbing about his nomination: He never seems to have practiced ethics prematurely. He was always in lockstep with the conventional morality, whatever it was at the time.

Maybe you had to be there to understand. Or maybe not be there. Luther McRae could be mistaken about Dr. Foster's having attended the meeting, or maybe Dr. Foster wasn't paying attention. It is hard to believe that the vice president of a medical society in a small Southern town would never hear about such a vast, and revelatory, from the Public Health Service. Then again, this experiment was in the mainstream of research in the '30s, just as hysterectomies for the retarded were in the '70s, and abortion is now.

Far from violating the medical ethics of his time, Henry Foster seems to have personified them through a long and distinguished career. That is what may be most disturbing about his nomination: He never seems to have practiced ethics prematurely. He was always in lockstep with the conventional morality, whatever it was at the time. Just as he is now. Unfortunately, conventional morality is not the same thing as morality, any more than the conventional wisdom is wisdom. Even in human affairs, some things are beyond time and fashion.

Dr. Foster is frighteningly typical of medical ethics in the 20th century, and not just the medical kind. Sterilization of the mentally retarded, experiments in abortion, the infamous Tuskegee Project ... The man seems to have been connected in some way with them all. Even if he doesn't remember them very clearly now.

Naturally such a physician would be connected with eugenics, too. In the transcript of a 1978 discussion in which Dr. Foster uses still another figure for the total number of abortions he has performed ("I have done a lot of emergencies and therapeutic abortions, probably near 700") he is also quoted as approving research on human embryos. ("Well, if we have sperm that are not used for insemination, they could be used for research.")

There's an awful lot of smoke surrounding Dr. Foster's career and his candor about it for there to be no fire. A full hearing on his nomination is very much needed. It could even prove a great national education — not so much about whether another political appointment should be confirmed, but about something much more important: The elasticity of ethics in our quickly changing times.

A detailed look at the rise of Henry W. Foster Jr. might encourage some introspection on the part of the rest of us, or even inspire the question: What practices do we commonly accept in 1995 that some future, better age will look back on with horror and disbelief? Just as we now view the Tuskegee Project or the sterilization of the retarded.

We are so much creatures of our times that it may not be easy to tell what will shock a future generation, but there might be a hint in the approximately 1,700,000 abortions performed in this country every year.

Paul Greenberg is editorial page editor of the Arkansas Democrat Gazette in Little Rock and a nationally syndicated columnist.

WASH TIMES 3-7 A6

Foster wants blacks to learn proper English

Dr. Henry Foster, President Clinton's nominee to be surgeon general, said yesterday urban black teen-agers should be encouraged to become proficient in English and have access to contraceptives to prevent pregnancies.

"They must learn a second language: English," Dr. Foster said at a lecture at the National Children's Hospital, where he was joined by a group of former students in a show of support for his nomination.

Dr. Foster is a former acting president of Meharry Medical College in Nashville, Tenn., one of the few historically black medical schools in the country. Conservatives and abortion opponents have criticized his selection to become surgeon general because he supports abortion rights and giving condoms to young people.

NATION

Focus on Foster endangers Planned Parenthood funds

By Joyce Price
THE WASHINGTON TIMES

When President Clinton presented to the press Dr. Henry W. Foster Jr., his choice for surgeon general, he did not mention the Nashville doctor's ties to a pro-choice organization on the front lines of the fight over abortion.

Neither Dr. Foster, in his remarks Feb. 3, nor the biography issued by the White House, referred to his connection to the Planned Parenthood Federation of America (PPFA).

The obstetrician-gynecologist's ties — as a former member of the Planned Parenthood board of directors — helped spark a heated confirmation battle.

And the ensuing challenge to Dr. Foster by pro-life, pro-family and some religious groups also has been an assault on Planned Parenthood.

As surgeon general, Dr. Foster would be a "functionary of Planned Parenthood," grumbled Marshall Wittmann, legislative affairs director of the Christian Coalition.

Dr. Bernard Nathanson, an obstetrician-gynecologist and bioethics specialist in New York, summarized the opposition this way: "Planned Parenthood is the biggest purveyor of abortion promotion in this country, and they have so much money, they've taken the lead in advancing every proposal that's pro-choice."

Dr. Nathanson was a founder of the National Abortion Rights Action League before he became an abortion opponent in the 1970s.

"My best enemy and yours got rich [at Planned Parenthood] and they are so polarized as both sides that they enjoy a tenth-profit] tax-exempt status," he said.

Conservative hatred for Planned Parenthood has been building for many years.

According to Dr. Nathanson, it's a hatred based on Planned Parenthood's support for what its critics call "abortion on demand", its push to make birth control widely available for everyone, including unmarried minors, the political and media influence it enjoys, its support for sex education for children in grades kindergarten through 12, and the large amount of government funding it receives.

"People get very upset when they find out the government pays for 44 percent of Planned Parenthood's budget," said Jim Sedlak, president of a group called Stop Planned Parenthood International, taking his figures from PPFA's 1994 annual report.

Planned Parenthood recognizes the public funding it receives could be reduced as a result of health care system changes underway at the state level and a Republican-controlled Congress.

PPFA has introduced a "reinvention plan" that would require many of Planned Parenthood's 915 clinics to offer primary care services as well as reproductive health services.

"Planned Parenthood is the largest provider of abortion in America, and providing other services is not going to change that," said Michele Arocha Alton, spokeswoman for the National Right to Life Committee.

"Abortion on demand" is "an extremely politicized way" to describe what Planned Parenthood stands for, says PPFA spokeswoman Mona Miller. "We believe a woman has the right to terminate a pregnancy when or if she wants to," she said, adding:

"We do far more to prevent approximately 270,000 abortions [yearly] through contraceptive services and abortion counseling."

But because PPFA believes everyone should have the right to "reproductive self-determination" regardless of age or marital status," Planned Parenthood is willing to give minors contraceptives and even abortions without parental notification or consent, unless required by state law.

Planned Parenthood clinics perform between 130,000 and 134,000 abortions in the United States yearly — and at least another 6,000 elsewhere in the world, according to PPFA's reports.

Most of PPFA's clinics do not offer abortion, but all provide contraceptives. In 1993, Planned Parenthood affiliates provided services to nearly 2.4 million Americans, with 1.9 million receiving contraceptives, according to the annual report.

Close to two-thirds of patients seeking abortions and three-quarters of those seeking contraception at Planned Parenthood are below the poverty level, the organization says.

Mr. Sedlak said PPFA's abortion business is one of the "primary reasons" people join his group.

"Parents also get upset when they find out a 13-year-old girl could go to a Planned Parenthood clinic and get Norplant if she says she's sexually active," he said.

Ms. Miller confirmed that a teen could obtain an abortion in a Planned Parenthood clinic without her parents' knowledge, if there was no law in that state requiring parental notification or consent.

Critics say Planned Parenthood fights every effort to put even the slightest restrictions on abortion. The Brockport (Mass.) Enterprise reported on March 24, 1989, "even diehard liberals like Harvard Law Professor Alan Dershowitz find it difficult to support the latest position adopted by the Planned Parenthood League of Massachusetts, which is opposing a bill making 'gender-based' abortions illegal."

Mr. Sedlak said sales of birth control pills provide big profits for PPFA. "Planned Parenthood sells a month's supply of pills for $9, but as a tax-exempt, nonprofit organization, they pay about $1," he said.

"So their birth control pill sales provide $65 million to $70 million of profit," he added.

Ms. Miller of PPFA acknowledged the organization gets a break on the price it pays for the pill but refused to provide further information.

PLANNED PARENTHOOD'S MISSION

This statement of mission was adopted by the organization in 1964:

Planned Parenthood believes in the fundamental right of each individual, throughout the world, to manage his or her fertility, regardless of the individual's income, marital status, age, national origin or residence.

We believe that reproductive self-determination must be voluntary and preserve the individual's right to privacy.

We further believe that such self-determination will contribute to an enhancement of the quality of life, strong family relationships and population stability.

Based on these beliefs, the mission of Planned Parenthood is:

- To provide comprehensive reproductive and complementary health care services in settings that preserve and protect the essential privacy and rights of each individual.
- To advocate public policies that guarantee these rights and ensure access to such services.
- To provide educational programs that enhance understanding of individual and societal implications of human sexuality.
- To promote research and the advancement of technology in reproductive health care and encourage understanding of their inherent bioethical, behavioral and social implications.

The Washington Times

PLANNED PARENTHOOD AT WORK

Planned Parenthood clinics performed 130,277 abortions in 1992. Percentage of patients by age:

17 and under	18-19	20-24	25-29	30-34	35 and older
9.8	13.6	35.4	21.4	12.2	7.6

More than 1.9 million women received contraceptive services at Planned Parenthood clinics in 1992. Percentage of patients by age:

17 and under	18-19	20-24	25-29	30-34	35 and older
12	14.2	37.7	20.2	9.8	6.1

Planned Parenthood services for teens include birth control, testing for sexually transmitted diseases, counseling and outreach. Number of teens and preteens served in 1992:

10-14	15-17	18-19
24,283	200,000	261,000

Funding received by Planned Parenthood during the 18 months through June 30:

Source	Amount	% of total revenue
Government grants	$238.2 million	34%
Clinic income	$235.6 million	34%
Private contributions	$174 million	25%
Other	$ 45.9 million	7%
Total	**$693.7 million**	**100%**

Source: Planned Parenthood

The Washington Times

Should Simpson suffer



On-line

Bassett Cherry Bedroom

The Washington Times

*TUESDAY, MARCH 7, 1995 / PAGE A17.

ERIC BREINDEL

Persevering after the latest revelations

Dr. Henry Foster's name was finally submitted to the Senate last week, despite a pre-confirmation ror of a sort that's never before tended the nomination of a sur- on general. Still, President Clin- n seems determined to stand by s nominee, if only to avoid the vac- ation charges hurled at the chief ecutive in the aftermath of the e Baird, Kimba Wood and Lani inner debacles.

Dr. Foster's difficulties, of course, gan with the "revelation" he — e most American obstetricians — s performed abortions.

A decent respect for the sensi- ities of the tens of millions of nericans who oppose abortion on ral grounds might have led the ion administration not to select ob gyn for the surgeon general's st.

And, needless to say, the fact that ither Dr. Foster nor the White use proved able to provide accu- e information as to the number abortions the nominee had per- med — the count went quickly m one to seven to 39 to "perhaps 1" — made matters worse. Sud- ly, credibility was an issue.

Then, last week, reports con- ning Dr. Foster's likely aware- s of the infamous Tuskegee eriment surfaced.

Dr. Foster, it seems — in his acity as vice president of the Macon County (Ga.) Medical iety — was informed about "The kegee Study of Untreated philis in the Negro Male" three rs prior to the Public Health vice's 1972 decision to come n. In that year, Washington nowledged that — since 1932 — sd followed the progress of 400 k men afflicted with syphilis, or, all the while, providing them with penicillin.

Is Dr. Foster — who's taken to blaming his political problems on "white, right-wing extremists" —actually benefiting from a bizarre racial double standard? It would seem so.

Then a physician at Tuskegee, Dr. Foster claims not to have learned about the experiment — one of the darkest chapters in American medical history — before the official story was made public.

But there's exceedingly strong evidence that he was briefed by Public Health Service physicians about the project as early as 1969, along with the other members of the 12-doctor medical society.

The group's president, whom Dr. Foster eventually succeeded, recalls the latter's presence — and even where Dr. Foster sat — at a 1969 meeting during which the Tuskegee disclosures were made.

The point, of course, is that Dr. Foster failed to raise his voice in protest. He didn't initiate the experiment, nor did he take part in it. But his claim to pre-1972 ignorance doesn't stand up under scrutiny.

In this context, it seems reasonable to wonder how a white physician who'd known about the Tuskegee enterprise and had chosen to remain silent would likely fare in a Senate confirmation process.

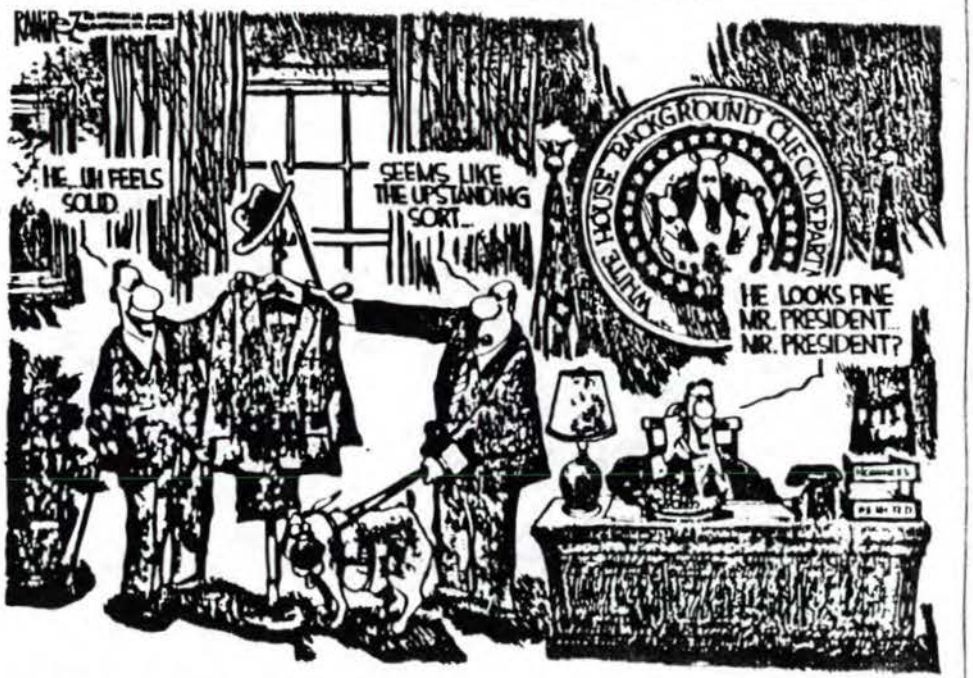
Not well, it's safe to say.

Is Dr. Foster — who's taken to blaming his political problems on "white, right-wing extremists" — actually benefiting from a bizarre racial double standard? It would seem so.

This notion is buttressed by a recently unearthed 1974 article in which Dr. Foster reported that he'd begun performing hysterectomies on severely retarded black women — both in order to sterilize them and for "hygienic" reasons (i.e., to prevent them from having menstrual periods).

There's no evidence Dr. Foster secured consent of any sort from the guardians of the women in question before sterilizing them. And, in fact, the federal government barred the use of public funds for the involuntary sterilization of the mentally retarded the very same year Dr. Foster wrote his article.

While the White House rushed forward with testimony from a Harvard Medical School professor who was willing to judge Dr. Foster's practices "very controversial ... but well within the scope of standard practice at the time," few other doctors have provided even a grudging endorsement. And none excuse Dr. Foster's failure to secure proxy consent.



Here, too, it's safe to say that if Henry Foster were white and had sterilized retarded black women without securing consent from any quarter, the notion that he might be confirmed as surgeon general would be considered preposterous.

The suggestion that involuntary sterilization of the retarded was, in any sense, an accepted practice — even back in 1974 — seems far-fetched. Yes, it was legal. As for representing "mainstream" medical practice, the federal government doesn't generally ban the expenditure of public monies on widely accepted medical procedures.

Those who are unsure about whether, in ordinary circumstances, a nomination akin to this one would succeed can easily test the proposition. Assume that all the facts remain the same — the abortions, the sterilizations and the silence vis-a-vis the Tuskegee experiment — save for Dr. Foster's race. The conclusion is obvious. A white Henry Foster — if, somehow, nominated — would long ago have been forced to withdraw.

At the risk of employing an overused term, the double standard here reeks of racism.

Eric Breindel is the New York Post's editorial editor and a syndicated columnist.