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The American Way of Death Evolves

By WILLIAM E. PHIPPS

The number of cremations in the U.S. has tripled in the past generation. The cremation rate is now about 17%—though the rate varies widely from state to state. In Hawaii cremation already has surpassed burial, but in West Virginia cremation accounts for only 2% of the total. Americans are following the lead of Britain, where cremation has increased from less than 3% in 1936 to more than 70% now.

Heating technology is a primary cause for the gradual change of attitude toward cremation in the West. If the bonfires used in ancient cultures had continued to be the only means of cremation, the spade would continue to triumph over the torch in Western cultures. But contemporary cremations are neither a public spectacle nor a private repulsion.

Crematoria used to be located only in cemeteries away from heavily populated areas, due to public concern about smoke from cremations. Today, the smoke is recycled so that the carbon particles are completely burned. Only odorless vapors escape through a flue from the afterburner chamber. Most units in the U.S. are fired by natural gas. About 500 cubic feet of gas is used in a single cremation, costing several dollars.

Although death customs are usually the slowest of all customs to change, Americans are experiencing an increasing amount of dissatisfaction with conventional funeral practices. Funeral costs are a major factor in the decline of burials. Since 1984, funeral costs have risen almost twice as fast as the consumer price index; today an average burial costs \$5,000, while the average cost of a cremation is a small fraction of this amount. Telephone, which

claims to be the country's fastest growing cremation society, has an inclusive charge of \$500.

Public policy encourages the cremation option. Social Security death benefits of \$255 are available to most survivors of covered workers. Also, the Veterans Administration provides a \$300 funeral allowance. For welfare recipients, the benefits vary from state to state. Economic considerations should not be overestimated, however, since cremation accounts for the majority of body disposals in Marin County, Calif.—one of America's most affluent areas.

There are a variety of other reasons for the shift away from burial. Family mobility is one. Many people have left the areas where their ancestors lived and died. Although they may not feel rooted in their new places of work or retirement, neither do they long to have their bodies returned to their former localities.

Those who reject burial often believe that land belongs to the living. Realizing that America is gradually running out of space, they oppose cemetery expansion programs. Consider the amount of land consumed in burials: A burial plot typically is three feet by eight feet; an area more than twice the area of the District of Columbia would be needed to bury the current U.S. population. Population growth is affecting land scarcity in some other parts of the world much more than in the U.S.

Another basic reason for the trend away from burial is the growing view that the emphasis on corpse "preservation" is misplaced. More and more people have come to realize that the only choice for mortals is between rapid or slow return to dust after death. An intense flame of natural gas

effects in minutes what it takes a cool grave years to accomplish. A clean incineration that quickly reduces the body of the deceased to its component elements can be therapeutic to mourners by expressing the final severance of the physical bond.

Religious considerations are also responsible for some of the shift away from the dominant modern American burial practice. More and more people perceive corpse "restoration" as a phony attempt to counter the biblical affirmation that "all flesh is grass" that "fades when the breath of the Lord blows upon it." Funeral rites centered on embalmed corpses can be traced to the pagan practices of ancient Egypt. By contrast, a memorial worship service after cremation sets the transitoriness of the physical in bold relief against the everlastingness of the spiritual.

The large saving to the estate of the deceased resulting from cremation frees up money to support those causes the deceased identified with in life. Approximately \$1 billion is spent annually in the U.S. on cemetery plots, another \$1 billion on funeral flowers, and several times that combined amount on other funeral costs. When a cremation replaces a conventional funeral, thousands of dollars are usually saved. The notion that death is not a time for cheapness continues, but many are realizing that contributing to causes that enhance life may be a better way of showing honor.

Mr. Phipps, a professor of religion and philosophy at Davis and Elkins College in West Virginia, is author of "Cremation Concerns" (Thomas Books, 1989).

military transfers.

Mr. Clemens, a professor at University, wrote "The Arms Race Soviet Relations" (Hoover 1968) and the forthcoming "Change?" (Unwin Hyman).

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The Abortion Issue

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WASHINGTON
To many Bush supporters, the most worrisome moment of the debate came when the Vice President appeared unprepared on an abortion question: if, as he wishes, abortions were to become illegal again, what penalties would the offending woman face?

He ducked. Governor Dukakis zapped him for "branding a woman a criminal" who had an abortion. Next day, the Bush campaign chairman said that no such woman should face penalties. Only the abortionist should be at risk.

What does this social issue have to do with a Presidential campaign, which all serious types insist should be centered on budgets and missiles? Plenty.

The next President is sure to nominate several Supreme Court justices. According to recent hints from Justice Harry Blackmun, who wrote the 1973 decision striking down local anti-abortion laws (and who will turn 80 next month), Roe v. Wade could well be reversed soon.

Although George Bush has made clear that a person's position on abortion is not a "litmus test" for appointments to his staff, or presumably to his Court nominations, the likelihood is that he would choose judges who tend to agree with him on this.

Michael Dukakis, in contrast, would probably nominate judges who agree with the octogenarian Justices Brennan, Marshall and Blackmun. That's because he's a civil libertarian, as am I; most of us, though not all, prefer to leave the early decision on childbearing to the pregnant woman.

Although "civil liberty" is being treated as a pair of dirty words by the Bush campaign, on the abortion issue it is the civil libertarians who are in the mainstream. Women, who will decide this election, prefer to stick with Roe v. Wade by 2 to 1.

The trouble with arguing this issue in terms of crime and punishment is that it is being overtaken by scientific events. Last week, the Government of France joined the Government of China in approving RU-486, a pill to induce miscarriage. In those countries, that reinforces the notion that abortion is just another form of birth control.

It's hard to be practical on a moral issue that to many is (a) unwarranted and unconscionable interference with a woman's most private decision, or (b) murder, plain and simple. But let's face it: The development of an abortion pill will remove law and its enforcement from the debate.

The "abortionist" will be in a bottle. No matter how tight the restrictions or high the price, the market will be served: in early pregnancy,

the abortion option will become as easily available as a handgun.

Another practical matter: Even if the Court reverses Roe v. Wade and returns the matter to "local option," localities differ. If your state prohibits abortion, the state across the river probably will not; we may have more interstate or cross-border travel involved, but more than enough support exists for what is called "choice" to make it easy for all but the most indigent women to get an abortion in a hospital or, with the pill, at a pharmacy.

Where would such a Court reversal leave us? The anti-abortion or "pro-life" forces would have the moral satisfaction of terminating abortion as a right, but the use of abortion as a form of birth control would still increase. Very few Americans, of whatever persuasion, want that.

One way out is to change our attitude toward single women who become pregnant unintentionally. Cut the tut-tutting and dispense with outdated shame; unwed motherhood is not, and ought not to be, the reputation-shattering event it used to be.

Then take that a step forward: treat the pregnant woman, married or not, who does not want the responsibility of the child — but who is willing to carry the fetus to term and put the baby up for adoption — as a responsible and praiseworthy member of society.

Laud her as one who has rejected the temptation of easy abortion, who is willing to suffer the pangs of labor as the ultimate creative act, and who is making it possible for an infertile couple to have a child without stoop-

Science is crowding out law.

ing to the unnatural commerce called surrogate motherhood.

"Adoption, not abortion." Accentuating the positive may be cornball, but it's sound public policy. Rather than try to enforce the unenforceable, politicians and moralists should campaign for a new public attitude to make disrespect unfashionable.

In the end, most mothers will keep their babies. Whatever their choice, our message should be: If you will take the consequences of conception, your friends, family, employer, church and Government will help you make that human consequence a gain for yourself and a contribution to a society that values both life and freedom. □

Mr. Bush Thinks About Abortion

Vice President Bush's handlers have once again showed their skill at quick damage control by clarifying what the candidate thinks about penalties for illegal abortions. They rate an "A" for agility. But Mr. Bush has still showed himself careless and superficial on what may be the most perilous subject in politics.

Both candidates were asked about abortion in their debate Sunday. Governor Dukakis said he opposed it but would leave the final decision to "the woman in the exercise of her own conscience." This is the established "pro-choice" position. Mr. Bush meandered; in essence, he said he would make abortion illegal except in cases of incest, rape and danger to the mother's life. This is close to the "right to life" position, but not as absolute as the Republican platform, which puts the fetus first in all cases.

Yet he floundered when asked whether, if abortions were illegal, women who had them should go to jail. "I haven't sorted out the penalties," he said, adding: "Once that illegality is established, then we can come to grips with the penalty side, and of course there's got to be some penalties to enforce the law, whatever they may be."

James Baker, Mr. Bush's campaign manager,

immediately sensed danger and called reporters together to dispense a corrective line: Mr. Bush had thought about the question overnight; only doctors should be punished.

That argument will not satisfy pro-choice forces who say that penalizing doctors would still restrict choice and drive women into the hands of back-alley quacks. It won't satisfy pro-lifers who want sinners behind bars. It might satisfy those who detest abortion but don't want women to go to jail.

But the problem here is not Mr. Bush's latest position. It's the fact that after eight years as Vice President, and 15 years after the Supreme Court permitted abortion, he still needed more time to think about the question. He noted that his position had been "evolving in favor of life." But if that process had involved disciplined thought, he would surely have asked himself how the pro-life position would work. By penalties? And on whom?

Mr. Bush seems vaguely inclined toward incentives for women to resist abortion. He twice declared a preference for adoption, not abortion. A positive position is one thing; a well-thought-out one is another. Candidates often misspeak; aides often clarify. But Mr. Bush's confusion was a failure of thought, not of words.

SULLIVAN

THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release

March 10, 1989

REMARKS BY THE PRESIDENT
AND SECRETARY OF HEALTH AND HUMAN SERVICES DR. LOUIS W. SULLIVAN
AT SWEARING-IN CEREMONYDepartment of Health and Human Services
Washington, D.C.

10:18 A.M. EST

THE PRESIDENT: To members of the United States Congress here, Senate and House; members of the President's Cabinet; to Judge Higginbotham, who'll be doing the honors here in a little bit; and old friend, Senator Ed Brooke, whom I'm so glad to see; distinguished dias guests; and, of course, the Sullivan family. Just let me say that Barbara and I are very pleased to be over here.

I know the Sullivans, but I didn't know that Halsted Sullivan, outstanding student, president of his school, I believe, the University of Virginia, could sing. But you heard him, not miss a note -- unbelievable. (Applause.)

But, Lou, before beginning, I do want to make an announcement today. I think it's one that concerns people and everyone in this room. It's about a public health issue that I know this audience particularly can appreciate -- then a few words about our new Secretary. But this one relates to the health and well-being of our environment. I want to announce an important step that we're taking to address an environmental issue of great concern, and that is the transboundary movement of hazardous wastes.

During the past year, there have been many accounts of the risks to human health and the environment, too, posed by certain exports of hazardous waste, particularly the developing countries. And the U.S. has been a world leader in requiring the informed consent of receiving countries before allowing such exports of hazardous waste. And I intend to continue and to extend this leadership role by seeking new legislation that will give the United State government authority to ban all exports of hazardous waste except where we have an agreement with the receiving country providing for the safe handling and management of those wastes.

We're determined to work with other concerned governments to exercise wise stewardship over our environment, particularly where matters of health are concerned.

Now, on to the business at hand. The swearing-in of Dr. Louis Sullivan is a proud day for all involved -- for this Department, whose dedicated workers are welcoming as their new leader a man of energy, enthusiasm, and intellect; for Dr. Sullivan's family -- Ginger, Paul, Shanta, and Halsted -- whose share in Lou's success has been beyond measure; and for all of us who know Lou, admire him, and consider him our friend.

Dr. Sullivan has enjoyed a distinguished career as physician, scientist, scholar, teacher, administrator. But what sets Lou Sullivan apart is that "something extra" he brings to his work -- a sense of mission.

As the first president of Morehouse -- in this instance, Morehouse School of Medicine -- Lou made it his goal not only to

MORE

train a new generation of minority physicians, but to instill in them this sense of service -- a commitment to minister to communities in our inner cities and in rural America, where health care facilities are stretched thin and doctors are in short supply.

In the past seven years, Barbara and I have taken a special interest in the work being done by Dr. Sullivan at Morehouse. I knew that a man of his vision could contribute to our national well-being, in much the same way he contributed to the health and well-being of so many people throughout his career in medicine.

Lou, the assignment that you are about to undertake is among the most diverse and difficult public service has to offer. The Department of HHS is involved in a vast enterprise. You command a \$400 billion budget and 114,000 employees. And in all, your responsibilities range from regulating food and drugs and conducting major medical research to providing support and care for the elderly, the disabled and the disadvantaged.

What this Department does affects the life of each and every American -- and especially the lives of the least advantaged among us.

I know, Lou, that we spoke about the scope of the administrative challenges that you face here at HHS. But I'm not sure I mentioned to you that your budget ranks fourth in the world -- behind the U.S., the Soviet Union, and Japan. Then comes HHS. (Laughter.) Do not declare your independence. (Laughter.)

We look to you and the HHS team to meet a number of major challenges in the years ahead. We ask to you to work to get better value for health care dollars, targeting effective services, finding ways to contain the escalating costs of medical care without compromising the quality health service.

Work to sustain programs like AFDC -- Aid to Families with Dependent Children -- and Head Start, that help build the foundation for families and children to overcome disadvantages and difficult circumstances, to succeed and grow strong.

Advance our understanding of the AIDS virus and move us towards a cure. And to that end, I've directed HHS to pull together 23 separate AIDS projects now in progress into a more focused effort under the direction of the Public Health Service. I've called on Congress to provide \$1.6 billion for the Public Health Service efforts in 1990 -- that's an increase of 24 percent over 1989.

And, finally, Lou, I know you'll take a position right on the front line, joining, I'd say, everybody in our Cabinet and certainly all here in the war on drugs. Too many lives have been imperiled or lost to drugs -- too much human potential is being ground up and wasted. I've said it before, but this scourge must stop.

And I'll need you to train scientists, to conduct the right kind of research; I'll look to you to assess the data on drugs and tell us where and how to respond; and I'm counting on you to see that state organizations and hospitals, volunteer groups get the kind of technical assistance they need to help us win this battle.

I'm asking you to work with me, with Bill Bennett, to find solid strategies for the prevention of drug abuse and effective treatment for those already caught in the trap.

And so, Mr. Secretary, I hope these and the many challenges that I have not named will be enough to keep you busy. Rest assured you'll have help. The staff over here is among the most talented and dedicated in the federal service. And they understand the importance of the work that they do -- and the difference that HHS makes in the lives of the many millions of Americans served by

this Department.

HHS is the Department that, more than any other at the federal level, gives shape and form to the promise that America makes its people -- the promise I've made to you -- to fashion for ourselves, yes, a kinder and gentler nation, and to take care of those in need, especially our children and the elderly; to steady those who seek only an opportunity to better themselves and their families.

So it is noble work that you all are engaged in. And, Mr. Secretary, as you make this responsibility your own, you have our sincere best wishes, my complete confidence and my full support.

And now on to the brief, but important, formal ceremony of swearing in Lou Sullivan as the next Secretary. (Applause.)

(Dr. Sullivan is sworn in.)

DR. SULLIVAN: Mr. President, Mrs. Bush, friends and colleagues, let me thank all of you for being here. As you might imagine, this is a special moment for the Sullivan family.

Mr. President, thank you for your friendship, your trust, and your confidence. Mrs. Bush, as a friend, for your work as a trustee of the Morehouse School of Medicine, for your efforts to advance literacy, for your help to those in need, thank you for reminding all of us of the importance of love, compassion and care for our fellow man.

I'm also grateful to Senators Dole, Simpson, Mitchell, Bentsen, Packwood, Kennedy and Hatch, Thurmond, and many others for their assistance in the Congress. Congressman Newt Gingrich and the entire Georgia delegation, I'm grateful for your support.

God has been good to Lou Sullivan for the past 55 years. And things have been particularly bright since I had the good sense to marry Ginger some 34 years ago. (Applause.) I've been blessed with a fine family. And for 21 years, I learned, practiced and taught medicine and conducted research in some of the nation's finest medical institutions. Then in July of 1975 I accepted the opportunity of a lifetime -- to develop a medical school that would concentrate its energies on the education of those minorities who had been overlooked. It was a chance to see that young blacks, Hispanics, Native Americans who might otherwise not have an opportunity were given the same opportunities that I had received as a young man.

There's a special place for the Morehouse School of Medicine in the hearts of Lou and Ginger Sullivan. There's a special place in the hearts of the Sullivans for the people who worked so hard and unselfishly to make that school a reality -- many of whom are here today and we count among our friends.

When I was installed on July 1, 1981 as the first president of the medical school upon its gaining independence from Morehouse College. It never entered my mind that I would ever consider doing anything else. But one day a friend called. So here I am, Mr. President. (Laughter.)

There is no title, no award, no recognition which can compare to the trust of a friend. The honor of that call, Mr. President, will never be forgotten. You have given me the opportunity to serve; to serve you and our nation. You've given a challenge to me and to this Department, and I want you to know we will meet that challenge.

We will work to assure the ongoing solvency of programs like Social Security and Medicare. We will work hard to find ways to contain escalating medical costs without sacrificing our goal of

quality health care for all. We will continue to look for ways to better serve our nation's poor and help them work their way out of poverty. Those programs like Aid to Families with Dependent Children and Headstart, which have been so beneficial to our disadvantaged citizens, will be sustained.

Mr. President, we are challenged to continue a strong biomedical research effort in our quest for a cure for AIDS -- this disease which destroys our youth and saps our nations vitality. We will continue our assault against cancer, heart disease, diabetes, arthritis, and the many other disorders afflicting our citizens.

The issue of drugs in our society is a problem that affects us all. It eats at the fiber of our families and at our very social structure. President Bush, today this Department joins with me in a commitment to work with you and with our drug advisor in doing all that we can to halt this terrible epidemic.

With your challenge, Mr. President, you've given us the opportunity to shape the future. To shape the future through the development of health promotion and preventive medicine strategies; to shape the future through the implementation of last year's welfare reform legislation. We will seek ways to strengthen family life in our country and to restore our sense of community, our shared sense of responsibility and commitment to each other.

We have been given the opportunity to stress the value of every life through the promotion of adoption and by focusing our efforts on the poor, the disadvantaged, and the neglected in our society. We have the opportunity to see that rural and inner-city health needs are not forgotten, that the poor of our nation are cared for properly and with dignity. The health of our minority citizens, Black, Hispanic, Native American, and those others who have yet to fully realize the American dream, is the concern of us all.

Mr. President, you've called for a kinder and gentler nation -- a goal which I support with enthusiasm. As you have noted, there's no other department or agency of our government where that call can be more directly implemented than here in Health and Human Services. Health and Human Services is the hub of a vast wheel whose spokes radiate out to touch all Americans, from the onset of life through health and sickness; from the foods we eat to the medicines we take. Our children, our parents, our youth, our seniors, all are affected by the activities of this vast agency.

During my tenure, the offices of the Department will have a human face. The regulations promulgated will carry a gentle touch. Health and Human Services employees will be bound by the hallmark of service and take their pride in the health and assistance offered their fellow Americans.

Mr. President, you have delivered today a challenge. You have granted an opportunity. I'm grateful to you, sir. I accept your challenge. I cherish the opportunity. I will keep your trust. Thank you, Mr. President. (Applause.)

END

10:37 A.M. EST