#0196

Karen,
Attached is a copy of a letter that had been sent which you may or may not have received. It contains information about the meeting and possible topics to be covered. If you have any other questions, please call.

Christina

The attached is sent for your information

Tamara will call you tomorrow 1/4.

Christina A. Foley
Program Associate
National Health/
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(202) 822-8405
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Institute for Educational Leadership
1001 Connecticut Avenue, N.W., Suite 310
Washington, D.C. 20036

December 13, 1994

TO: Julie DeMeo (fax: 202/456-2878; phone: 456-2216)
FROM: Tamara Copeland tc
RE: January 10th Presentation by Carol Rasco

As promised, following is a copy of the agenda for the upcoming members' meeting of the National Health & Education Consortium (NHEC). The meeting will be held at the Radisson Barcelo, 2121 P Street, NW (202/293-3100). Carol's presentation should begin a little after 1:00 p.m. following Jack Jennings'. He is scheduled to begin at 12:45 p.m. and, like Carol, was asked to speak for twenty minutes. Will she be willing to respond to questions from the audience? Will Carol be able to join us for lunch? If so, how many staff will accompany her?

Many of our members are interested in learning what health care reform proposals will be put forth next year and in hearing Carol's perspective on how their respective associations may be able to work with the Administration. It would also be helpful to hear Carol's comments on the role of an organization such as NHEC (a membership association representing almost 60 professional membership associations from the health and education fields whose purpose is to bridge the two communities) in assisting and supporting the Administration in moving forward an interdisciplinary, collaborative efforts to address the nation's problems.

As soon as I get a definite number of attendees, I will advise you. Based on past participation, we should have representation from approximately 1/2 to 2/3 of our sixty members. If she would like to provide any materials for the group, please forward them to me a couple of days in advance.

Julie, I will call you in early January to see if you need any further information. I had sent a few of NHEC's publications to your office to give the speechwriter a sense of our work. Let me know if you need to have these sent again.

Would you please fax me whatever introductory remarks Carol would like made or a copy of her bio?

Thanks for your help.

Information following (1)

Institute for Educational Leadership
Suite 310 • 1001 Connecticut Avenue, NW • Washington, DC 20036 • Tel (202) 822-8405 • Fax (202) 872-4050

National Health/Education Consortium Members

- ❑ **American Academy of Family Physicians**: represents 71,000 physicians
- ❑ **American Academy of Pediatrics**: represents 45,000 pediatricians
- ❑ **American Association of Colleges for Teacher Education**: represents 706 member institutions' teacher education programs
- ❑ **American Association of School Administrators**: represents 18,517 school administrators
- ❑ **American College of Nurse-Midwives**: represents 3,500 practicing nurse-midwives
- ❑ **American College of Obstetricians and Gynecologists**: represents 31,000 obstetricians and gynecologists
- ❑ **American Dental Association**: represents 140,000 dentists
- ❑ **American Federation of Teachers**: represents 750,000 teachers, para-professionals (teacher aides), school-related personnel, health-care workers, federal and state employees
- ❑ **American Hospital Association (MCH Section)**: represents 5,870 hospitals and over 50,000 physicians
- ❑ **American Indian Health Care Association**: represents 36 programs and clinics which focus on the health care of American Indians
- ❑ **American Medical Association**: represents 300,000 physicians
- ❑ **American Nurses Association**: represents 201,000 registered nurses
- ❑ **American Public Health Association**: represents 30,977 physicians, nurses, therapists, health technicians, health support personnel, and other health professionals
- ❑ **American School Food Service Association**: represents 65,000 child nutrition and school food service employees
- ❑ **American School Health Association**: represents 4,100 health educators, nurses, physicians and dieticians
- ❑ **American Speech-Language-Hearing Association**: represents 74,000 speech-language pathologists, audiologists, scientists, researchers and educators
- ❑ **Association for the Care of Children's Health**: represents 4,200 nurses, Child Life workers, and parent leaders
- ❑ **Association for Supervision and Curriculum Development**: represents 153,000 teachers, school administrators, college professors and school board members
- ❑ **Association for Women's Health, Obstetric and Neonatal Nurses**: represents 24,700 nurses
- ❑ **Association of American Medical Colleges**: represents 126 U.S. medical schools, 450 teaching hospitals, and 94 academic professional societies
- ❑ **Association of Maternal and Child Health Programs**: represents 269 maternal and child health program directors and staff
- ❑ **Association of Schools of Public Health**: represents 14,500 faculty and students at 26 certified schools of public health

- ❑ **Association of State and Territorial Dental Directors**: represents 44 state dental directors nationwide
- ❑ **Association of State and Territorial Health Officials**: represents 58 health officers from each of the United States and its territories
- ❑ **Council of Chief State School Officers**: represents 56 public officials who head departments of elementary and secondary education in each state and extra-state jurisdiction
- ❑ **The Council of Great City Schools**: represents 47 of the largest urban public school districts in the United States
- ❑ **Healthy Mothers, Healthy Babies Coalition**: represents 95 non-profit health education groups, and state and local education groups
- ❑ **National Alliance of Black School Educators**: represents 4,000 African-American teachers for grades K-12
- ❑ **National Association for Asian & Pacific American Education**: represents approximately 500 educators concerned for the educational well-being of Asian and Pacific American students
- ❑ **National Association for Partners in Education**: represents 55,000 volunteers, presidents and executives of private businesses, teachers and administrators
- ❑ **National Association for the Education of Young Children**: represents nearly 77,000 professionals and others who study or are interested in childhood education and development
- ❑ **National Association of Children's Hospitals and Related Institutions**: represents 108 hospitals
- ❑ **National Association of Community Health Centers**: represents 600 health care facilities
- ❑ **National Association of Elementary School Principals**: represents 36,000 elementary school principals, middle school principals, school superintendents, teachers, professors and instructors
- ❑ **National Association of Hispanic Nurses**: represents 1,000 Hispanic nurses
- ❑ **National Association of Pediatric Nurse Associates and Practitioners**: represents 4,200 pediatric nurse associates and practitioners
- ❑ **National Association of School Nurses, Inc.**: represents 8,000 school nurses
- ❑ **National Association of Secondary School Principals**: represents 41,000 secondary school principals, administrators, guidance counselors, activities directors and college professors
- ❑ **National Association of Social Workers, Inc.**: represents 145,000 professionals and para-professionals in the field of social work
- ❑ **National Association of State Boards of Education**: represents 600 state boards of education and their members
- ❑ **National Association of WIC Directors**: represents 624 state directors, nutrition coordinators, and local agency directors
- ❑ **National Black Nurses Association**: represents 7,000 African-American nurses
- ❑ **National Coalition of Hispanic Health and Human Services Organizations (COSSMHO)**: represents 12,000 organizations serving the Hispanic population, representing Hispanic physicians, nurses and students

- **National Community Education Association**: represents 1,600 teachers, superintendents, administrators, community education directors and coordinators, faculty and administrators of teacher education institutions and programs, community activists, private businesses and state administrators
- **The National Congress of Parents and Teachers (PTA)**: represents 6.8 million parents, K-12 classroom teachers, principals, school administrators and students
- **National Education Association**: represents 2 .1 million K-12 class room teachers, professors, educational support personnel and students
- **National Elementary School Center**: represents 500 educators, pediatricians, social workers, school administrators, and parents
- **National Head Start Association**: represents 150 nationwide agency members and 30 individual members
- **National Indian Education Association**: represents 2,700 individuals dedicated to promoting quality education for American Indian and Alaskan Native people
- **National Medical Association**: represents 16,500 primarily African-American minority physicians
- **National Mental Health Association**: represents 550 local affiliate mental health associations, comprised of mental health care providers and clients, and community mental health centers
- **National Perinatal Association**: represents 6,000 physicians, nurses, nurse-midwives, social workers and consumers of perinatal services
- **National Rural Health Association**: represents 2,000 community, migrant and homeless health centers and their staffs
- **National School Boards Association**: represents 52 state school board associations
- **National School Public Relations Association**: represents 2,200 teachers, principals, administrators, retired teachers, students and public relations personnel
- **Society for Neuroscience**: represents 21,219 neuroscientists
- **Zero to Three (National Center for Clinical Infant Programs)**: Represents 7,500 programs for high risk children and families, as well as individuals

Karen -
This is great. My only "serious" comments are on pp. 3-5. I should be in Room 211. Stop by when you get in or page me and we can talk about them. Thanks - Jen

Remarks By Carol H. Rasco
National Health/Education Consortium Members Meeting
January 10, 1994

Thank you, _____, for that kind introduction. It is wonderful to address the members of all of the important organizations here today that have worked so effectively and diligently to serve our children better by coordinating the health and education services they receive.

A large part of what brings me such pleasure in being here is the fact that we on the White House Domestic Policy Council focus all our work toward the pursuit of a single premise, and that is this: **Every child shall be empowered to develop to his or her full potential throughout life.** And as all of you in this room know, if a child doesn't get a healthy start -- or can't see a doctor when her or she gets sick -- that child is going to be seriously disadvantaged. Likewise, you know that educated children and families are more likely to be healthy children and families. Without the work that <u>you</u> do, we wouldn't be able to do what <u>we</u> do . . . so on behalf of the President and his Administration, I want to thank you for all your efforts.

Children are our most precious natural resource. If we are truly serious about developing a stronger economy, ~~an~~ increased competitiveness, and a life better than our parents and grandparents knew, than we in the United States do not have a single child to waste.

And yet the state in which millions of America's children are living in is grim. During my years as a classroom teacher and elementary counselor in the Arkansas Delta, I had children from homes with dirt floors and outhouses sitting beside children from affluent families and comfortable homes. Through my 20 years of parenting two children, through my more than 15 years working in government, the problems children face have persisted or gotten worse. Teen pregnancy has risen dramatically, more children are being born into poverty, drugs and guns have silently crept their way into schools and neighborhoods and playgrounds.

And if I were to point to the two things that trouble me most in all of this, they would be: **first, an increasing poverty of spirit, particularly among our children; and second, the increasing tendency to deal with individuals, families and communities in a piecemeal fashion -- compartmentalizing different problems and trying to solve them in isolation rather than trying to nourish the whole.**

That is why it is so gratifying for me to able to be here today to speak with the members of an organization founded on the principle that children must be healthy to be educated and must

be educated in order to be healthy. As you recognize, it does no good to look at a child as a health problem and a learning problem and a substance abuse problem and a violence problem that need to be tackled piece by piece. Our nation's children are whole children -- and your organization has reflected that knowledge with great success.

And when you begin to look at the whole picture, the questions before us become quite straightforward: "What supports and opportunities need to be available to help children learn and grow and develop into all they can become?" and "What barriers stand in the way of allowing them to take full advantage of those opportunities?"

Of course, lack of access to needed health care is one such barrier, and many of you in this room joined with us in our attempt to remove that barrier once and for all by guaranteeing all Americans at least a basic package of health benefits. Our nation still faces the enormous problems of increasing health care costs and decreasing coverage. Today, nearly 40 million Americans -- including close to 10 million children -- have no health insurance. The fact that our health care system is among the world's finest is cold comfort to the families who are shut out of the system entirely -- or to the millions more who are just one pink slip or serious illness away from losing their coverage.

And without health care reform, other social reforms become much harder. I first worked on health reform with then-Governor Clinton years before he ever considered running for President as part of our work on the Family Support Act -- a welfare reform proposal. It became very clear to us early on that one of the biggest issues for women getting off welfare was transitional health benefits. ~~And then if they ultimately~~ got a job ~~that~~ didn't give ~~them~~ or ~~their~~ kids any health coverage, it was hard to argue that going back to welfare wasn't a more attractive picture. As you all know there's a lot of interest in welfare reform on Capitol Hill right now, and those issues are bound to emerge.

So while we were of course disappointed that ~~meaningful~~ health care reform did not ~~take place~~ last year, we are pleased that ~~the~~ efforts ~~on behalf of health reform~~ helped lay the groundwork for ~~gradual policy changes that will move us ever closer to that goal.~~ Health care was not just an issue for 1994; it is an issue for the 90s, and there is every reason to believe that starting down the path to full coverage is a goal people from all parties share. The President remains firmly committed to providing insurance coverage for every American and containing health care costs for families, businesses, and federal, state, and local governments. He intends to work with the new Congress to take the first real steps toward achieving these goals. The President

~~healthy minds and bodies, and to maintain the mental alertness necessary to be~~ prepared to learn. Goal Two states that all students should have access to activities that promote good health and to physical and health education. Goal Seven promotes the development of healthy and responsible adults by urging ~~the inclusion of~~ drug and alcohol education ~~in~~ health education ~~curricula~~.

In addition, we reauthorized the Elementary and Secondary Education Act. The Act recognizes the need to attend to the "~~whole child~~," ~~by~~ specifically listing poor nutrition, unsafe living conditions, physical and sexual abuse, family and gang violence, inadequate health care, and substance abuse as factors that impede the academic success of our nation's children. The Act affirms that schools cannot address these threats to children's health and education alone. And it gives schools and local education agencies the resources they need to coordinate their efforts with parents and the community ~~by allowing them to use a portion of the funds they receive under the Elementary and Secondary Education Act to~~ expand or initiate a coordinated service project.

The Administration also undertook the Strong Families/Strong Schools Initiative to encourage and support efforts by families to take a more active role in their children's education. The initiative recognizes that parental involvement will promote better health and better learning. The wisdom of this approach becomes more and more clear every day -- for example, a study released in the September issue of Pediatrics demonstrated that children who spend a good deal of time with their parents are less likely ~~to engage in the self-destructive behaviors of smoking and drinking than are those of their peers who lack close parental contact.~~ Parents are a child's first teacher ~~and~~ can do a tremendous amount to bolster the efforts of all the teachers who come later.

So although health care legislation was not ~~passed~~ last year, it is clear that ~~the health care reform effort has led to~~ progress for school-based and school-linked health and ~~education~~ initiatives -- and progress for the children they serve. I have been proud to be a part of the these and of all of the President's efforts to strengthen families, encourage the values that make them strong, and provide America's children a future filled with opportunity. Knowing that all of you in this audience share that same dream for our nation's children, I would like to touch on just a few more examples of what we are doing to try ~~and~~ make that dream a reality.

* We have begun to put our economic house in order -- reducing the deficit at a rate of nearly $700 billion over 5 years. And over 5 million jobs have been created in the first 21 months of this Administration. And the President's economic plan also

included a billion dollar program to provide an array of supportive services to at-risk families and children designed to help strengthen them and prevent child abuse and neglect.

* We passed the Family and Medical Leave Act, reducing the stress on families by allowing workers to take a little time off to care for a sick child or parent without losing their jobs. Thanks to this law, American workers are no longer forced to choose between their jobs and their families in times of crisis.

* We acted upon the importance of disease prevention for our nation's children by sponsoring and signing the comprehensive Child Immunization Initiative. We've put the WIC nutritional assistance program on a full-funding path so that all eligible children between the ages of one and four can be served. ~~[note: this won't be fully effected until the end of 1996]~~. We've implemented quality improvements in HeadStart that moved this multi-faceted preschool education program into the 21st century. And we initiated the creation of a new program to serve disadvantaged infants and toddlers aged zero to three.

* The President introduced the Work and Responsibility Act -- a tough welfare reform proposal -- which included a national campaign against teen pregnancy, education and training opportunities for young mothers, and the toughest child support enforcement laws ever proposed.

Didn't introduce it yet!?

* And under President Clinton's leadership, the Brady Law and the Violent Crime Control and Law Enforcement Act, the products of more than six years of bipartisan efforts to take back our streets and increase the safety and security of American families, are finally the law of the land. In addition to imposing a waiting period for handgun purchases, adding 100,000 more police to our streets, stiffening penalties for criminals, better assisting victims of domestic violence, and banning military-style assault weapons, the crime bill also invests in important prevention programs aimed at providing kids with the opportunities that will deter them from lives of crime.

It is now a very challenging time for those of us in public life -- Republicans and Democrats alike. It is a time when public servants will have to search for the common ground that brings us together rather than retreat to the divided turf that just pulls us farther apart. It is a time to focus on this nation's future, and to work together to make it as bright and as prosperous as possible for every single American. The President and his Administration know, just as you do, that our children's future is our nation's future. So I want to applaud all of you for the work you've done on behalf of helping children to reach their full potential, and to pledge our continued commitment to joining you in your efforts. Thank you.

continuing urge you to continue to

1 sentence: three effects of the debate that spurred action

and his Administration will work for legislation that includes measures to make coverage more affordable for ~~working families and their~~ children, to assure quality and efficiency in the Medicare and Medicaid programs, to address the unfairness in the insurance market, and to reduce the long-term federal deficit. We hope that we may count on the continued support of all of you as we work to achieve meaningful and lasting health care reform.

And I want you to know that for all the hoopla about the death of health care reform in the last Congress, much of what did get accomplished and much of what did come out of the health care debate has great implications for improving the health and welfare of America's children.

First, the ~~national~~ health care debate was a catalyst for health care reforms undertaken by individual states, and it

Let's talk about this -- not all of the achievements are due to debate. I think it may be insulting to say that about e.g. IDEA. May want to break it into 2 parts (1) spurred by debate

~~Next, the health care reform process~~ (the) involved promoting the health and education of children forged a solid and permanent partnership among federal agencies, ~~especially between the Departments of Education~~ and Health and Human Services, ~~to work together in identifying~~ the health and education needs of ~~children~~ -- a partnership that has never before existed. INSERT 4

Third, the visibility of the issue of school health increased dramatically during (the) health care reform (debate) ~~efforts~~. Nearly 48 million children attend elementary and high schools each day in the United States. As you (well) know, schools are on the front line and have a major influence on our children's psychological, intellectual, and social growth. Schools in many communities have had to expand their role well beyond the "three Rs" and (they take on) ~~assume~~ a variety of health and social service functions: providing health care and referrals, mental health counselling, nutrition services, ~~and~~ health education, ~~and coordinating~~ (and coordinate) with child abuse, welfare, and juvenile justice agencies, ~~to serve their students' needs. Thanks in large part to your efforts, the role of school-linked and school-based health services in providing health care to children has become more widely recognized. And the importance of the link between health and education and the role of schools in the development of healthy children is reflected in the legislative and administrative achievements of the Clinton Administration.~~

Schools have had to coordinate their activities

I think this is OK but could you just tell me what you'd mean?

Put and (2) other Clinton achievements

In some states, the state-level reforms I mentioned have included expanding school health programs and exploring Medicaid's role in financing health services delivered in school-linked or school-based centers. The Clinton Administration's Interagency Committee on School Health is actively facilitating this exploration and working to identify barriers between state and federal governments and between schools and providers that may be hindering this process.

The Interagency Committee on School Health is a prime example of

Also, the next 2 pages are very dense. Need to make it more easy to read/hear in a speech.

~~The~~ second ~~best~~ important result of the health care debate — the formation of new partnerships to better serve our children

~~the partnerships that have now formed within the Administration to better serve our children.~~ The Interagency Committee includes the Departments of Education, Health and Human Services, and Agriculture, which administers the food stamp and federal school lunch programs. ~~The Committee is chaired jointly by Assistant Secretaries within the three departments.~~

The mission of the Interagency Committee on School Health is to increase the overall effectiveness of ~~federal efforts to improve the education and health of school-aged children and youth through~~ school health programs. The Committee serves as the vehicle for the discussions about school health that began as a direct result of the health care debate. Through the Committee, the three agencies work to improve collaboration at the federal, state and local levels ~~and to~~ clearing away barriers in the Medicaid and other programs that are interfering with efforts to improve health care delivery to our children. (Together, they are)

Another example of the new interagency cooperation is the National Coordinating Committee on School Health. This committee includes representatives not only from federal agencies but also from national health and education organizations -- including, not surprisingly, the National Health/Education Consortium. (about) Through the committee, members have informal discussions ~~that help the agencies and the organizations understand each other's perspectives on~~ how best to achieved their shared goal of promoting the health and education of our nation's children ~~through school-based and school-linked programs.~~ As a result, private-public collaboration and cooperation has been strengthened.

The new partnership between the Departments of Health and Human Services (and Education) is illustrated by the unprecedented Joint Statement on School Health issued by (the) Secretary ~~of Education Richard Riley and Secretary of Health and Human Services~~ Donna Shalala. The statement embraces the fundamental relationship between education and health ~~and~~ (&) acknowledges the role of school health programs in helping students develop the knowledge, attitudes and behaviors that they need to succeed in school. And the statement recognizes that schools must have the support of ~~public and private~~ health care providers, communities, and families before they can fulfill their critical role in the preparation of our children for ~~productive, responsible, and fulfilling~~ futures. (the)

~~We are proud to have acted on the ideals set forth in the Joint Statement on School Health.~~ We passed sweeping national education reform legislation, the Goals 2000: Educate America Act, last spring. The role of health and physical education are recognized within several of the Act's National Education Goals. For example, Goal One states as one of its objectives that "children will receive the nutrition, physical activity experiences, and health care ~~needed to arrive at schools with~~ (they need to arrive at school)

INSERT B

Karen -
Page me and I'll
explain. Jen

Remarks By Carol H. Rasco
National Health/Education Consortium Members Meeting
January 10, 1994

Are you going to fill this in for her?

Thank you, [redacted] for that kind introduction. It is wonderful to address the members of all of the important organizations here today that have worked so effectively and diligently to serve our children better by coordinating the health and education services they receive.

A large part of what brings me such pleasure in being here is the fact that we on the White House Domestic Policy Council focus all our work toward the pursuit of a single premise, and that is this: **Every child shall be empowered to develop to his or her full potential throughout life.** And as all of you in this room know, if a child doesn't get a healthy start -- or can't see a doctor when her or she gets sick -- that child is going to be seriously disadvantaged. Likewise, you know that educated children and families are more likely to be healthy children and families. Without the work that you do, we wouldn't be able to do what we do . . . so on behalf of the President and his Administration, I want to thank you for all your efforts.

Children are our most precious natural resource. If we are truly serious about developing a stronger economy, increased competitiveness, and a life better than our parents and grandparents knew, then we in the United States do not have a single child to waste.

And yet the state in which millions of America's children are living in is grim. During my years as a classroom teacher and elementary counselor in the Arkansas Delta, I had children from homes with dirt floors and outhouses sitting beside children from affluent families and comfortable homes. Through my 20 years of parenting two children, through my more than 15 years working in government, the problems children face have persisted or gotten worse. Teen pregnancy has risen dramatically, more children are being born into poverty, drugs and guns have silently crept their way into schools and neighborhoods and playgrounds.

And if I were to point to the two things that trouble me most in all of this, they would be: **first, an increasing poverty of spirit, particularly among our children; and second, the increasing tendency to deal with individuals, families and communities in a piecemeal fashion -- compartmentalizing different problems and trying to solve them in isolation rather than trying to nourish the whole.**

That is why it is so gratifying for me to able to be here today to speak with the members of an organization founded on the principle that children must be healthy to be educated and must

be educated in order to be healthy. As you recognize, it does no good to look at a child as a health problem and a learning problem and a substance abuse problem and a violence problem that need to be tackled piece by piece. Our nation's children are whole children -- and your organization has reflected that knowledge with great success.

And when you begin to look at the whole picture, the questions before us become quite straightforward: "What supports and opportunities need to be available to help children learn and grow and develop into all they can become?" and "What barriers stand in the way of allowing them to take full advantage of those opportunities?"

Of course, lack of access to needed health care is one such barrier, and many of you in this room joined with us in our attempt to remove that barrier once and for all by guaranteeing all Americans ~~at least a basic package of health benefits~~ health security. Our nation still faces the enormous problems of increasing health care costs and decreasing coverage. Today, nearly 40 million Americans -- including close to 10 million children -- have no health insurance. The fact that our health care system is among the world's finest is cold comfort to the families who are shut out of the system entirely -- or to the millions more who are just one pink slip or serious illness away from losing their coverage.

And without health care reform, other social reforms become much harder. I first worked on health reform with then-Governor Clinton years before he ever considered running for President as part of our work on the Family Support Act -- a welfare reform proposal. It became very clear to us early on that one of the biggest issues for women getting off welfare was transitional health benefits. If a woman ultimately got a job, but that job didn't give her or her kids any health coverage, it was hard to argue that going back to welfare wasn't a more attractive picture. As you all know there's a lot of interest in welfare reform on Capitol Hill right now, and those issues are bound to emerge.

So while we were of course disappointed that health care reform legislation did not pass last year, we are pleased that all of your and our efforts helped lay the groundwork for continuing discussion and meaningful change. Health care was not just an issue for 1994; it is an issue for the 90s, and there is every reason to believe that starting down the path to full coverage is a goal people from all parties share. The President remains firmly committed to providing insurance coverage for every American and containing health care costs for families, businesses, and federal, state, and local governments. He intends to work with the new Congress to take the first real steps toward achieving these goals. The President and his

Administration will work for legislation that includes measures to make coverage more affordable for ~~working families and their~~ children, to assure quality and efficiency in the Medicare and Medicaid programs, to address the unfairness in the insurance market, and to reduce the long-term federal deficit. We hope that we may count on the continued support of all of you as we work to achieve meaningful and lasting health care reform.

And I want you to know that for all the hoopla about the death of health care reform in the last Congress, much of what did get accomplished and much of what did come out of the health care debate has great implications for improving the health and welfare of America's children.

First, the national health care debate was a catalyst for health care reforms undertaken by individual states. Second, it forged a solid and permanent partnership among the federal agencies involved in promoting the health and education of children -- a parternship that never before existed. And third, thanks in large part to your efforts, it increased the visibility of the issue of school health. And outside the health care debate are the Clinton Administration's legislative achievements in the area of education. These achievements demonstrate and understanding of the link we have been discussing between education and health.

I would like to do this here.

In some states, the state-level reforms I mentioned have included exploring Medicaid's role in financing health services delivered in school-linked or school-based centers. The Clinton Administration's Interagency Committee on School Health is actively facilitating ~~this exploration and working to identify barriers that may be hindering~~ this process.

The Interagency Committee on School Health is a prime example of the second important result of the health care debate -- the formation of new interagency partnerships to better serve our children. The Interagency Committee includes the Departments of Education, Health and Human Services, and Agriculture, ~~which administers the food stamp and federal school lunch programs.~~

The mission of the Interagency Committee on School Health is to increase the overall effectiveness of school health programs. The Committee serves as the vehicle for the discussions about school health that began as a direct result of the health care debate. Through the Committee, the three agencies work to improve collaboration at the federal, state and local levels. Together, they are clearing away barriers in the Medicaid and other programs that are interfering with efforts to improve health care delivery to our children.

Another example of the new interagency cooperation is the National Coordinating Committee on School Health. This committee includes representatives not only from federal agencies but also

from national health and education organizations -- including, not surprisingly, the National Health/Education Consortium. Through the committee, members have informal discussions about how best to achieve their shared goal of promoting the health and education of our nation's children. As a result, private-public collaboration and cooperation have been strengthened.

The new partnership between the Departments of Health and Human Services and Education is illustrated by the unprecedented Joint Statement on School Health issued by the Secretaries of both Departments. The statement embraces the fundamental relationship between education and health. It acknowledges the role of school health programs in helping students develop the knowledge, attitudes and behaviors that they need to succeed in school. And the statement recognizes that schools must have the support of health care providers, communities, and families before they can fulfill their critical role in the preparation of our children for the future.

If you leave this third, need transition

Maybe this goes first?

Nearly 48 million children attend elementary and high schools each day in the United States. As you well know, schools are on the front line. They have a major influence on our children's psychological, intellectual, and social growth. Schools in many communities have had to expand their role well beyond the "three Rs" and take on a variety of health and social service functions: providing health care and referrals, mental health counselling, nutrition services, and health education. Schools have had to coordinate their activities with child abuse, welfare, and juvenile justice agencies. The third important achievement of the health care debate for school health is something you all participated in -- the increased recognition of these realities. Those who care about children and health now better understand ~~the role of schools in the development of healthy children.~~

In addition, activity involving the link between education and health has taken place outside the health care debate. For example, the legislation that was passed under the Clinton Adminstration in the area of education addresses the health/education relationship. First, ~~we passed~~ sweeping national education reform legislation, the Goals 2000: Educate America Act, last spring. The role of health and physical education are recognized within several of the Act's National Education Goals. For example, Goal One states as one of its objectives that "children will receive the nutrition, physical activity experiences, and health care" they need to arrive at school prepared to learn. Goal Two states that all students should have access to activities that promote good health and to physical and health education. Goal Seven promotes the development of healthy and responsible adults by urging that drug and alcohol education be a part of health education.

As you know,

In addition, we reauthorized the Elementary and Secondary

Education Act. The Act recognizes the need to attend to the "whole child." It specifically lists poor nutrition, unsafe living conditions, physical and sexual abuse, family and gang violence, inadequate health care, and substance abuse as factors that impede the academic success of our nation's children. The Act affirms that schools cannot address these threats to children's health and education alone. And it gives schools and local education agencies the resources they need to coordinate their efforts with families and the community.

The Administration also undertook the Strong Families/Strong Schools Initiative to encourage and support efforts by families to take a more active role in their children's education. The initiative recognizes that parental involvement will promote better health and better learning. The wisdom of this approach becomes more and more clear every day -- for example, a study released in the September issue of Pediatrics demonstrated that children who spend a good deal of time with their parents are less likely than their peers to engage in certain self-destructive behaviors. Parents are a child's first teacher. They can do a tremendous amount to bolster the efforts of all the teachers who come later.

So although health care legislation was not passed last year, it is clear that there has been progress for school-based and school-linked health and education initiatives -- and progress for the children they serve. I have been proud to be a part of the these and of all of the President's efforts to strengthen families, encourage the values that make them strong, and provide America's children a future filled with opportunity. Knowing that all of you in this audience share that same dream for our nation's children, I would like to touch on just a few more examples of what we are doing to try to make that dream a reality.

* We have ~~begun~~ taken great strides to put our economic house in order -- reducing the deficit at a rate of nearly $700 billion over 5 years. And over 5 million jobs have been created in the first 21 months of this Administration. And the President's economic plan also included a billion dollar program to provide an array of supportive services to at-risk families and children designed to help strengthen them and prevent child abuse and neglect.

* We passed the Family and Medical Leave Act, reducing the stress on families by allowing workers to take a little time off to care for a sick child or parent without losing their jobs. Thanks to this law, American workers are no longer forced to choose between their jobs and their families in times of crisis.

* We acted upon the importance of disease prevention for our nation's children by sponsoring and signing the comprehensive Child Immunization Initiative. We've put the WIC nutritional

assistance program on a full-funding path so that all eligible children between the ages of one and four can be served. We've implemented quality improvements in HeadStart that moved this multi-faceted preschool education program into the 21st century. And we initiated the creation of a new program to serve disadvantaged infants and toddlers aged zero to three.

* The President introduced the Work and Responsibility Act -- a tough welfare reform proposal -- which included a national campaign against teen pregnancy, education and training opportunities for young mothers, and the toughest child support enforcement laws ever proposed.

* And under President Clinton's leadership, the Brady Law and the Violent Crime Control and Law Enforcement Act, the products of more than six years of bipartisan efforts to take back our streets and increase the safety and security of American families, are finally the law of the land. In addition to imposing a waiting period for handgun purchases, adding 100,000 more police to our streets, stiffening penalties for criminals, better assisting victims of domestic violence, and banning military-style assault weapons, the crime bill also invests in important prevention programs aimed at providing kids with the opportunities that will deter them from lives of crime.

It is now a very challenging time for those of us in public life -- Republicans and Democrats alike. It is a time when public servants will have to search for the common ground that brings us together rather than retreat to the divided turf that just pulls us farther apart. It is a time to focus on this nation's future, and to work together to make it as bright and as prosperous as possible for every single American. The President and his Administration know, just as you do, that our children's future <u>is</u> our nation's future. So I want to applaud all of you for the work you've done on behalf of helping children to reach their full potential, and to pledge our continued commitment to joining you in your continuing efforts. Thank you.

Comprehensive School Health Educ. Program
@ $5 million dollar level

- funded small educ. programs

ESEA - specific mention taken out.

There is authority to do it from Secy but no plans to do it now.

$50 million dollars

- is an ESEA title

Safe + Drug Schools Program: Reauthorized this year will now include safety $.

Give local districts flexibility to meet local needs. Violence, substance abuse together. We know that it's all similar causes.

Peer mediation, subst. abuse prevention

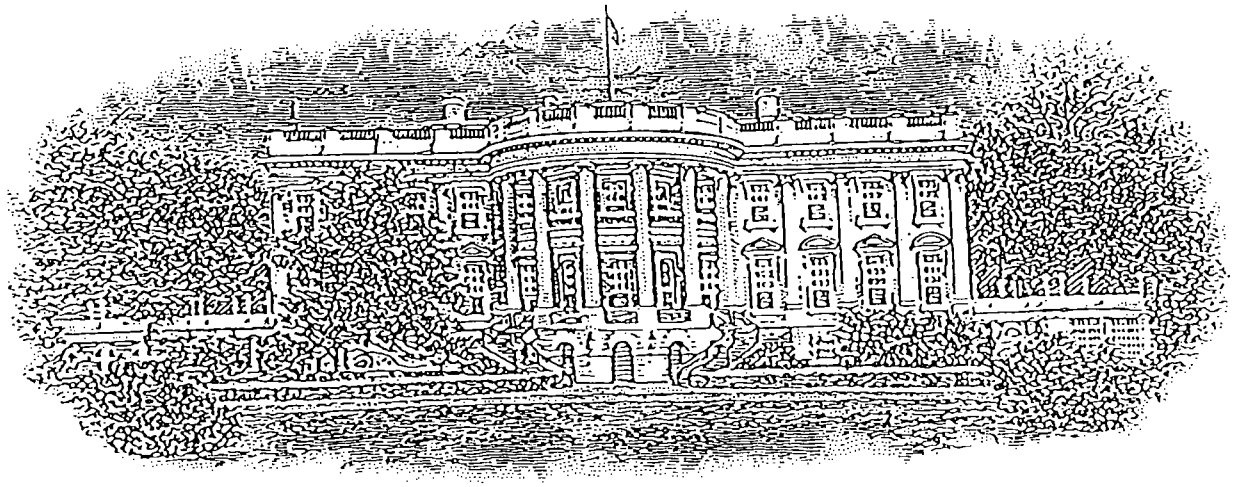
Work w/ community based organizations.

- Comprehensive approach

[Health care reform bill would have substitution]

Judy -
This is the
"good" version
(I hope it's good!)
Karen

THE WHITE HOUSE
WASHINGTON, DC 20500



FAX COVER SHEET

DATE: 1/9/95 TIME: _____

TO: Judy Wurtzel

PHONE: 401-3281 FAX #: 401-3095

FROM: Karen Guss

PHONE: (202) 456 5603
fax 202 456 7431

PAGES AFTER COVER

COMMENTS: Thanks for reviewing this! I will be out of the office ~~from 10-12~~ or in meetings from 10 30 - 6.

JOINT STATEMENT ON SCHOOL HEALTH

by

The Secretaries of Education and Health and Human Services

Health and education are joined in fundamental ways with each other and with the destinies of the Nation's children. Because of our national leadership responsibilities for education and health, we have initiated unprecedented cooperative efforts between our Departments. In support of comprehensive school health programs, we affirm the following:

- ***America's children face many compelling educational and health and developmental challenges that affect their lives and their futures.***

  These challenges include poor levels of achievement; unacceptably high drop-out rates; low literacy; violence; drug abuse; preventable injuries; physical and mental illness; developmental disabilities; and sexual activity resulting in sexually transmitted diseases, including HIV, and unintended pregnancy. These facts demand a reassessment of the contributions of education and health programs in safeguarding our children's present lives and preparing them for productive, responsible, and fulfilling futures.

- ***To help children meet these challenges, education and health must be linked in partnership.***

  Schools are the only public institutions that touch nearly every young person in this country. Schools have a unique opportunity to affect the lives of children and their families, but they cannot address all of our children's needs alone. Health, education, and human service programs must be integrated, and schools must have the support of public and private health care providers, communities, and families.

- ***School health programs support the education process, integrate services for disadvantaged and disabled children, and improve children's health prospects.***

  Through school health programs, children and their families can develop the knowledge, attitudes, beliefs, and behaviors necessary to remain healthy and perform well in school. These learning environments enhance safety, nutrition, and disease prevention; encourage exercise and fitness; support healthy physical, mental, and emotional development; promote abstinence and prevent sexual behaviors that result in HIV infection, other sexually transmitted diseases, and unintended teenage pregnancy; discourage use of illegal drugs, alcohol, and tobacco; and help young people develop problem-solving and decision-making skills.

- ***Reforms in health care and in education offer opportunities to forge the partnerships needed for our children in the 1990s.***

  The benefits of integrated health and education services can be achieved by working together to create a "seamless" network of services, both through the school setting and through linkages with other community resources.

- ***GOALS 2000 and HEALTHY PEOPLE 2000 provide complementary visions that, together, can support our joint efforts in pursuit of a healthier, better educated Nation for the next century.***

  GOALS 2000 challenges us to ensure that all children arrive at school ready to learn; to increase the high school graduation rate; to achieve basic subject matter competencies; to achieve universal adult literacy; and to ensure that school environments are safe, disciplined, and drug free. HEALTHY PEOPLE 2000 challenges us to increase the span of healthy life for the American people, to reduce and finally to eliminate health disparities among population groups, and to ensure access to services for all Americans.

In support of GOALS 2000 and HEALTHY PEOPLE 2000, we have established the Interagency Committee on School Health co-chaired by the Assistant Secretary for Elementary and Secondary Education and the Assistant Secretary for Health, and we have convened the National Coordinating Committee on School Health to bring together representatives of major national education and health organizations to work with us.

We call upon professionals in the fields of education and health and concerned citizens across the Nation to join with us in a renewed effort and a reaffirmation of our mutual responsibility to our Nation's children.

Richard W. Riley
Secretary of Education

Donna E. Shalala
Secretary of Health and Human Services

UNITED STATES DEPARTMENT OF EDUCATION

OFFICE OF INTERGOVERNMENTAL AND INTERAGENCY AFFAIRS

FAX SHEET

TO: Karen Gross

FAX NUMBER: 456-7431

PEONE NUMBER:

FROM: Elaine Halloran

PEONE NUMBER:

NUMBER OF PAGES (Including cover sheet) 2

MESSAGE:

Sorry — I meant to send this last night - - -

DRAFT ** DRAFT ** DRAFT ** DRAFT ** DRAFT ** DRAFT ** DRAFT

Talking Points for Carol Rasco
The Future of Health Care Reform and Collaboration in the 104th Congress"
National Health Education Coalition
January 10, 1994

ACCOMPLISHMENTS OF THE PAST HEALTH CARE REFORM EFFORT:

- Though the Health Security Act was not passed in the last Congress, it is fair and accurate to say there are great success to report. Several important outcomes should be highlighted:

  1. The national debate was a catalyst for individual states to move forward with state-wide health care reforms.

  2. Health care reform forged a solid and permanent relationship between the Departments of Education and Health and Human Services. The Departments became very real partners in identifying the health and education needs of children.

  3. School health ~~was identified as a major issue~~ in health care reform efforts. The ~~recognition~~ of school-linked and school-based health services in providing ~~access~~ health and care to children ~~is an important victory.~~

Collaborative projects began as a result of the Health care debate including: exploring Medicaid's role in the financing and delivery of school health services for eligible children. Discussions include identifying barriers that exist between state and federal governments as well as schools and providers

UPCOMING HEALTH CARE REFORM EFFORTS

- Future health care debate should include the role of School-linked and school-based health services, which include:

  1) clinical health services (ranging from screening and immunizations provided by school nurses to primary health care provided by school-based health centers);

  2) rehabiliative health care services for students with disabilities (many of which are required by law to be delivered in school sites); and

  3) public health services (including outreach where needed and health education).

Where they exist, school-linked and schoo-based health services often demonstrate a value added to the health care system in their community. They both increase young people's access to services and enhance effectiveness of services. Students who do not ordinarily seek needed health care obtain services from school health providers.

to page one

BACKGROUND INFORMATION:

- Health affects learning. Education contributes to improving the health of a child, and a child's health status is a major determinant of educational achievement.

- Nearly 48 million children attend elementary and high schools each day in the United States. Schools are on the front line and have a major influence on the child's development and intellectual and social growth. Schools in many communities have had to expand their role and assume a variety of health and social service functions: providing health care and referral, mental health counseling, nutrition, health education, referrals to the juvenile justice system, coordination with child abuse and welfare agencies, family literacy and the like.

to page one

- Schools cannot address children's issues alone. No one institution -- federal, state or local -- can hope to accomplish a comprehensive approach to serving children and families without the cooperation and commitment on all levels. All the institutions that serve children -- including schools -- must collaborate. Coordination of services is critical to addressing the needs of families, whether it is within health care reform, welfare reform or education reform.

- The health needs of children have become increasingly complex. Of the health threats to children today, the vast majority -- including substance abuse, sexual activity leading to unwanted pregnancies and sexually transmitted diseases, suicide, violence, accidents, heart disease, and cancer caused by smoking or poor nutrition -- are preventable.

  Research has shown that the initiation of high risk behaviors by children and youth can be delayed, reduced or prevented through school-based health education programs.

INTERAGENCY COMMITTEE ON SCHOOL HEALTH AND NATIONAL COORDINATING COMMITTEE ON SCHOOL HEALTH

- The Interagency Committee on School Health (ICSH) is a strong example of the President's effort to reinvent

government through federal coordination. It also has served as the foundation for continuing discussions that began as a direct result of Health Care Reform efforts.

The Departments of Education, Health and Human Services and Agriculture share a close working relationship on issues related to children's health through the ICSH. The Committee is jointly chaired by Assistant Secretaries within the three Departments.

The mission of the Interagency Committee on School Health is to increase the overall effectiveness of Federal efforts to improve the education and health of school-aged children and youth through school health programs. Through the ICSH, these federal agencies work together to improve collaboration at the federal, state and local levels and to address policies and practices that may be acting as barriers to school health programs. One of the most visible issues is reviewing Medicaid financing of services delivered in school-linked or school-based centers.

o Another important interagency activity is the National Coordinating Committee on School Health. This committee includes representatives from federal agencies and national organizations. The purpose of this committee is to improve the health and educational achievement of children through school-linked and school-based programs. The committee serves to facilitate communication and collaboration among the various organizations and agencies.

JOINT STATEMENT ON SCHOOL HEALTH

o Last year (spring 1994) Secretary of Education, Richard Riley and Secretary of Health and Human Services Donna Shalala released the Joint Statement on School Health, which they co-signed. It embraces the fundamental relationship between education and health and acknowledges the important role of school health programs in helping students develop the knowledge, attitudes, beliefs and behaviors necessary to perform well in school. Nutrition is cited as an important component in preparing children to learn. I have enclosed several copies for you to share with your membership.

GOALS 2000: EDUCATE AMERICA ACT

o The Goals 2000: Educate America Act, sweeping national education reform legislation, was passed and signed President Clinton this spring. Health and physical education are recognized within several of the National Education Goals.

-- Goal 1: School Readiness by the year 2000, states as an objective: "(iii) children will receive the nutrition, physical activity experiences, and health care needed to arrive at school with healthy minds and bodies, and to maintain the mental alertness necessary to be prepared to learn and the number of low-birthweight babies will be significantly reduced through enhanced prenatal health systems.

-- Goal 2: Student Achievement and Citizenship, states as objectives: "(iii) all student will be involved in activities that promote and demonstrate good citizenship, good health, community service, and personal responsibility; and "(iv) all students will have access to physical education and health education to ensure they are healthy and fit."

-- Goal 7: Safe, Disciplined, and Alcohol-and Drug-free schools, states as an objective: "(v) drug and alcohol curriculum should be taught as an integral part of sequential, comprehensive health education."

IMPROVING AMERICA'S SCHOOLS ACT (Reauthorization of the Elementary and Secondary Education Act - ESEA)

o A main principle within ESEA is linking schools, parents and communities. There must be a partnership to ensure that all students reach high standards, particularly in high-poverty communities. Under the proposal, parents would be enlisted to help their children do well at school. And schools and communities would coordinate services in ways that make a difference in the learning and lives of children and families.

Title XI of ESEA is designed to address problems that children face outside the classroom that affect their performance in school. The legislation specifies poor nutrition, unsafe living conditions, physical and sexual abuse, family and gang violence, inadequate health care, and substance abuse as some of the factors that may impede a child's academic success. This title allows local education agencies, schools, and consortia of schools to use up to five percent of the funds they receive under the ESEA to develop, implement or expand a coordinated service project.

STRONG FAMILIES/STRONG SCHOOLS INITIATIVE:

o Parents are a Child's first teacher. They learn what they see and hear. This initiative to encourage and support efforts by families to take a more active role in their children's learning.

- Children who spend a lot of time with their parents, and talk with them often, are less likely to smoke or drink than youngsters without such close parental contacts, reported by researchers at the Louisiana State Univ. Medical Ctr and the Univ. of Souther California. Released in the September issue of PEDIATICS.

  The report suggested providing parents with more help with child-rearing issues and making them targets of future substance-abuse prevention programs -- before their children reach adolescence.

OVERVIEW

The health and education of children are intricately linked. Yet, for a variety of historical and societal reasons, these two critical facets of children's development have been separated. As a result, society finds itself either concerned about the "health" of children or the "education" of children, but is all-too-rarely aware of how the two fields are interdependent.

In 1990, in recognition of the need for better integration of health and education programs for children in this country, the National Health/Education Consortium was established by the National Commission to Prevent Infant Mortality (NCPIM) and the Institute for Educational Leadership (IEL) with core financial support from the Prudential Foundation. As a result of this special partnership, NHEC, from its inception, was a public/private partnership grounded in both the education and health communities.

NHEC now brings together 59 national health and education professional member associations, representing some 12 million constituents, to design strategies to better coordinate health and education services and programs. It does not represent any particular special interest group, but uniquely can mobilize the collective influence of national membership associations on behalf of its mission.

The National Health/Education Consortium contends that children must be healthy to be able to learn, and that they must be educated to keep themselves healthy for a lifetime. Millions of infants and children lack access to health care or suffer from poor health, leaving them vulnerable to physical and learning problems. And, far too often, information on how to maintain a healthy lifestyle does not reach those in greatest need. Coordination of health and education services for children can enhance their ability to learn, succeed in school and become productive members of society.

NHEC's goals are:

- to improve public policy by addressing the need for a better coordinated health and education delivery system;
- to strengthen communication and dissemination of information between health and education practitioners and policymakers; and,
- to identify exemplary program models and practices which more effectively integrate health and education services.

To accomplish its mission, NHEC produces occasional papers, special reports and major research documents focused on various topics relating to collaboration between the health and education communities. NHEC also provides training and technical assistance to federal, state and local leaders to promote collaborative efforts at all levels of government and in the private sector, and operates a number of special programs.

For additional information on NHEC, please contact staff at the address noted below.

Institute for Educational Leadership
Suite 310 • 1001 Connecticut Avenue, NW • Washington, DC 20036 • Tel (202) 822-8405 • Fax (202) 872-4050

Elaine Holland DOE

401-0419

• copy of letter from POTUS to leadership (Stacey) - have this

"concern about health care for children"

ask Lisa re: page length

spoke to Christine @ NHEC - will messenger material here

~~four~~ 5 pp.

double-space

250 words speech

2 min. a ~~space~~ page

single

3 minutes a page

December 13, 1994

TO: Julie DeMeo (fax: 202/456-2878; phone: 456-2216)
FROM: Tamara Copeland *tc*
RE: January 10th Presentation by Carol Rasco

As promised, following is a copy of the agenda for the upcoming members' meeting of the National Health & Education Consortium (NHEC). The meeting will be held at the Radisson Barcelo, 2121 P Street, NW (202/293-3100). Carol's presentation should begin a little after 1:00 p.m. following Jack Jennings'. He is scheduled to begin at 12:45 p.m. and, like Carol, was asked to speak for twenty minutes. Will she be willing to respond to questions from the audience? Will Carol be able to join us for lunch? If so, how many staff will accompany her?

Many of our members are interested in learning what health care reform proposals will be put forth next year and in hearing Carol's perspective on how their respective associations may be able to work with the Administration. It would also be helpful to hear Carol's comments on the role of an organization such as NHEC (a membership association representing almost 60 professional membership associations from the health and education fields whose purpose is to bridge the two communities) in assisting and supporting the Administration in moving forward an interdisciplinary, collaborative efforts to address the nation's problems.

As soon as I get a definite number of attendees, I will advise you. Based on past participation, we should have representation from approximately 1/2 to 2/3 of our sixty members. If she would like to provide any materials for the group, please forward them to me a couple of days in advance.

Julie, I will call you in early January to see if you need any further information. I had sent a few of NHEC's publications to your office to give the speechwriter a sense of our work. Let me know if you need to have these sent again.

Would you please fax me whatever introductory remarks Carol would like made or a copy of her bio?

Thanks for your help.

Information following (1)

Institute for Educational Leadership
Suite 310 • 1001 Connecticut Avenue, NW • Washington, DC 20036 • Tel (202) 822-8405 • Fax (202) 872-4050

NATIONAL HEALTH & EDUCATION CONSORTIUM

Members' Meeting
January 10, 1994
Tentative Agenda

Radisson Barcelo
2121 P Street NW
Washington, DC

9:30 a.m.	**Registration** **(refreshments will be provided)**	**Phillips Ballroom**
10:00 a.m.	**Welcome and Introductions**	**Tamara Copeland**
10:15 a.m.	**NHEC Update**	**Tamara Copeland**
10:45 a.m.	**The Elementary School-based Health Initiative Update**	**Bettina Hoerlin**
11:00 a.m.	**Working Session for Members -- Promoting Collaboration: NHEC's Role**	
Noon	**Lunch** **(will be provided)**	
12:45 p.m.	**Education Reform and Its Impact on the Collaboration Movement** **Jack Jennings (confirmed)** **Director, Center on National Education Policy** **Institute for Educational Leadership** **Former General Counsel for Education** **Committee on Education and Labor** **U.S. House of Representatives** **Health Care: The Future of Reform and Collaboration in the 104th Congress** **Carol Rasco (confirmed)** **Assistant to the President for Domestic Policy**	
1:45 p.m.	**Closing Remarks**	**Tamara Copeland**
2:00 p.m.	**Adjourn**	

Kathi
Rana
Denise
Paul
Jane
Bruce
Michael
Ira
Ryan
Thiot

Carol H. Rasco
Assistant to the President for Domestic Policy

Remarks Prepared for Delivery at the
National Summit on Children and Families
Washington, D.C.
April 2, 1993

It is wonderful to be here at this historic national summit on children and families. And it is inspiring to hear the stories of young people who are succeeding--with determination, personal responsibility, and help from those who care.

I wish that every child in America could tell such a story. But you and I know that they can't. Many children are thriving in our nation--but too many are not.

The statistics for our children and youth are grim. Educational attainment is stagnant--at best. Mental illness and suicide are up. Violent crime and homicide--way up. And today, child poverty stands at levels last seen a generation ago.

For most of that generation, families with children have faced a relentless economic squeeze. The real wages of workers with young children--even educated workers --have fallen dramatically during the past twenty years.

These are the facts, and it's time we stopped ignoring them. We must show that we have not forgotten how to care. We need a new direction for our country. It's time we adults put our children first.

That's one big reason why our country needs the President's bold new economic program of growth and jobs. It's why we need the President's bold plan for investing in children and their families. With the help of the Congress, we're going to get that program--and get it in record time.

But the problems our children face are not just economic. Too many American families are disintegrating, or never forming at all. We have the highest divorce rate in the Western world, and the highest rate of children born outside marriage. Today, 28 percent of our babies are born to unmarried parents. For African-Americans, it's more than 66 percent.

Does this matter? Here are some findings from a report out just this week: Of the children born to young unmarried mothers without high school diplomas, 79 percent are living in poverty. For children born to married high-school graduates, the figure is only 8 percent.

The message is clear: if you stay in school and get married before you have children, your kids are ten times less likely to be poor. A stable family setting is the best anti-poverty program our country has ever devised. That is the message we adults should be sending our young people, in every way we can.

For too long, these issues were mired in partisan gridlock. Some talked only about the economic squeeze on families and cuts in government programs; others talked only about the disintegration of families and the decline of American culture. It is time--high time--to put an end to the politics of false choices. We must move beyond cheerleading for family values, on the one hand, and on the other, the old big-government notion that there's a program for every social problem.

There is another way, a commonsense path that offers more opportunity to every family and demands more responsibility from every individual. As the President has said so eloquently: Family values alone cannot nourish a hungry child, and material security alone cannot provide a moral compass. We must have both.

That is the trail that the National Commission has blazed for our country. You have advanced an ambitious legislative agenda, which helped shape the President's budget proposals. You have crafted a new consensus on children and families that could put futile debates behind us. Most important, you have reminded us of basic principles essential values.

o First: Every American child should have the opportunity to develop to his or her full potential.

o Second: Government doesn't raise children, parents do. Government can reinforce the vital work of parents, but it can't substitute for them. The family is--and must remain--society's primary institution for bringing children into the world and for supporting their growth throughout childhood.

o Third: Children do best when they have the personal involvement and material support of a father and a mother and when both parents fulfill their responsibility to be loving providers.

These are the principles and values that guide us all. Now let me tell you what the President is doing to turn them into reality.

To begin with, he is rewarding work and family. Today, millions of Americans work full-time but don't make enough to lift their families out of poverty. That's wrong. No one who works full-time and has children at home should be poor in America. And that's why the President has proposed a dramatic

increase in the Earned Income Tax Credit.

At the same time, Bill Clinton is moving aggressively to relax the tension between work and family. He's proud that the first piece of legislation he signed was the Family and Medical Leave Act, twice veoted by George Bush. And the administration is actively exploring other ways of making America's workplaces--including the federal government--much more family friendly.

Second, he is protecting the health of children and families, by fully funding the WIC program, by investing in childhood immunization, and by committing his administration to fundamental reform of our nation's health care system.

As you all know, we're working night and day to ensure that every American has access to quality health care at affordable prices. Next month, we're going to propose a comprehensive new health care plan. And during this Congress we're going to fulfill the dream of every Democratic president since Harry Truman and make health insurance a reality for all.

Third, the President is promoting the development of young children with the biggest expansion of Head Start ever. But the administration is not just going to make Head Start bigger; we're going to make it better. We're going to improve quality, increase flexibility, and better link the program to other child development efforts.

Fourth, the President is proposing fundamental change in public education. As governor, Bill Clinton helped draft the national education goals and bring them to the center of public debate. As president, he'll bring those goals to the center of education reform.

Bill Clinton is going to put an end to business as usual in American education. That means new initiatives with real incentives to states for systemic reform. It means a total reexamination of existing programs--such as Chapter 1--to ensure that every child has a fair chance to acquire high-level skills and make it in the economy of the 21st century. It means unprecedented emphasis on systematic, high-quality school-to-work programs. It means an expanded safe schools initiative because fearful kids can't possibly learn well. And yes, it means more choice for parents and students within our public school system.

Fifth, the President will deliver fundamental reform of our welfare system. He helped draft the Family Support Act of 1988, and he made it work in Arkansas. Now he has asked us to develop a plan to end welfare as we now know it. People don't want permanent dependency, they want the dignity of work, and we should give everyone the chance to have that kind of dignity. It's just common sense: more opportunity in exchange for more

responsibility.

The President's responsibility agenda doesn't end there. He's going to get tough on child support enforcement. That means establishing paternity right at the start, in the hospital; setting up a national registry; and using the IRS to collect seriously delinquent child support payments.

The principle is simple: if you are biologically responsible for a child, then you are morally and financially responsible as well. And that's why we have to get the message to our youth in schools, in the media, in every way we can: it's just plain wrong for children to have children, because you are assuming a responsibility that you aren't ready to fulfill.

The President wants to put government squarely on the side of keeping families together whenever possible. He wants us to do more for families at risk, especially at risk of foster care placement. He knows that constant shifting from one short-term foster home placement to another is an emotional disaster for kids; that in all but the most extreme cases, it's better for kids to be with their parents.

That why, last month he directed us to draft a new child welfare initiative combining family support and family preservation services--building on the work of Senator Rockefeller and Congressman Matsui and Congresswoman Schroeder and others. And believe me, we're going to deliver that initiative--to him, to our kids, and to the country.

I applaud the Commission for recognizing that families don't operate in a vacuum, but in neighborhoods, in communities, and in a climate of culture and values. We must do whatever we can to assist parents in educating their kids and teaching them right from wrong.

As every parent knows, in modern America that effort begins with the media. Three years ago, the Congress passed the Children's Television Act. And for three years, the Act was ignored. The same kinds of folks who informed us that ketchup is a vegetable were happy to certify GI Joe as an educational television program.

Well, the previous administration's FCC wouldn't enforce the bill--but ours will. By law, broadcasters who want to keep on operating must demonstrate their commitment to the educational needs of children. We're going to hold them to that. And while they're at it, it wouldn't hurt if they cut out the gratuitous sex and violence either.

I've talked about what the President has done and what he wants to do. We've begun to shift course. But this is just the beginning. We must have the courage to change--to recognize mistakes, to abandon what doesn't work, to challenge ourselves to do better. In short, we adults have some growing up to do.

I know that many of you in this room are tired after the last twelve years. Without you, many of the programs that serve children and families would have been gutted. They weren't, and you've earned a rest.

But we're asking you to go another round. The President can't pass or fund his initiatives alone. He can't break the gridlock alone. He still needs your help, and so do America's children.

For the first time in a long time, your efforts will be supported--not rebuffed--by the executive branch of this government. The details remain to be worked out. But for sure, there will be an ongoing, high-level focus on children and families, cutting across agency, departmental, and programmatic lines, coordinated by the White House, responsible not to any single constituency but to the national interest and directly to the President of the United States.

Concern for our children must start at the top--but it can't end there. We must empower parents, neighborhoods, communities and voluntary organizations across this great nation to do what our children need. The President can take the lead--but only you can complete the task.

At last, a new day is dawning for America's children and their families. We will work together with you. We won't always succeed, and we won't always be able to do everything that you--and we--would want.

But I can promise you this: we will never relent in our effort to give every child a chance to develop--fully. Because at the end of Bill Clinton's second term, at the dawn of the third millenium, I want to be able to say to Hamp Rasco and Mary Margaret Rasco and to all the children of America, with a clear conscience and a full heart: We did our best. And I want all of you at this summit to join me in being able to look at one another and say: We did our best.

Thank you very much.

Remarks By Carol H. Rasco
Children's Health Fund Annual Awards Dinner
December 6, 1994

Thank you, Senator Daschle, and congratulations on being chosen to lead the Democrats in the Senate. I know that the cause we're all here to celebrate tonight -- the cause of children -- will be advanced under your leadership.

I'm very happy to be here to honor the Children's Health Fund and the important people who have helped make the fund such a success. I personally feel a bit overwhelmed addressing this group....as I look out into this audience and behind me on this stage, I see some of the most talented performers and the most respected public officials in this country. I see the faces of people who have tought me a great deal about public policy and about children, either through their writing or teaching or through their example. I feel like it's Oscar Night meets Capitol Hill.

I come before you at what is a very challenging time for those of us in public life -- Republicans and Democrats alike. It is a time when public servants will have to search for the common ground that brings us together rather than retreat to the divided turf that just pulls us farther apart. It is a time to focus on this nation's future, and to work together to make it as bright and as prosperous as possible for every single American.

The Children's Health Fund has served as a shining example of this spirit of cooperation, drawing from diverse groups and engaging all sides in the name of helping raise healthier children.

The White House Domestic Policy Council focuses all their work toward the pursuit of a single premise, and that is this: **Every child shall be empowered to develop to his/her full potential throughout life.** And as all of you in this room know, if a child doesn't get a healthy start -- or can't see a doctor when he or she gets sick -- that child is going to be seriously disadvantaged. Without the work that <u>you</u> do, we wouldn't be able to do what <u>we</u> do...so on behalf of the President and his Administration, I want to thank you for all your efforts.

And while I know we are here tonight to honor Steven Green and David Bethune, I can't let this opportunity pass without taking a moment to recognize Dr. Irwin Redlener. Irwin has been a tireless advocate for the health needs of children, and has walked the halls of Congress and pounded on our door at the White House to speak up for those to young or too sick to speak for themselves. There is a growing recognition that we must work toward creating a health care safety net for America's children, and that is due in no small part ot the work of Dr. Redlener.

Dr. Redlener and I share important roots -- we both learned about the plight of medically underserved children in the heart of the Arkansas Delta. Dr. Redlener served there as a young pediatrician after medical school, and I grew up the daughter of a pharmacist in rural Arkansas. Years later, when I went to work for Bill Clinton in the Governor's office and we set out to improve health care for children in our state, we found that much of the groundwork had been laid by Irwin an his dedicated team.

But as the generosity and hard work of people like Steven Green and David Bethune demonstrates, you don't have to be a pediatrician to respond to the needs of children. Children are our most precious natural resource: they are, quite literally, our nation's future. If we are truly serious about developing a stronger economy, an increased competitiveness, and a life better than our parents and grandparents knew, than we in the United States do not have a single child to waste. (2)

And yet the state in which millions of America's children are living in is grim. During my years as a classroom teacher and elementary counselor, I had children from homes with dirt floors and outhouses sitting beside children from affluent families and comfortable homes. Through my 20 years of parenting two children, through my more than 15 years working in government, the problems children face have persisted or gotten worse. Teen pregnancy has risen dramatically, more children are being born into poverty, drugs and guns have silently crept their way into schools and neighborhoods and playgrounds. (3)

And if I were to point out to the two things that trouble me most in all of this, they would be: **first, an increasing poverty of spirit, particularly amoung our children; and second, the increasing tendency to deal with individuals, families, and communities in a piecmenal fashion -- compartmentalizing different problems and trying to solve them in isolation rather than trying to nourish the whole.** (4)

It is gratifying for me to be able to join in honoring an organization and its members who know, by their experience in the trenches, that it does us no good to look at a child simply as the fractured arm in examining room three, or as Medicaid recipient number 3,674, or as the oldest son of public housing applicant fifty-four. They are children -- whole children -- and your organization has reflected that knowledge with great success.

And when you begin to look at the whole picture, however, the questions before us become quite simple: "What supports and opportunites need to be available to help children learn and grow and develop into all they can become?" and "What barriers stand in the way of allowing them to take full advantage of those opportunities?" (5)

~~Even those~~ Today, forty million Americans — including close to 10 million children — have no health insurance. The fact that our nation's health care system is among the world's finest is little comfort to the people who are shut out of ~~the system~~ or to the millions ~~of Americans~~ who are just one pink slip or serious illness away from losing their coverage.

we are pleased that

Of course, lack of access to needed health care is one such barrier, and many of you in this room joined with us in our attempt to remove that barrier once and for all by guaranteeing all Americans at least a basic package of health benefits. And while we were of course disappointed that meaningful health reform did not take place ~~this~~ last year, ~~the efforts on behalf of~~ SEE health reform helped lay the groundwork for gradual policy changes that will move us ever closer to that goal. Health care was not just an issue for 1994; it is an issue for the 90s, and there is every reason to believe that starting down the path to full coverage for all Americans is a goal people from all parties share.

Our nation still faces the enormous problems of increasing health care costs and decreasing coverage

Because without health reform, other social reforms become much harder. I first worked on health reform with then-Governor Clinton years before he ever considered running for President as part of our work on the Family Support Act -- a welfare reform proposal. It became very clear to us that one of the biggest issues for women getting off of welfare was transitional health benefits. And then if they ultimately got a job that didn't give they or their kids any health coverage, it was hard to argue that going back to welfare wasn't a more attractive picture. AS you all know there's a lot of interest in welfare reform on Capitol Hill right now, and these issues are bound to emerge.

And I want you to know that for all the fanfare that surrounded the health care debate in the Congress, much of what did get done last session has great implications for improving the health and welfare of America's children.

I have been proud to be part of the President's efforts to strengthen families, encourage the values that keep them strong, and provide America's children a future filled with opportunity. Knowing that all of you in this audience share that same dream for our nation's children, I would like to take this opportunity to remind you of what we are doing to try to make that dream a reality.

* We have begun to put our economic house in order -- reducing the deficit at a rate of nearly $700 billion over 5 years. And over 4.6 million jobs have been created in the first 20 months of this Administration. And the President's economic plan also included a program to support at-risk families in the area of literacy, childhood education, child abuse prevention and other support services

* We passed the Family Leave Law which guarantees that American workers are no longer forced to choose between their jobs and their families in times of crisis.. The Family and Medical Leave law allows workers to take a little time off to care for a child or a parent without losing their job.

* We acted upon the importance of disease prevention for our nation's children by sponsoring and signing the comprehensive

Child Immunization Plan. And we've dramatically increased the numbers of children and pregnant women served by the WIC program, providing better nutritional assistance to an additional two million children. And we've dramatically increased HeadStart funding to allow almost 800,000 children to participate in this pre-school education program next year.

* The President introduced the Work and Responsibility Act -- a tough welfare reform proposal -- which included a national campaign against teen pregnancy, education and training opportunities for young mothers, and the toughest child support enforcement laws ever proposed.

* And under President Clinton's leadership, the Brady Law and the Violent Crime Control and Law Enforcement Act, the products of more than six years of bi-partisan efforts to take back our streets and increase the safety and security of American families, are finally the law of the land. In addition to imposing a waiting period for handgun purchases, adding 100,000 more police to our streets, stiffening penalties for criminals, and banning military-style assault weapons, the crime bill also invests in important prevention programs aimed at providing kids with the opportunities that will deter them from lives of crime.

* In the area of education, the Goals 2000: Educate America Act sets national educational goals and gives resources to states and communities to implement comprehensive education reforms. The college loan program was reformed and AmeriCorps was created, giving young Americans more and different opportunities to further their education while serving their community.

Helen Keller once said that "The world is moved along, not only by the mighty shoves of its heroes, but also by the aggregate of the tiny pushes of each honest worker." At the Children's Health Fund, as in life, the heroes are workers and the workers are heroes, and I want to salute all of you and the work you've done on behalf of children, and to pledge that we join you in your efforts to provide all American children with the health care they need. Thank you.

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Bridging The Gap: An Education Primer for Health Professionals

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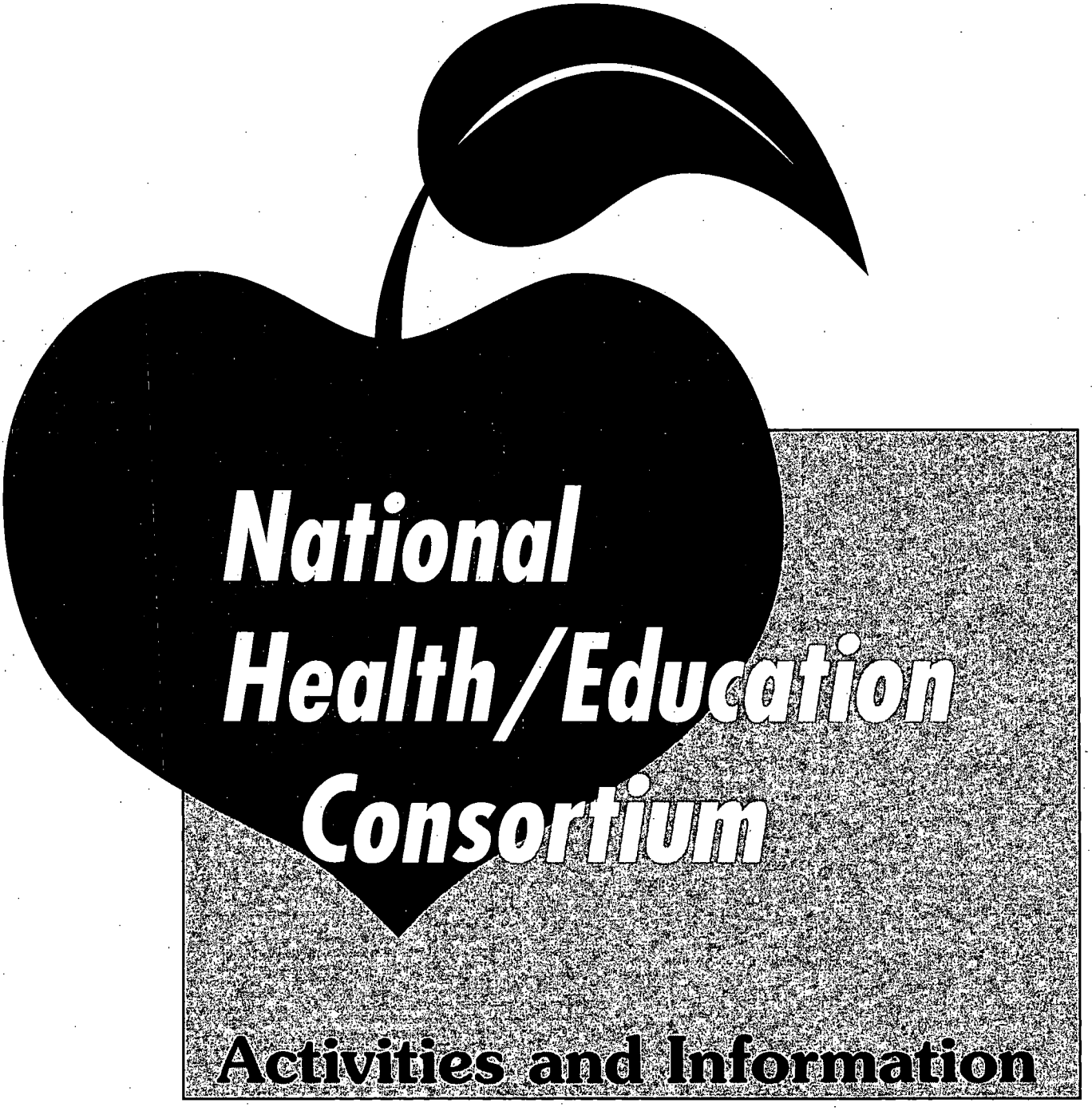

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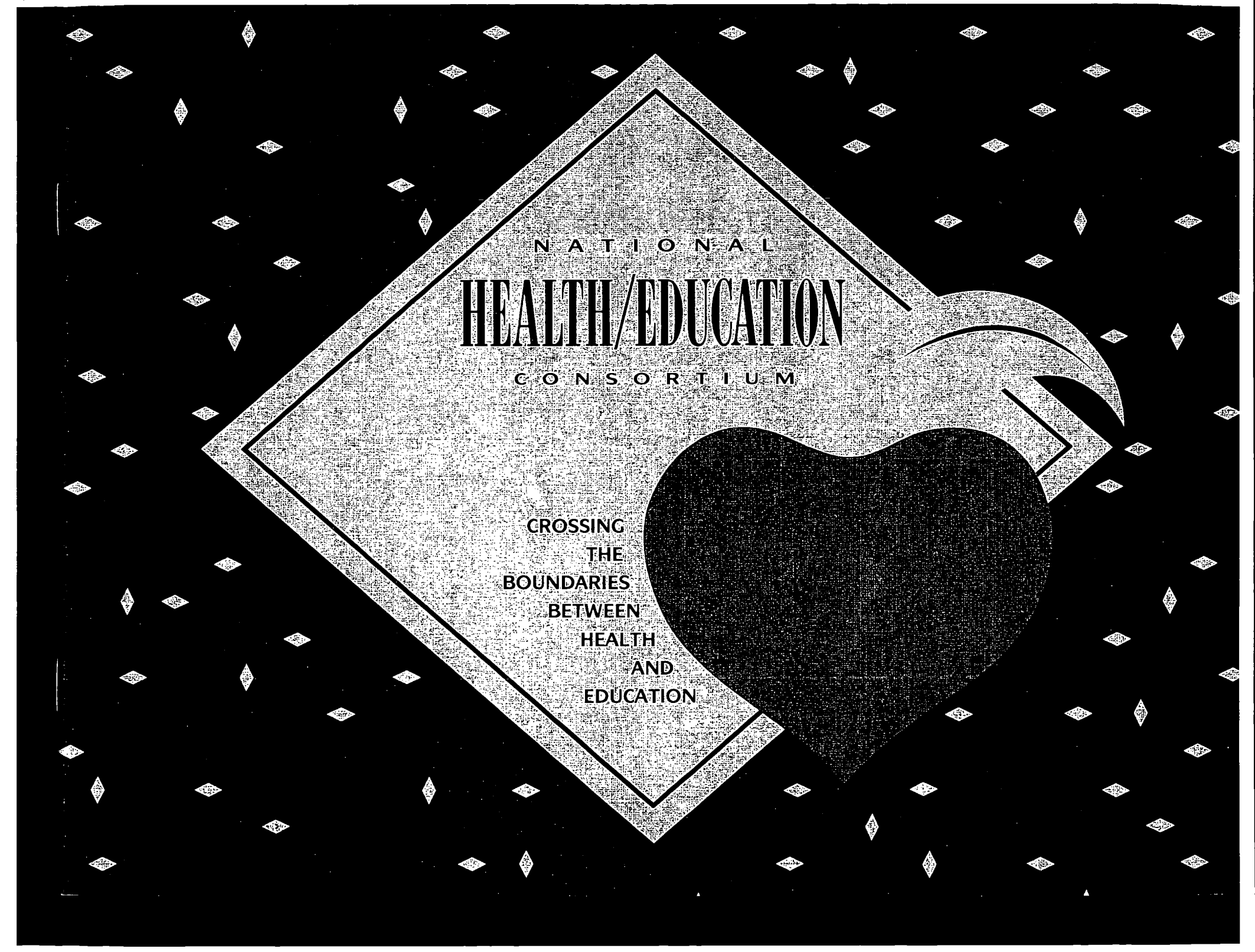
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EDUCATION

Sec. Elementary Education Act — safe & drug free schools / violence free schools

moving towards — health educ. & comprehensive / same teacher / same source of funding / techniques that work are same

coordination of services — making it easier to connect up to health & social services

Health Education: Lloyd Colby @ CDC
404 488 5314

THE WHITE HOUSE

WASHINGTON

December 27, 1994

Dear Tom:

While we could not achieve broad-based agreement on a health reform initiative last year, there can be little disagreement that we still face the enormous problems of increasing health care costs and decreasing coverage. We need to confront these problems on a bipartisan basis and address the insecurities that too many Americans have about their health care. I am writing to reiterate my strong desire to work with you in this regard. The President remains ~~I remain~~ firmly committed to providing insurance coverage for every American and containing health care costs for families, businesses, and Federal, State, and local governments. ~~In the upcoming session of Congress, we can and should work together~~ to take the first steps toward achieving these goals. We can pass legislation that includes measures to address the unfairness in the insurance market, make coverage more affordable for working families and children, assure quality and efficiency in the Medicare and Medicaid programs, and reduce the long-term Federal deficit. He intends to work with the new Congress

We look forward to talking with you in the upcoming weeks about a bipartisan effort to deliver health care reform to the American public. Hillary and I send our best wishes for a safe and happy holiday season.

Sincerely,

Bill Clinton

The Honorable Thomas A. Daschle
United States Senate
Washington, D.C. 20510