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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. memo	Bob J. Nash to Leon Panetta re: Surgeon General Issue and Recommendations (6 pages)	11/14/1995	P2, P5
002. list	Contact list for organizations and individuals [partial] (2 pages)	10/03/1995	P6/b(6)
003. list	Contact list for organizations and individuals [partial] (1 page)	09/27/1995	P6/b(6)

COLLECTION:
Clinton Presidential Records
Domestic Policy Council
Lyn Hogan
OA/Box Number: 11027

FOLDER TITLE:
Teen Pregnancy - Foster Announcement

2010-1083-S
rc120

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [a)(5) of the PRA]
P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

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b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

M E M O R A N D U M

To:	Carol Rasco Jeremy Ben-Ami	cc:	Dan Porterfield, HHS MaryBeth Donahue, HHS Lisa Gilmore, HHS
From:	Lyn Hogan		Elizabeth Drye, DPC
Date:	July 15, 1996		
Re:	Dr. Foster Implementation Plan		

As you requested, I have worked with HHS to develop what we think is a realistic implementation plan for Dr. Foster's activities as Senior Advisor to the President on Teen Pregnancy and Expert Advisor to Secretary Shalala and CDC Director David Satcher.

Generally, I discussed with MaryBeth Donahue, Dan Porterfield and Lisa Gilmore (all at HHS) which activities Dr. Foster can carry out for us and when. Between now and the end of August, Dr. Foster has several non-Administration speaking engagements scheduled, and is then on vacation for two weeks of the summer. We are also assuming you do not want Dr. Foster speaking during either of the August conventions.

That said, it makes sense to set up site visits and speeches for Dr. Foster during September through November. We can easily set up events for Dr. Foster in conjunction with other non-Administration events he already has scheduled. MaryBeth Donahue will work from the Foster memo to put together a realistic schedule for Dr. Foster for September though November.

Nuts and Bolts Implementation

The next question is, given the limited resources we have to work with, how best can we get this plan off the ground? I took the key activities discussed in the 6/28/96 Foster memo and broke them into the actions and responsibilities. I then went over these in a conference call with MaryBeth, Dan, and Lisa and received some excellent feedback.

Following is the draft implementation plan we developed, much of which is already being done by HHS. Once we receive your approval, we'll share it with Dr. Foster and get under way.

Implementation Plan

Key activities should include:

Speeches
Congressional testimony
Site visits
Media Interviews
Meetings With White House, HHS, CDC Officials
Liaison to local communities addressing teen pregnancy issues
- Advice on initiating a program
- Reporting progress of specific strategies and affects on the community

Actions to Implement and Delineation of Responsibilities:

Scheduling site visits and/or speeches, Dr. Foster's travel, filing for reimbursement

HHS/CDC: Half-time person at the Centers For Disease Control is currently responsible for these activities.

Preparing briefing memos, talking points and/or speeches

DPC/Lyn Hogan: These materials will not always be needed, but when they are, I will produce them with a final sign-off from both of you and HHS.

Staffing Dr. Foster at events

DPC/HHS: We will decide on a per-event basis whether or not Dr. Foster needs to be staffed and who will staff him. There is no available personnel or funding for personnel to staff Dr. Foster, so we will have to split these responsibilities with HHS as needed.

Media preparation/media calls

HHS: Dan Porterfield, Lisa Gilmore, and Marybeth Donohue currently coordinate press requests with Lorrie McHugh. This process has been in place and works quite well, so there is no reason to change it.

Contact for Dr. Foster's Liaison Functions/Reporting Etc.

DPC, Lyn Hogan: During Dr. Foster's site visits and though his travels, he learns about and gathers information on community-based teen pregnancy prevention initiatives around the country. I'll serve as a clearing house for that information so we are always up to date on what Dr. Foster is learning.

Dr. Foster meetings with The White House, HHS and CDC

Dr. Foster: To date, Dr. Foster either sets up meetings as needed or receives meeting requests through us or HHS. We'll continue operating this way.

Bi-monthly progress/scheduling meetings

DPC/HHS--Lyn Hogan and Marybeth Donohue: There has been no coordinated progress reports with Dr. Foster. Marybeth and I will schedule a bi-monthly phone conference with Dr. Foster and I will follow-up with a brief memo to both of you after each phone conference.

To: Dan Porterfield
Marybeth Donohue

cc: Carol Rasco
Jeremy Ben-Ami
Elizabeth Drye

From: Lyn Hogan

Date: 7/12/96

Re: Implementing Dr. Foster's Schedule

Following is a breakdown of what I view as Dr. Foster's key activities, the actions needed to implement these activities, and my **suggestions** as to who should be responsible for which activity. When we talk Monday morning, I'd appreciate your feedback on the list below.

Thanks!

Key activities should include:

Speeches
Congressional testimony
Site visits
Media Interviews
Meetings With White House, HHS, CDC Officials
Liaison to local communities addressing teen pregnancy issues
- Advice on initiating a program
- Reporting progress of specific strategies and affects on the community

Actions to Implement and Delineation of Responsibilities:

Scheduling site visits and/or speeches
HHS/CDC

Scheduling Dr. Foster's travel, filing for reimbursement
Dr. Foster

Preparing briefing memos, talking points and/or speeches
DPC/Lyn Hogan

Staffing Dr. Foster at events
HHS/??

Media preparation/media calls
HHS/Press--Dan Porterfield and/or Lisa Gilmore

Contact for Dr. Foster's Liaison Functions/Reporting Etc.
DPC/Lyn Hogan

Dr. Foster meetings with The White House, HHS and CDC
Dr. Foster

Bi-monthly progress/scheduling meetings
DPC/HHS--Lyn Hogan and Marybeth Donohue

Monthly progress report to Carol Rasco and Secretary Shalala
DPC/HHS--Lyn Hogan and Marybeth Donohue

THE WHITE HOUSE

WASHINGTON

June 28, 1996

MEMORANDUM FOR CAROL RASCO

FROM: Kevin Thurm, HHS
Jeremy Ben-Ami

SUBJECT: Outreach Plan for Dr. Foster

Since Dr. Foster assumed his position as Senior Advisor to the President on Teen Pregnancy and as Expert Advisor to Secretary Shalala and CDC Director David Satcher, he has been active with local and national groups on this issue, particularly as the President's liaison to the National Campaign to Reduce Teen Pregnancy. He has also maintained an active part-time public schedule, which has included speeches, congressional testimony, site visits, and media interviews. To compliment these activities, in coordination with him, we would like to focus more on an outreach program.

We define the outreach activities in two areas: speeches and site visits. Dr. Foster's schedule will continue to include appropriate meetings with the White House, HHS and CDC officials on teen pregnancy and youth policy in which he fulfills his advisory and consultant functions. In addition, following the summary is a proposed outline of his activities over the next several months.

1. Public Speaking Role

Dr. Foster serves an important role in carrying the President's message on teen pregnancy prevention. By being publicly active, he is able to demonstrate the President's commitment to teen pregnancy prevention, while educating people about the Administration's approach to this issue.

In coordination with the White House Office of Public Liaison, HHS and teen pregnancy groups, we have instituted a system to help Dr. Foster pro-actively seek major opportunities to speak to national audiences and large groups and to prioritize invitations for his time.

2. Outreach to State and Local Communities

Dr. Foster also serves as a liaison to local communities addressing teen pregnancy issues. These communities are at various stages in organizing their efforts: some want advice about how to initiate a program, while others want to let us know about their progress on a specific strategy and its positive effects on the community. To enrich Dr. Foster's understanding of these programs, we are arranging for him to regularly visit communities or programs that the Administration has funded. For each site visit, we have asked Dr. Foster to visit and tour a local program that is part of a community-wide network, have a working meeting with its organizers, and pursue speaking or media

opportunities.

Specific grant programs from which we would choose our sites include those funded by CDC's Community Coalition Partnership Programs for Prevention of Teen Pregnancy and OPA's Adolescent Family Life Grants.

- **Community Coalition Partnership Programs for Prevention of Teen Pregnancy**: This program was launched by this Administration under CDC in September of 1995. At that time, we awarded 13 grants totaling $6.5 million over two years to community coalitions to work with youth in preventing unwanted pregnancies. They aim to enable communities to develop plans for implementing and evaluating community-wide interventions that are innovative, comprehensive and sustainable.

  NOTE: In informal conversations, CDC said that site visits by Dr. Foster would be very helpful in generating local media about these community efforts. The majority of partnerships funded include good programs, but in many cases there is a low level of awareness in the region about these programs and the services they provide. CDC said that radio coverage, for example, would be helpful in reaching out to community members.

- **Adolescent Family Life Grants:** In September of 1995, HHS's Adolescent Family Life Program awarded 15 grants totaling $4.2 million dollars for comprehensive demonstration programs aimed at preventing early teenage sexual activity and reducing teenage pregnancies. These programs feature innovative ways to emphasize abstinence as the best way to prevent adolescent pregnancy and to encourage the involvement of parents in these discussions with their children. The program is administered by the Office of Population Affairs under Title XX. (Note: Many of these programs actually target secondary pregnancy prevention for parenting teens.)

- Other programs we have learned about that seem to be successful community-wide grassroots interventions that we would like Dr. Foster to visit.

3. Media

Similar to the process instituted to assist Dr. Foster in prioritizing requests for public appearances, we have developed a system for evaluating, with Dr. Foster's input, media requests. Over time, we seek to have a mix of national coverage with regional and local press. In particular, we anticipate that Dr. Foster will highlight community-based programs during his site visits.

Attached is a draft schedule of suggested travel for Dr. Foster that builds on both of these priority activities.

SUGGESTED ACTIVITIES FOR DR. HENRY FOSTER

Following is a list of sites and initiatives funded by HHS which might be appropriate for a visit by Dr. Foster between now and the end of the year.

NOTE: This does not include previously scheduled engagements, and only attempts to outline suggestions for activities on behalf of the Administration in compliance with legal limitations on time allocated for such activities. We expect the Office of Public Liaison to request Dr. Foster as a speaker for additional conferences as well.

Emory University; Atlanta, GA: The AFL program is currently funding The Emory University School of Medicine to expand Postponing Sexual Involvement (PSI), a three-tier educational series developed by Marion Howard, to reach over 9,000 young men and women and their parents. The series emphasizes the need for age-appropriate abstinence messages which are continually reinforced from elementary school through high school. PSI is well known program model and many other communities have tried to replicate it. Dr. Foster could visit a school where the curriculum is used.

Lula Belle Stewart Center; Detroit, MI: (AFL grant) This center, also currently funded by the AFL program, provides prevention and care services for the low-income population in the urban Detroit/Wayne County area. Prevention efforts aim to increase both the knowledge base about pregnancy and disease prevention and communication between parents, adolescent, and pre-adolescent youth. The program focuses on primary and repeat pregnancies.

NOTE: There are other programs in the area that Dr. Foster could reach out to that are not currently federally funded.

Truman Medical Center, Kansas City, MO (AFL Grant): Kansas City's Teen Mentors of Mothers (MOMS) program at the Truman Medical Center provides support and assistance in accessing community services for pregnant and parenting adolescents through culturally-matched mentors. Mentors meet weekly with teens to aid in problem-solving about managing the difficulties of early childbearing. Support groups are also organized specifically for male partners, younger siblings and grandparents. This program focuses on repeat pregnancies. It is a care program providing services to pregnant and parenting teenagers.

Working with Adolescents in Time (WAIT); Kansas City, MO (CDC): The Maternal and Child Health (MCH) Coalition of Greater Kansas City is the lead organization for this grant, and for an existing teen pregnancy prevention community coalition called Adolescent Pregnancy Prevention Committee. The Coalition has already been highly successful in a number of community collaborative efforts, including immunizations. Areas selected for implementation of the grant are in Wyandotte County, Kansas and Jackson County, Missouri where the teen birth rates are 50% above national average. The area also encompasses the empowerment zone in MO and KS. It is a high crime and poverty area that has a high concentration of African American adolescents--whose birthrate is said to be over double that of their white counterparts.

University of Arkansas/Arkansas Dept. of Education (AFL Grant): The Sex Can Wait program educates students about pregnancy prevention in the 16 districts in rural Arkansas, where in some counties the rate of teen pregnancy is among the highest of any identifiable group in the world. The program's approach includes outreach to minority populations, parental education to promote family communication about sexuality, contraception, STD's and HIV/AIDS, and male involvement to promote male responsibility in pregnancy and parenting.

Family Planning Council of Southeastern Pennsylvania, Inc.; Philadelphia, PA (CDC): Family Planning Council is a private-non profit organization serving the five-county Philadelphia area. As the Title X family planning grantee for Philadelphia, the Council directs a network of health agencies that provide comprehensive family planning services to over 102,000 low-income individuals. The Council started the Health Resource Center Program (HRC) in 1991. Its goal is to reduce rates of unintended pregnancy, STD and HIV by establishing school-based, drop-in centers where students receive education, counseling, and condoms with referrals for health services and contraceptive care. It is now operating in 11 Philadelphia schools, and works with health care providers, a health-related telephone hotline, the Public Schools System and the Department of Public Health to implement it.

Five of the 11 schools with HRCs are located in neighborhoods with extremely high teen birth rates; these neighborhoods are the focus of the grant. The neighborhoods are in North Central Philadelphia, and are culturally diverse high crime and poverty areas. They also include two Empowerment Zones. The Council proposes to expand the existing partnership by creating local coalitions convened by each HRC, which will include teens, faculty from the high school and feeder middle schools, parents and service agencies. They have developed a plan to prevent teen pregnancy and specific goals for implementation.

Mercy Hospital; Pittsburgh, PA (AFL Grant): Mercy Hospital is coordinating a continuum of services to meet the physical, emotional, psychological and educational needs of pregnant and parenting teens, while expanding school-based prevention education programs. The program offers services to prevent first and repeat pregnancies.

Family Health Council Adolescent Resource Network; Pittsburgh, PA (CDC): FHC is a private non-profit that provides services including family planning, prenatal and obstetrical care, nutrition, pediatrics, state licensed adoption and community sexuality related education. It has a major initiative in Alleghany County to prevent teen pregnancy (Adolescent Resource Network), and another to reduce women's risk of HIV/AIDS infection. FHC has also received two other grants from CDC through the PA Department of Health that are based on coalition building: one focuses on STDs among teens and the other supports the creation of a network of providers and community based organizations to do breast and cervical cancer screening and education.

FHC plans an effective teenage urban primary pregnancy prevention program for teens for implementation over a 2-year period aiming for a 10% decrease in teen pregnancy by the year 2000. It is working with community partners, including: Blue Cross, Children's Hospital, and Magee-Women's Hospital.

City of Milwaukee Health Department; Milwaukee, WI (CDC): Although there are many teen pregnancy prevention programs in Milwaukee, rates have remained high because efforts have been fragmented. The CDC grant money is being used to continue and expand efforts already started by the Milwaukee Metropolitan Adolescent Pregnancy Prevention Consortium, which is serving as the lead agency for a consortium of over 70 provider agencies, parents and teens, school and elected officials, and the religious community.

Another program to note:
Urban League of Milwaukee Male Adolescent Responsibility Project: This is a primary prevention program targeted at middle school male students. It aims to instill a sense of pride in their heritage and hope for their future.

Inwood House Project, Bronx or Brooklyn, NY: This project, currently funded by the AFL program, will expand a current program called TEEN CHOICE to operate in three urban junior high schools with high teen pregnancy rates in Brooklyn and the Bronx. TEEN CHOICE works with abstinent students to postpone sexual involvement, and teaches sexually active students how to protect themselves from pregnancy and disease. Parents are involved with the program, which promotes improved communication between parents and children on sexuality issues.

Illinois Caucus for Adolescent Health, Chicago, IL (CDC): The Illinois Caucus is a non-profit organization focusing on policy advocacy and public education to improve the health of adolescents, particularly teen parents and those at high risk for pregnancy. It is a state-wide membership group with foundation funding, that is using the CDC grant to work with three communities to develop coalitions to prevent teen pregnancy. Communities served are Westtown (62% Latino), Humboldt Park (50% African American, 50% Latino) and Near Westside (67% African American). The Caucus has a significant community base and is staffed by community residents. The Coalition implementing the grant is made up of 7 community-based groups: Erie Teen Health Center, Vida Sida, Youth Services Project, Chicago Commons, Mile Square Health Center, West Side Future and Chicago Boys and Girls Clubs Horner Center. The Coalition is specifically working to establish or improve: a case management system for young people who have not become pregnant or caused a pregnancy, parent/child communication programs, male responsibility programs, integration of pregnancy prevention and HIV/STDs prevention, and peer education programs.

The Springfield Urban League, Inc. Adolescent Responsibility Program: This is a comprehensive primary prevention program for 90 adolescent males and females aged 7-17 that aims to foster responsible behavior and development of intrapersonal skills and self-esteem. The program draws support from volunteer "positive role models" who teach the classes, serve as chaperons, tutors, etc. The program has the following components:

- Education, mentoring and tutoring which includes 38 sessions held weekly for two hours each.
- Parenting support group for parents of program participants.
- A community awareness campaign directed at adults and teens.

Trustees of Health and Hospitals of the City of Boston: This is the "hub" organization in Boston, where the Adolescent Pregnancy Prevention and Intervention Network was formed as a new initiative. It is a public/private effort by the Boston Department of Health and Hospitals, the Boston Public Schools and the Alliance for Young Families to pool resources among the many teen pregnancy prevention programs in Boston, targeting 5 neighborhoods where teen birth rates are highest. (Alliance for Young Families is a non-profit consortium of human service and health care agencies in MA that works to prevent teen pregnancy, promote adolescent health and meet the service needs of pregnant and parenting teens and their children. One of its four programs is the Boston Initiative for Teen Pregnancy Prevention which coordinates a broad-based 300 member citywide coalition promoting postponement of early childbearing through responsible decision-making.)

Examples of specific sites in the Boston area that Dr. Foster could visit include:

The Urban League of Eastern Massachusetts' Youth Education and Development Program; Roxbury, MA: This is primarily a school-based program that started 8 years ago, working with African American and Latino males (8-15) in the Roxbury, Dorchester, Jamaica Plain and Mattapan areas. The program serves boys who come from single parent families with incomes at or below the poverty level, and aims to provide a vision for participating boys for their futures as students, workers, and parents by developing confidence, academic and employability skills, values and a sense of responsibility. The Director of this program participated in a meeting with the President and Dr. Foster this year.

Geiger-Gibson Community Health Center; Dorchester, MA: Teen Pregnancy Prevention and Healthy Start Programs has historically served pregnant and parenting teens, but has added a focus on prevention of primary and secondary pregnancies through case management services. With an emphasis on education, the program aims to teach girls and boys to set goals and avoid anything like young motherhood or fatherhood, violence or drugs that might get in the way.

There are additional programs around the country that we could recommend that are not funded by these programs; for example:

Girls Incorporated of Metro Denver. The national Girls Incorporated Preventing Adolescent Pregnancy is one of the programs included in *The Best Intentions*, compiled by the Institute of Medicine. The Denver chapter has adapted the program, which includes four age appropriate curricula addressing the needs of girls 9 to 18, covering: developing parent-daughter communication, assertiveness skills and the ability to say "no," awareness of contraception and disease protection, and career and education planning. The program was started in 1989, serves Hispanic (53%); African American (16%) and White (16%). In addition to their own facility, Girls Inc of Metro Denver sponsors teen pregnancy prevention programs in middle and elementary schools in Denver. It works with other community organizations, such as Girl Scouts, Boys and Girls Clubs, and a community health center.

THE WHITE HOUSE

WASHINGTON

HOW TO REACH DR. HENRY FOSTER

Senior Advisor to the President for Teen Pregnancy and Youth Issues
Expert Advisor to the Secretary of the U.S. Department of Health and Human Services
and
to the Director of the Centers for Disease Control and Prevention

At Meharry Medical College

Meharry Medical College
Department of OBGYN
1005 D.B. Todd Boulevard
Nashville, Tennessee 37208

phone: 615/327-6444
fax: 615/327-6151

At the U.S. Department of Health and Human Services

Room 717H
200 Independence Avenue, S.W.
Washington, D.C. 20201

phone: 202/260-0217
fax: 202/205-1740

Please note that this is effective as of today, February 8, but is subject to change.

National Association of School Nurses, Inc.

P.O. Box 1300
Scarborough, Maine 04070-1300
207/883-2117 *FAX 207/883-2683*

March 13, 1996

Dr. Henry Foster
Senior Advisor to the President
for Teen Pregnancy and Youth Issues
c/o Gregg Simon
Chief, Domestic Policy
Office of the Vice President
Old Executive Office Building
Washington, DC 20502

Dear Dr. Foster:

On behalf of the National Association of School Nurses (NASN), I am writing to express our support of your efforts, as Senior Advisor to the President for Teen Pregnancy and Youth Issues, to reduce teen pregnancy.

I was pleased to have the opportunity to represent NASN at the Teenage Pregnancy Briefing and publicly address the role of school health nurses and strategies that have been effective in reducing teen pregnancy.

On behalf of NASN and school health nurses nationwide, I want to stress how important this campaign will be to teenage youth, and offer our support and assistance.

NASN is a 9,500 member specialty nursing practice organization whose mission is to promote the delivery of quality health programs to America's children and youth.

Thank you for allowing me the opportunity to support your efforts.

Sincerely,

Carol Costante

Carol Costante
NASN President Elect

Foster support/support

E X E C U T I V E O F F I C E O F T H E P R E S I D E N T

01-Feb-1996 12:47pm

TO: (See Below)

FROM: Janet B. Abrams
Office of the Vice President

SUBJECT: Teen Pregnancy

As you know, earlier this week, the President announced that a group of private-sector leaders is now ready to launch a campaign to reduce teen pregnancy. He also announced Dr. Henry Foster's appointment as a special advisor to the Administration on teen pregnancy and youth issues. These announcements have generated much public interest.

Please forward any calls you may receive as follows:

For those (press or other) who want to speak with Dr. Foster directly -- have them call his office at Meharry Medical School at 615-327-6444.

For calls about the national private-sector campaign or about the Administration's activities related to teen pregnancy in general -- please direct press calls to the WH Press Office, and direct any other inquiries to Janet Abrams (yours truly) at 456-2857.

Thanks very much.

Distribution:

TO: Ruth Eaglin
TO: Peggy A. Clark
TO: Kathy McKiernan
TO: Lorraine McHugh
TO: Virginia M. Terzano
TO: Mary Ellen Glynn
TO: Dorothy L. Karayannis
TO: Marilyn Yager
TO: Lee A. Satterfield
TO: Stacey L. Rubin
TO: Ann M. Cattalini
TO: Skila S. Harris
TO: Lorraine A. Voles
TO: Elaine C. Kamarck
TO: Deborah R. Both

TO: Evan M. Ryan
TO: Ruth Eaglin for Bob Nash

CC: Jeremy D. Benami
CC: Deborah L. Fine

THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release January 29, 1996

REMARKS BY THE PRESIDENT
IN STATEMENT ON TEEN PREGNANCY

The Roosevelt Room

11:53 P.M. EST

THE PRESIDENT: Thank you. Thank you. Thank you, Secretary Shalala, Dr. Foster, to the distinguished American citizens who are here behind me, and all of you who are out here with them. I thank the members of Congress who are here: Senator Pell, Senator Murray, Senator Chafee, Congresswoman Clayton and Congressman Stokes. Thank you all for being here and for your interest in this important issue.

In the State of the Union address I said that I felt our country was facing seven great challenges that we had to meet together as a community, challenges that we could not solve if our people were simply left to fend for themselves. I do believe that we are moving into a period of enormous possibility for our people. I honestly believe that for Americans who are positioned to take advantage of the world that we're living in and the one toward which we are going, there will be more opportunities to fulfill their dreams than ever before in our history.

But I also know that many, many Americans -- indeed, millions of Americans will be blocked from that age of possibility unless we succeed in meeting all these challenges. And the very first one that I started with in the State of the Union is the one I want to talk about today -- our obligation to cherish our children and strengthen our families.

Secretary Shalala talked about the efforts we're making in welfare reform and how it relates to this. And we've talked elsewhere about what we're trying to do to discourage young people from smoking because that presents, by far, the greatest health damage that they face today.

This morning we want to talk about teen pregnancy, because it is a moral problem and a personal problem and a challenge that individual young people should face, and because it has reached such proportions that it is a very significant economic and social problem for the United States. The rates here, of course, are mirrored in many other countries in the world, but they're also causing the same kind of problems elsewhere, and that doesn't make it right.

Teen parents often don't have the education they need, don't have the self-awareness they need, don't have the self-confidence they need to make the most of their own lives in the work force or to succeed themselves as parents.

We know, too, that almost all the poor children in this country are living with one parent; that there are very, very few poor children, without regard to race, region or income, living in two-parent married households. We know that there are an awful lot of good, single parents out there doing their best, but we also know it would be better if no teenager ever had a child out of wedlock;

that it is not the right thing to do, and it is not a good thing for the children's future and for the future of our country.

We also know, finally, that we all have to work together to solve this problem, and that the people who deserve the lion's share of credit are people like those who are behind me today -- people who are giving their lives to try to give our young people things to say yes to, to try to give our young people a sense of self-confidence, a sense of identity and a sense of the future so that they can make good personal decisions about their own lives.

Members of our administration have been meeting with citizens like these folks from all sectors of our society, and from all over the country, to determine whether we could help to support the establishment of a new national organization that would expand upon and reinforce and elevate these community-based efforts.

This is not a problem which can be solved in Washington. This is not a problem that can be dealt with by a politician's speech, no matter how statesmanlike. This is a challenge that has to be dealt with one-on-one-on-one throughout this country. But there are things, as these people have told me today, for political leaders to do, there are things for business leaders to do, there are things for people in the media to do, things for the health care system to do.

And I am very pleased that from the grass roots, we have gotten input about how you ought to design the right kind of national campaign against teen pregnancy. And today I am pleased to announce that a group of very prominent Americans will agree to become the first leaders for the National Campaign to Reduce Teen Pregnancy. A dozen are ready to begin the effort, including leaders in the field of helping our young people, like former Surgeon General Dr. Koop and David Hamburg of the Carnegie Corporations. Others who have agreed to play a role include the President of Drew University and the former Governor of New Jersey, Tom Keane; former New Hampshire Senator Warren Rudman; Ogilvy and Mather Chair Charlotte Beers; Whoopie Goldberg; former Mayor of Atlanta, Congressman and U.N. Ambassador Andrew Young, who is now the cochair of the Olympics in Atlanta; and the President of MTV, Judy McGrath.

I'd like also especially to thank Dr. Isabel Sawhill who is here with me now, and now with the Urban Institute and used to be a part of this administration, for her serious efforts and leadership in spearheading this and getting all these folks together and trying to make sure that this effort will be rooted in America's communities.

This will be a serious bipartisan effort to address this issue. We all know it ought to be an effort that goes on year-in and year-out; it ought to be completely beyond partisan politics. Many of the people who have agreed to meet, to serve, will be meeting tomorrow in New York. And within the next month this group will be up and running. When it holds its first board meeting the National Campaign to Reduce Teen Pregnancy, I hope, will be coming to the White House to discuss how we can work together and how we can all do our part to advance this important work.

Because government does have to do its part, again as I said in the State of the Union, we don't have a big government anymore, it's smaller than it was when I took office. But we don't want a weak government and we don't want to go back to the time when the American people were left to fend for themselves. We need to go forward in a sense of the spirit of partnership. And I have asked Dr. Henry Foster to serve as my senior advisor on this issue and to be my liaison to this national campaign, to make absolutely sure that we have done everything we can do to support this effort.

In his career as a doctor and through his I Have A Future program in Nashville, Dr. Foster has dedicated his energies to dealing with this complex, profoundly human problem of teen pregnancy, and he's had a remarkable amount of success. In this new role he will work in partnership with community-based organizations all across America to help give our young people the strength and the tools they need to lead responsible and successful lives.

Ultimately, I believe what is needed on this issue is a revolution of the heart. We have to work to instill within every young man and woman a sense of personal responsibility, a sense of self respect and a sense of possibility. Having a child is the greatest responsibility anybody can assume, and it's still every American parent's most important job -- I don't care what else they're doing. And it is not the right choice for a teenager to make before she or he is ready. This message has to be constantly enforced and reinforced by community organizations and by other groups who are in a position to help our children make good choices.

The last point I want to make is that everybody can play a role, and those of us who are older and no longer subject to the drama that these children live with every day find it easier to make these speeches, perhaps, than young people do, but young people are more likely to be more effective in doing it.

So I want to say a special word of thanks to one of the people who met with me today, the young gentleman here to my left, Collin Sears. He is demonstrating the kind of contribution one person can make. He has worked at Baltimore's Young People's Health Connection since he was in middle school, teaching other young people to make the right decisions and to take responsibilities for their lives.

You know, he said -- and when we were in the meeting, he was asked what was his most effective argument. And he said, "Well, I really have three strategies that I use," and he laid out his strategies. Afterward, I couldn't help thinking, if he'd been here helping me to lobby Congress on the budget, it might all be solved. (Laughter.) I was absolutely carried away that he had, sort of, thought through how he ought to get inside the mind and heart of each young person with whom he was dealing. We need to lift people like him up. We need to lift programs up, like the Best Friends program here in Washington, D.C., and I know we have some participants here.

We need to lift these comprehensive efforts up where these people are actually out there now, literally giving their lives to help young people secure a better future for themselves, and we need to do it together. Let me say that there are a lot of things I would like to see done in this country over the next four or five years. But you just imagine what a difference America could make, and what a different America we would have, if we could cut the teen pregnancy rate in half. Just imagine how it would change the whole face of the country, and the whole future of America, and how our young people think about that future.

That is really what this is about. It is an effort worth making. It ought to be completely bipartisan. We ought to commit ourselves to do it for as long as it takes, year in and year out, and we ought to root it in our communities and recognize that every one of us has a role to play, and a responsibility to play it.

Thank you very much.

END 12:06 P.M. EST

PRESIDENT WILLIAM JEFFERSON CLINTON
STATEMENT ON TEEN PREGNANCY
ROOSEVELT ROOM
JANUARY 29, 1996

[Acknowledgements: Secretary Shalala; Senators Pell, Murray and Chafee; Representatives Clement, Schroeder, Stokes, Clayton and Watt]

I'm pleased to report to all of you today about the progress being made toward launching a national effort to address the issue of teen pregnancy.

As I said in my State of the Union, we are living in an age of enormous possibility. More Americans, from all walks of life, will have more chances to build the future of their dreams than ever before. Of course, any time of great change brings its share of great challenges as well.

The first challenge I issued last Tuesday night was to cherish our children and strengthen America's families. And it is was no accident that this was the first challenge I mentioned. Family is the foundation of American life. And if we have stronger families, we will have a stronger America.

That is why we must do all we can to make sure that every child who comes into this world has two loving parents who are ready to support and care for their child. Although the teen pregnancy rate is down, over one million young women become pregnant every year. And 80% of the babies born to unwed teen mothers who dropped out of high school will live in poverty.

We must all work together to solve this problem. Last year, in my State of the Union address, I called on Americans across the country to join together in a national campaign against teen pregnancy. Today, I'm pleased to announce that a group of prominent Americans have responded and will launch a full-scale National Campaign to Reduce Teenage Pregnancy. A dozen people are ready to begin this effort, including leaders in the field, such as C. Everett Koop and David Hamburg of the Carnegie Corporation. Others who have agreed to play a role include former governor Tom Kean, former senator Warren Rudman, Charlotte Beers, the Chairman of Ogilvy and Mather, Urban League President Hugh Price, Whoopi Goldberg and MTV President Judy McGrath. And I'd like to especially thank Dr. Isabel Sawhill, of the Urban Institute, for her work in spearheading this effort.

This is a serious, bi-partisan effort to address a difficult problem in a substantive manner. Many of them will be meeting tomorrow in New York, and in the next month, this group will be up and running. And on February ___, when the National Campaign to Reduce Teenage Pregnancy holds its first board meeting in Washington D.C., I'd like to invite them to the White House to commend their commitment to this important work.

Government can and must play a part in this effort. That's why today I'm pleased to announce that Dr. Henry Foster has agreed to serve as my senior advisor on this issue, and will be my liaison to the work of the National Campaign. His own program in Nashville is a model of the type of community-based effort we are hoping to develop throughout this country.

But ultimately, this campaign must be a revolution of the heart. We must all work to instill in every young man and woman the sense of personal responsibility. They need to know that having a child is not the right choice for a teen to make.

This message needs to be reinforced to our children all the time. And this message must be carried by individuals and community organizations, like the ones represented here today. These groups, whether they are social clubs, mentoring programs or school-based classes, bear the primary responsibility of carrying this message to teenagers.

We need to make sure every teenager learns this message: Do not become pregnant or father a child before you are married, have finished with school and are ready to support your child.

This is the way we need to meet our challenges -- by working together -- on national and local levels, in families and in communities, and in the public and the private sectors.

The era of big government is over, but we can't go back to the era where we simply tell people to fend for themselves. We have to move forward to the era of all Americans working to meet our challenges together.

I'd like to thank all of you for being here today. If we all work together to solve the problem of teen pregnancy, we will make a difference.

ATTACHMENT 1

Key Points and Questions for Oval Office Discussion on Teenage Pregnancy

- (For all the State and Local program directors) What are the most important obstacles you face in starting up a new program? How can a national effort assist other individuals and grassroots efforts like yours to overcome those obstacles and get started?

- (To Donna Shalala) What is HHS doing to help communities and individuals start grassroots programs? How is the CDC demonstration program doing?

- (To Collin Sears, teenage peer counselor) What recommendations do you have as a teenager for the most effective way to reach young people? What sort of media efforts would be successful to have an impact on teen behavior?

- (To Collin and Bruce Taylor - regarding the perspective of boys) Tell me a little bit more about how differently you approach young men and young women about these issues.

- (For Belle Sawhill, Kathy Sylvester and Barbara Huberman - as activists at the national level) How do you intend to structure the efforts of the National Campaign to apply the lessons that you are learning by talking to these and other local practitioners?

DRAFT

PRESIDENT CLINTON ANNOUNCES APPOINTMENT OF DR. HENRY FOSTER AS SENIOR ADVISOR ON TEEN PREGNANCY

The President today announced the appointment of Dr. Henry Foster as Senior Advisor to the President on Teen Pregnancy and Youth Issues. Dr. Foster will also be serving as an Expert Advisor to the Director of the Centers for Disease Control and Prevention and to the Secretary of Health and Human Services.

The announcement follows the President's State of the Union address in which he challenged Americans to strengthen families and do everything possible to reduce the rate of teenage pregnancy. While pregnancy rates are beginning to come down among teenagers, one million teenage girls still become pregnant every year.

In the State of the Union, the President announced that a group of prominent Americans will launch a National Campaign to Reduce Teenage Pregnancy, designed to support grass roots community efforts in this area. A dozen people have already agreed to be a part of this effort, including C. Everett Koop, David Hamburg of the Carnegie Corporation, Urban League President Hugh Price, Whoopi Goldberg, former Senator Warren Rudman, former Governor Tom Kean, Oglivy and Mather CEO Charlotte Beers, and MTV President Judy McGrath.

Today, the President met with people working at the state and local level to reduce teen pregnancy and asked Dr. Foster to serve as his liaison to the National Campaign. Dr. Foster will also be working to bring national attention to the issue, to galvanize activity at the local level and will be advising the Administration on policies related to teen pregnancy. He will be meeting with leaders in business, media and other fields to mobilize and intensify their interest and efforts in this area.

"I am pleased that Dr. Foster has agreed to this position," the President said. "I was very disappointed last year when the Senate denied the country the opportunity to be served by this outstanding and dedicated public health leader. I am pleased that he has agreed to work with us in our efforts to reduce teen pregnancy and promote hope and opportunity for our youth."

"Teen pregnancy is one of our most pressing social problems. All of us must work together to send a clear message to our young people that staying in school, postponing sexual activity, and preparing to work are the right things to do. Nobody should get pregnant or father a child who is not married, through school, and prepared to be a parent."

Dr. Foster is presently a Professor of Obstetrics and Gynecology at Meharry Medical College in Nashville, Tennessee. He has in the past been the Dean of the School of Medicine at Meharry and Chairman of the Department of Obstetrics and Gynecology.

The appointment of Dr. Foster is effective immediately.

FOSTER Question and Answers

What will Dr. Foster really be doing?

He will be the President's ambassador to the private sector and to community organizations to stimulate their involvement in the prevention of teen pregnancy and other related problems.

> *[The President has consistently said that teen pregnancy and other problems cannot be solved by government alone. The country as a whole, and all the sectors of society such as business, religious institutions, schools, and communities will have to work together in a true partnership to address these issues. Dr. Foster will be reaching out on the President's behalf outside of government to help stimulate this partnership.]*

Dr. Foster will also be the President's liaison to efforts to establish a national campaign on teen pregnancy in the private sector.

Dr. Foster will be travelling and speaking throughout the country to national and local groups, working to bring attention to the issue and to galvanize activity at the local level.

He will be advising the Administration on issues related to teen pregnancy.

Why has it taken so long to make this announcement regarding Dr. Foster?

We began discussing possible roles with Dr. Foster right after the Senate vote. He has had an active speaking schedule and has been involved in some of the planning discussions for the private sector campaign. His announcement now is related to the impending launch of the National Campaign.

What will be done about the Surgeon General position?

There is an acting Surgeon General, Audrey Manley, and she has been serving in that capacity now for over a year. She will continue to act in that capacity, and we have no announcement to make at this time regarding another nominee for the position.

NATIONAL CAMPAIGN Question and Answers

What is the National Campaign the President talked about in the State of the Union?

In this year's State of the Union Address, the President called on leaders of all sectors of society to join in a national campaign to prevent teen pregnancy.

This year, the President announced that that call has been answered: a diverse and bipartisan group of prominent Americans are about to form a new national organization: A National Campaign to Reduce Teenage Pregnancy.

The organization will be completely independent of government, funded by private entities such as foundations and businesses. It is modelled on efforts such as the Partnership for a Drug Free America which marshalls private sector resources to address another pressing social problem: drug use.

The organization will be formalized this coming month, and the President is looking forward to meeting with its Board of Directors around the time of their first meeting.

What was the Administration's role in the creation of this organization?

This is truly a private sector organization. Administration officials and the President himself provided assistance to the group's organizers when it was helpful, but the groundwork has been laid by experts in the field who will be staffing and managing the effort once it is fully underway.

The President has felt strongly that the best way to catalyze and support a sustained effort to reduce the incidence of teen pregnancy in the U.S., the effort must be non-partisan and non-ideological.

What will this new private-sector organization do?

The specific agenda of the organization will, of course, be determined by its leadership. Activities of the new group are likely to include:

- spearheading a national grassroots campaign to make teen pregnancy prevention a priority in every community;
- launching a long-term, multi-dimensional media campaign to encourage and reinforce local efforts and instill a new ethic of responsible parenting;
- maintaining an accessible national database of teen pregnancy prevention programs and providing better opportunities for those active in the field to learn from one another;
- supporting the comprehensive evaluation of promising programs and other research as needed;

- seeking to be the most credible, independent resource available to anyone interested in preventing teen pregnancy and providing training, conferences, newsletters, briefings, and speakers.

Why did it take a year for this campaign to get off the ground?

A lot of work has gone into making sure this is a serious and successful effort. Planning funding was obtained from foundations, dozens of meetings have been held, a draft prospectus was developed, and significant outreach was conducted to find out what was happening throughout the country on this issue.

The bottom line is: Within one year of the President first calling for a new national effort, the planning group is on the verge of launching the Campaign. This has taken enormous work on the part of a lot of people around the country, and the President is pleased and grateful for their effort.

What else has the Administration done to address the problem of teen pregnancy?

The administration is releasing today a summary of its activities in the teen pregnancy area. This is a complex and multidimensional social problem without a simple solution. Our strategy emphasizes the importance of two basic values in addressing this problem: opportunity and responsibility.

> Promoting Responsible Behavior -- The President has made personal responsibility a central part of his message to young people, urging that they must not become parents before they are adults, have finished school, and are ready to support their children. He has supported welfare reform legislation that embodies this principle and tough new child support enforcement provisions that drive home the responsibility of parenthood to young men.
>
> Promoting Opportunities for Youth -- Teen pregnancy cannot be addressed in isolation from the wide range of other problems confronting youth, their families, their communities and their schools. Much of the administration's social and economic agenda ranging from education reform to empowerment zones to crime prevention programs is designed to offer young people positive alternatives to early parenting and sexual behavior.

We have worked in three primary areas to put these values into practice:

1. Research -- We have supported numerous efforts to learn more about what has caused us to have such a high rate of teen pregnancy, and to learn more about what works to reduce it.

2. Community Demonstrations -- We have also funded numerous community demonstrations to try different approaches to the problem to determine what works in practice and then to share that with other communities. These grants support local programs to prevent teenage sexual activity, promote abstinence, and reduce teenage pregnancy.

3. Private Sector Involvement -- Recognizing that government cannot solve the problem alone, we have worked hard to engage the private sector in the issue. Dr. Foster will be actively involved in that and we have worked to catalyze a major private sector campaign.

SUPPLEMENTAL INFORMATION – EXPERT OR CONSULTANT
(Submit with request for Personnel Action, SF-52)

1. NAME OF PERSON *(Last, first, middle initial)*
Foster, Henry W., Jr., M.D.

2. TOTAL PERIOD FOR WHICH APPOINTMENT IS REQUESTED *(entire year (365) days or a shorter period.)*
Not -to-exceed-one-year

3. MAILING ADDRESS

4. APPROXIMATE NUMBER OF DAYS PERSON IS EXPECTED TO PERFORM SERVICES DURING THIS PERIOD.

5. SERVICES TO BE PERFORMED:

A. EXPLAIN IN FULL THE SERVICES TO BE PERFORMED:

(SEE ATTACHED)

B. SPECIFY WHAT DUTIES WILL BE ASSIGNED THAT WILL INVOLVE THE PERSON IN THE TRANSACTION OF BUSINESS ON BEHALF OF THE GOVERNMENT WITH ANY PROFIT OR NON-PROFIT ORGANIZATION:

C. SPECIFY WHAT DUTIES WILL BE ASSIGNED THAT WILL INVOLVE THE PERSON IN THE RENDERING OF ADVICE TO THE GOVERNMENT WHICH WILL HAVE DIRECT AND PREDICTABLE EFFECT ON THE INTERESTS OF ANY PROFIT OR NON-PROFIT ORGANIZATION:

6. SPECIAL QUALIFICATIONS OF THE PERSON RECOMMENDED FOR APPOINTMENT *(List those which relate specifically to the services to be performed.)*

(SEE ATTACHED)

NOTE: Complete required certification on other side of form.

5.A

- Serve as an advisor to the Director of the Centers for Disease Control and Prevention, the Secretary of Health and Human Services, the President, and their respective staffs on matters pertaining to teen pregnancy and related adolescent health issues.

- Evaluate past and current teen pregnancy prevention programs (public and private) and, based on findings, work with CDC, DHHS and White House staff on a national teen pregnancy prevention initiative.

- Serve as a liaison between the Administration and outside leaders and groups focusing on teen pregnancy prevention.

- Participate in teen pregnancy meetings with White House and DHHS staff.

- Assist the Administration in galvanizing groups and individuals at the local level to create and implement initiatives to prevent teen pregnancy.

- Serve as a representative of the Administration on teen pregnancy issues by speaking publicly and participating in public and private meetings and events at the national and local level.

- Raise public awareness of successful state and local efforts and of the federal efforts and resources available to assist communities in preventing teen pregnancy.

6.

Dr. Foster possesses extraordinary credentials and expertise in the field of medicine and health, specifically in obstetrics and gynecology. He is certified by the American Board of Obstetrics and Gynecology; serves as Professor, Department of Obstetrics and Gynecology, Meharry Medical College, and has held many leadership positions, including Dean, School of Medicine, Chairman, Department of Obstetrics and Gynecology. He also serves on numerous committees and advisory boards at the local, regional, and national levels; received several hospital appointments; and has received major awards and honors for his work. He has been actively involved in research activities which has resulted in numerous publications in medical and scientific journals. (See CV for more details)

CERTIFICATION

In approving the appointment of this consultant/expert, I have considered the requirements of law, relevant decisions of the Comptroller General, and Office of Personnel Management Department policies and instructions. More specifically, I have satisfied myself that:

1. the services of the individual are essential for effective program management
2. the duties to be performed are those of (check one)

   _____ a consultant (that is, they are purely advisory in nature and will not include the performance or supervision of operating functions)

   ✓ an expert (that is, they require a high level of expertise not available in the regular work force)

3. the proposed appointee is qualified to (check one)

   _____ provide advisory services as a consultant

   ✓ serve as an expert as that term is used in FPM Chapter 304-1

4. the appointment is appropriately designated as (check one)

   ✓ intermittent (the individual will work occasionally and irregularly)

   _____ temporary (the individual will work on a regular basis for temporary period)

5. the appropriate appointment authority is being used
6. the pay level is appropriate for the duties to be performed and the qualifications of the appointee
7. the record of appointment has been clearly documented to show the services to be performed and the special qualifications of the appointee which relate specifically to those services
8. a statement of employment and financial interests has been obtained and it has been determined that no conflict of interest exists.

_____ Date

Signature of Program Manager Authorized to Obtain the Consultant's/Expert's Services (This certification relates particularly to items 1, 2, 3, 6, 7 and 8)

_____ Date

Signature of Appointing Official (This certification relates particularly to items 2 through 8)

QUESTIONS AND ANSWERS
on
THE OFFICE OF THE SURGEON GENERAL

DRAFT

Q AND A FROM 12/15 WHITE HOUSE DOCUMENT

Q: What will be done about the Surgeon General position?

A: There is an acting Surgeon General, Dr. Audrey Manley, and she has been serving in that capacity now for the past year. Dr. Manley is a physician who is a career officer in the Public Health Service (PHS) Commissioned Corps. During her career, she has served in several key PHS roles, including: Deputy Surgeon General (her current position of record), Deputy Assistant Secretary for Health, Deputy Assistant Secretary for Health (Intergovernmental Affairs), and Director, National Health Service Corps.

Dr. Manley will continue to serve as acting Surgeon General, and we have no announcement to make at this time regarding another nominee for the position.

HHS Q AND A

Q: Has the nomination of Dr. Foster as Surgeon General been withdrawn?

A: Yes.

Q: Will the Office of the Surgeon General be maintained, and if so, what will the role of the Surgeon General be?

A: Yes, there remains an Office of the Surgeon General. The primary responsibilities of the Surgeon General continue to include directing the Public Health Service Commissioned Corps in providing health care services and research/scientific expertise, speaking and working on behalf of efforts to prevent illness and promote healthy living habits, and assisting other governmental entities (i.e. the Federal Bureau of Prisons, the Immigration and Naturalization Service) in meeting their health care needs.

Q: Will a new Surgeon General be nominated?

A: Yes, the Administration intends to fill the position with a highly qualified person, who will be able to act the role as the nation's spokesperson for promoting health living.

Q: What is the Administration's response to the House defunding the Office of the Surgeon General in the FY96 Budget?

A: There is a strong need for a Surgeon General in this country. While this Administration is committed to reducing the size of government and increasing its efficiency, this cannot be done at the expense of educating Americans about the nation's health. We note that the Senate Appropriations Committee did not agree with the House action.

Q: What is the budget request for the immediate office of the Surgeon General for FY96?

A: The budget request for the office for FY96 was $867,000, the same amount as for FY95. The House deleted the entire amount, while the Senate Appropriations Committee made a general allowance within the overall budget for the Secretary [illegible]

Q: Where will the Office of the Surgeon General be located? And to whom will the Surgeon General report?

A: The Office of the Surgeon General is based in our new Office of Public Health and Science under the direction of the Assistant Secretary for Health (ASH). The Surgeon General continues to report to the Assistant Secretary for Health as before.

Q: Did Dr. Foster have any salary arrangement with the Department of Health and Human Services while he was Surgeon General-designate? Was he reimbursed by the Department for any travel or expenses during this tenure?

A: Dr. Foster was an un-paid consultant. He did not receive any compensation from the Federal Government while he was Surgeon General-designate. He was reimbursed for travel and related expenses.

Q: Upon the withdrawal of Dr. Foster's nomination, the House claimed that they would defund any teen pregnancy program if Dr. Foster played a visible role on this issue. Does announcing Dr. Foster today imply that the Administration is not taking their claim seriously?

A: Dr. Foster will serve as a Senior Advisor to the President on Teen Pregnancy and Youth Issues and act as a liaison to the private sector for the Administration focus on teen pregnancy prevention at the local level. Dr. Foster will have no oversight or management responsibilities for teen pregnancy programs at the Department of Health and Human Services.

Q: Will Dr. Foster be compensated in his position as Senior Advisor to the President on Teen Pregnancy and Youth Issues? In addition, what office will he serve out of?

A: Dr. Foster will serve as an un-paid expert consultant and will be reimbursed for travel and related expenses. He will be located at the Department of Health and Human Services and will advise Dr. David Satcher, Director of the Centers for Disease Control and Prevention, as well as the President and Secretary Shalala.

THE WHITE HOUSE

WASHINGTON

January 27, 1996

MEETING AND ANNOUNCEMENT ON TEEN PREGNANCY

Date:	January 29, 1996
Time:	11:00 a.m.-12:00 p.m.
Location:	Oval Office/Roosevelt Room
From:	Carol Rasco/Jeremy Ben-Ami

I. PURPOSE

The purpose of today's events is to demonstrate action on a central issue raised in both this year's and last year's State of the Union -- teen pregnancy. You will first be meeting with people working at the state and local level to highlight the type of grassroots efforts you called for in your speech. The focus of the discussion in the Oval Office will be on what local grassroots efforts need to get started and how a national campaign could help other communities trying to replicate successful models.

You will then be making a statement to the press in the Roosevelt Room, announcing members of the leadership council for the new National Campaign and the appointment of Dr. Henry Foster as your Senior Advisor on Teen Pregnancy and Youth Issues.

II. BACKGROUND

Status of the National Campaign: Since the October meeting at the White House, significant progress has been made in laying the foundation for a national private-sector campaign. Belle Sawhill has led the organizing effort, working with Jody Greenstone (who just moved to California) and Sarah Brown of the Institute of Medicine. Key steps taken include:

- recruiting a bipartisan Leadership Council -- 12 members are on board so far and additional invitations are outstanding:

Andrew Young	Warren Rudman
Hugh Price	Judy McGrath (MTV President)
C. Everett Koop	Tom Kean
Nancy Kassebaum	Irving Harris
David Hamburg (Carnegie Corp)	Whoopi Goldberg
Katherine Graham	Charlotte Beers (Ogilvy & Mather).

- securing $75K in planning monies from 3 foundations

- drafting a prospectus laying out a clear mission and set of functions for the new national organization

All those who attended the White House meeting in October have been consulted in the last three months as the Campaign has been developed, as have dozens of others around the country. On Tuesday, the Carnegie Corporation is hosting a follow-up meeting for all the October participants and other interested parties. This meeting should result in agreement to form a new national organization, and the first Board meeting of that group will take place in Washington in late February. We will invite the entire Board to meet with you at the White House to highlight the launch of the Campaign at that time.

Dr. Foster's position: You are announcing that Dr. Foster will be your Senior Advisor on Teen Pregnancy and Youth Issues. He will be working in this capacity part-time and remaining with Meharry Medical College part-time. He will be your liaison to the National Campaign, but is not coordinating it and will not be on the Board, as that is not legally permissible. His role will include speaking engagements nationally and locally, media appearances, and generally serving as your ambassador on these issues. We hope his efforts will help inspire more grassroots efforts like his own in Nashville and those of the people you are meeting with today.

III. PARTICIPANTS

The President
Secretary Shalala
Dr. Henry Foster

Rosanne Bilodeau, Executive Director, Pathways/Senderos (New Brittain, CT)
Pathways/Senderos, started in 1993, is a community-based program in a low-income neighborhood with high levels of gang violence. It serves 20 Latino girls and boys starting in 6th grade. Its education components include family life and sexual education and a focus on career development. All of the kids are in school, and none has become pregnant or fathered a child. The program recently received private funding to start a business that they plan to use for skills training and to help fund the program. Bilodeau is originally from a rural area in Canada, where most girls have children at an early age. She is the first in her family not to have parented as a teen, and to have completed high school and college.

Donna Fishman, Director, Minnesota Organization on Adolescent Pregnancy, Prevention and Parenting (St. Paul, MN)
The Minnesota Organization on Adolescent Pregnancy is a statewide coalition to strengthen policies and programming that relate to adolescent pregnancy, prevention and parenting. Fishman first started working in the area of teen pregnancy prevention in college, where she coordinated a peer sexuality education program. She now monitors and provides technical assistance to 6 community-based teen pregnancy prevention pilot projects, as well as to other agencies and coalitions around the state.

Barbara Huberman, Director, Training and Sex Education, Advocates for Youth (D.C.)
Advocates for Youth is a 10-year old, nationally recognized private-public partnership. Huberman is the founder and past-President of the Adolescent Pregnancy Prevention Coalition of North Carolina.

Jenny Knauss, Executive Director, Illinois Caucus for Adolescent Health (Chicago, IL)
The Illinois Caucus for Adolescent Health is a non-profit organization focusing on policy advocacy and public education to improve the health of adolescents, particularly teen parents and those at high risk for pregnancy. It is a state-wide membership group with foundation funding. They are currently working with three communities to develop coalitions to prevent teen pregnancy using a CDC community partnership grant. Knauss is extraordinarily active in a range of organizations on this issue in the Chicago area and nationally.

Angela S. Rice; English Teacher, Jefferson Junior High and Best Friends teacher (D.C.)
Best Friends (founded by Elayne Bennett) works with girls in the 5th through 9th grades to help them withstand peer pressure and abstain from sex and drugs through activities that foster self-respect and promote responsibility. Locally, 600 girls participate in 9 schools. Nationally, there are 1500 girls who participate in 20 schools. The program has its own curriculum and stresses fitness, mentoring, and exposure to role models. Rice has been a Best Friends school coordinator for 7-8 years. She and Elayne Bennett are the only two group discussion leaders who serve participating D.C. public schools. She was here last year when Best Friends received an award on National Parents Day.

Collin Sears, Peer Counselor, Young People's Health Connection (Baltimore, MD)
Collin Sears, 18, is in his first year at Baltimore City College with a law major. He has been volunteering at the Health Connection since he was in middle school and has been on staff there since March of 1994. He hosts 'waiting room work shops' on walk-in days -- which the clinic started doing as a way to educate the large groups of young people waiting for 'walk-in' services -- and leads one-to-one counseling sessions with patients about their test results. He also manages The Outreach and Education Center, which opened 6-8 months ago.

Isabel (Belle) Sawhill, Senior Fellow, Urban Institute (Washington, D.C.)
As you know, Belle has been driving the effort to form the National Campaign to Reduce Teenage Pregnancy. She was an Associate Director of OMB before rejoining the Urban Institute.

Kathleen Sylvester, Vice President for Domestic Policy, PPI (Washington, D.C.)
Kathleen Sylvester is the author of *Preventable Calamity: Rolling Back Teen Pregnancy* and *Second-Chance Homes; Breaking the Cycle of Teen Pregnancy.* She has served as an advisor on teen pregnancy to federal and state officials and is working with Belle Sawhill on the private sector initiative.

Bruce Taylor, Program Director, Urban League of Eastern Massachusetts' Youth Education and Development Program (Roxbury, MA)
This school-based program, started 8 years ago, works with 120 African American and Latino boys (8-15) in 4 schools in the greater Boston area. It provides participants with a vision for their futures by developing confidence, academic and employability skills, values and a sense of responsibility. It is a part of the Alliance for Young Families, which is implementing a CDC community partnership grant with the city of Boston. Taylor started with the program 3 years ago to make a difference as a positive role model for African American boys.

Barbara Ziegler, Executive Director, Teen Health Connection (Charlotte, NC)
Teen Health Connection is a private, non-profit comprehensive primary health care facility for underserved young men and women, aged 11-22. The clinic, which you visited last August, provides full physical and mental health services. Before working at Teen Health Connection, Ziegler was the Foundation Director for Mecklenburg Council on Adolescent Pregnancy and Founder and Vice President of Adolescent Pregnancy Prevention Coalition of North Carolina.

In the Roosevelt Room
The audience in the Roosevelt room will consist of 8 Members of Congress; 4 girls and the principal from Jefferson Junior High School, along with the National and DC Best Friends program coordinators, and other staff and supporters of the teen pregnancy initiative.

IV. PRESS PLAN

The meeting in the Oval Office is open to still photographers only.

The announcement in the Roosevelt Room will be open to pool press.

V. SEQUENCE OF EVENTS

Oval Office
11:00 You will greet participants and thank them for coming.

The meeting will be then be moderated by Belle Sawhill.

Barbara Huberman will make a brief opening presentation and three other participants have been asked to talk briefly about their programs, how they got started, and what it takes to start efforts like theirs.

Discussion moderated by Belle Sawhill

11:40 Oval Office meeting ends.

Roosevelt Room
11:45 You will proceed to the Roosevelt Room with the participants for a brief statement

Secretary Shalala makes brief remarks and introduces you.

You make brief remarks and acknowledge the presence of Dr. Foster.

There will be no other remarks and no Q and A.

VI. REMARKS

Remarks are attached.

Background

Pathways/Senderos; New Brittain, Connecticut

This is a community-based program that was started in 1993 with funding allocated from the Connecticut Teen Pregnancy Prevention Initiative. Pathways/Senderos is based in a very low-income neighborhood, with high levels of gang violence, in New Brittain. The program serves 20 youths, girls and boys, all Latino, starting in 6th grade.

Rosanne Bilodeau describes the program as based on the Carrera model. The kids start in 6th grade and are intended to participate in the program fairly intensely over a long period of time. Activities are daily, and they revolve around 3 of the 6 components that Carrera lays out (due to lack of resources to implement the other 3):

- education (keeping them in school, and aiming to do as well as they can)
- family life and sexual education (abstinence and responsibility, and condom distribution)
- career (use new business to train with computer skills, people skills, and business skills)

(Those not covered are health care, lifelong sports and creative expression)

In addition, parents meet together on a monthly basis. Pathways also tries to help families with other needs they might have, such as providing used clothing, household goods, and food.

Currently 13 out of the 20 kids have been a part of this program from the beginning. The seven who have stopped participating in this program did so because their families moved away to new neighborhoods. 100% of the kids are in school, have made it to the next grade levels, and none have become pregnant. They are currently working with a national evaluator.

Funding for the program for 1996 is primarily from the Connecticut Department of Social Service and a community development block grant. The program has recently received funding from the Stanley Corporation and a foundation to start a business that would help train program participants and would help fund the program. They also work in partnership with several local entities to support the program:

- the university (campus visits, etc.)
- the hospital, which helps with family planning education
- the local Junior League Association, which donated a computer system for the kids

Rosanne Bilodeau cites her background as being a primary reason for becoming involved in the program. She is originally from a rural area in Canada, where most of the girls have children at a very early age. She is the first in her family not have parented as a teen, and to have completed high school and college.

The Urban League of Eastern Massachusetts' Youth Education and Development Program; Roxbury, Massachusetts

The Youth Education and Development Program is primarily a school-based program. It is a development and preventative model that focuses on African American and Latino males (8-15) in the Roxbury, Dorchester, Jamaica Plan and Mattapan areas. The program serves boys who come from single parent families with incomes at or below the poverty level. It aims to provide a vision for participating boys for their futures as students, workers, parents by developing confidence, academic and employability skills, values and a sense of responsibility.

Visitations range from 1-4 days per week and activities focus on increasing awareness about the risks and costs of teen pregnancy, provide alternative lifestyle options and behavioral models in conflict resolution and violence prevention. Activities range from discussions to role-playing.

Quarterly, teachers, parents and students provide written assessment of the school based program. Student attendance and report cards are monitored and charted. Contact has been made with the Simmons College School of Social Work for help in program evaluation.

The program was started 8 years ago, and has expanded to serve 120 kids in 4 schools. They are currently starting after school activities with one of the schools. The effort represents joint collaboration between the Urban League and the Boston Public School system.

Bruce Taylor started working with the program 3 years ago. Since he has started, none of the boys have fathered a child. He does not have information that tracks the boys that participated in the program before he started. He became involved because he felt that he had an ability to make a difference as a positive black male role model and he came from a family who always contributed to the community. (Women were his role models.)

Best Friends

This program focuses on girls in the 5th through 9th grades, using activities to foster self-respect and promote responsibility in order to help the girls withstand peer pressure and encourage them to abstain from sex and drugs. Locally there are 600 girls participating from 9 schools in the DC area, and nationally there are 1500 girls who participate in 20 schools. The program's components include:

- Curriculum that covers 'friendship, love and dating' once every three weeks. Angela Rice and Elayne Bennett are the only two teachers in the DC area who teach this.
- Fitness: exercise and dance after school once a week.
- Mentoring: each girl has a volunteer teacher who they choose as their mentor who they meet with for at least 45 minutes a week.
- Role Models: women from the community, like Alma Powell, come to talk about their lives to the girls.

Additional activities include cultural events (going to Kennedy Center), public service events (i.e. the March for the Cure), and an end of the school year ceremony honoring the teachers and mentors who participate in the program. At this ceremony the moms are invited and the kids put on a performance.

Angela Rice: She is an english teacher at Jefferson Junior High School and has been a Best Friends school coordinator for 7-8 years. Her involvement with Best Friends includes the following responsibilities:

- She is a group discussion leader in the DC public schools that participate.
- she runs the high school program for Best Friends in the DC area, tracking the girls who have graduated from the program and are 9-12 grades, in addition to 2 classes in college. (11 of these girls are on Best Friends scholarships.)

Please note that 5 of the Angela Rice's students will be seated in the audience in the Roosevelt Room for the Foster announcement.

TEEN PREGNANCY EVENT

1. Purpose/Message of event

PURPOSE OF THE EVENT: Demonstrate follow through on President's challenge and announcement in the State of the Union regarding teen pregnancy:

> *"To strengthen the family, we must do everything we can to keep the teen pregnancy rate going down. It is still far too high. Tonight I am pleased to announce that a group of prominent Americans is responding to that challenge by forming an organization that will support grass roots community efforts in a national campaign against teen pregnancy."*

NEWS/MESSAGE: The President will announce the appointment of Dr. Henry Foster as a Senior Advisor to the President on Teen Pregnancy and Youth Issues. He will also be meeting with a small group of people who have been working at the state and local level on the issue to discuss how their work can be replicated in other communities with the help of a National Campaign. Some of the organizers of the National Campaign will be joining the discussion as well.

2. Structure of the event

Proposed: 30 minute discussion in Oval (closed press)
- 12 participants: POTUS, Shalala, Foster, Belle Sawhill, 8 others TBD

Statements to press following discussion in Roosevelt Room?
- Shalala, POTUS, Foster (10-12 minutes total); No Q/A

3. Outreach to National Campaign

At this point, none of the people who have agreed to be a part of the Campaign can make it on Monday; some calls still to be made. Belle Sawhill will be there.

4. State/Local reps

- Debbie Fine vetting with HHS, other friends - working with Belle
- goal is geographically diverse; fallback on Maryland
- will have names/bios by noon Saturday

5. Foster

- 9:00 Monday briefing for Foster in JBA office: Press, OPL, HHS should come
- He will not do press on Monday.

6. Pre-brief

- for participants at 9:30 in room 180.

7. Media Plans

- we may well have some regional media opportunities with the invitees. Debbie will work with Media Affairs by mid afternoon, once we know who is coming.

9. Group Briefing

- we plan to set up a briefing on teen pregnancy for interest groups early the week of February 5. The briefing will include Foster and more info on the Naitonal Campaign.

10. Other courtesy calls: Leg, other?

70th Anniversary

Jeremy-Hui

ACADEMIC MEDICINE

PROCEEDINGS OF THE AAMC'S CONSENSUS CONFERENCE ON THE EDUCATION OF MEDICAL STUDENTS ABOUT FAMILY VIOLENCE AND ABUSE

PROFESSIONAL COMPETENCIES IN THE CHANGING HEALTH CARE SYSTEM

FOUR ARTICLES ON MEDICAL ETHICS EDUCATION

MEDICAL EDUCATION AND REFORM INITIATIVES IN GERMANY

HELPING STUDENTS DEVELOP LIFELONG STRATEGIES FOR COPING WITH STRESS

AAMC PAPER: MATERNITY AND PARENTAL LEAVE POLICIES

JOURNAL OF THE ASSOCIATION AAMC OF AMERICAN MEDICAL COLLEGES

To my President and friend — with all best wishes,
1-12-96

Public Service via a Different Venue

Henry W. Foster, Jr., MD

After 21 years at Meharry Medical College in various capacities, I took what I believed was a well-earned one-year sabbatical leave. My sabbatical was conducted at the Association of Academic Health Centers (AHC) in Washington, D.C. My study topic was "Gender Shift in the Physician Workforce: Implications for Health Care Reform." The sabbatical was progressing well; I was spending time reading, conducting interviews on various aspects of women in the American workforce, and designing my data-gathering questionnaire. All this was altered when I received a telephone call in mid-December last year from the Assistant Secretary for Health for the Department of Health and Human Services (HHS).

The Nomination Process

The purpose of that call was to assess any interest I might hold in being nominated for the position of U.S. Surgeon General. I responded that I had not given the topic any particular thought, but I would consider it, discuss it with my family, and get back to him in a timely manner. Subsequently I advised him of my interest. Soon thereafter, a 30-minute telephone interview was conducted. This interview was the beginning of the process, and it went smoothly. There was no "nannygate," no unpaid tax, and no financial conflict of interest.

The process moved rapidly forward. The White House and HHS worked diligently with me in preparation for the hearings. We reviewed thoroughly all of my pertinent writings, and I prepared myself to give strong answers to every question. This preparation was invaluable. As the day for the hearings drew closer, I was often asked if I were becoming nervous. The answer was "no." I did not want to be perceived as immodest or overconfident. To the contrary, had I been told the hearings would not take place, *that* would have given me butterflies. The hearings constituted my forum for answering my accusers and reassuring my supporters. I worked diligently to remain focused during this process, and beyond.

The Senate Hearings

I am appreciative of the manner in which my hearings were conducted; the chair was objective. This notwithstanding, partisan politics were patently in evidence.

Quite a few people have asked me if I felt *race* played a significant factor in the outcome of my nomination. My answer was and remains a clear "no." The issues of abortion and its relationship to presidential politics were clearly, in my judgment, the driving forces. It is my strong belief that had this nomination occurred outside the context of presidential politics, I would have been confirmed as U.S. Surgeon General. This is especially so given the fact that my nomination received a bipartisan favorable recommendation from the Senate Labor and Human Resources Committee.

During this arduous process, I was most emboldened by the wide and strong support that I received from my family, President Clinton, 168 professional organizations including the AAMC, and thousands of individuals not known to me. For this backing, my family and I will remain ever grateful.

Nomination Postscript

When I was growing up in Arkansas, there was a saying in my family, "When one door closes, another one opens." That saying describes my personal postscript to the story of my nomination for Surgeon General. Following the confirmation hearings, there was much written about winners and losers, and I am unsure whether I can make an accurate assessment. However, I was hoping the victors might be the millions of Americans who need a Surgeon General to speak out on ways to stop the spread of AIDS, drug use, violence, teenage pregnancy, and myriad other health problems. And without doubt, the public health goals of this country suffer without the leadership of a strong, active Surgeon General.

Weeks before the Senate hearings, I felt that should I fail to be confirmed for reasons other than my fitness for the job, this would create an even greater communication plat-

form than had I been confirmed. This prediction was correct. Indeed, I do now have another venue to promote the public good. I have a new bully pulpit, and I cannot imagine receiving more invitations for speaking engagements as Surgeon General than I am now receiving.

We all know that many Americans, especially young people, have indicated they have lost or are losing faith in American's political system. Public service is steadily losing its appeal. However, my steadfast response to them is they must stay engaged with the process. They must adopt a favorable inclination for public service. President John Kennedy sought to effect this national mood when he stated, "Ask not what your country can do for you, ask what you can do for your country." I am reminded also of a statement attributed to Winston Churchill: "Democracy is absolutely the worst form of government ever created—except for all the rest." Indeed, we must continue to come forward when called upon for public service. Our nation really has no other option.

The Future

In 1991, the most recent year for which figures are available, more than one million American females 19 years of age or younger became pregnant. Not only is this almost uniformly bad for them—and the fathers, half of whom are not teenagers but are not yet ready for a family—it is even worse for their children. We know that children born to teenagers are more likely to have serious health problems and are more likely to be poor than children born to older parents.

If we want to prevent teenage pregnancies, we must start at the source. We must provide young people with a good education, comprehensive health services, and more employment opportunities. Further, we must interact with these children *before* they become teenagers. This need is recognized in the "I Have a Future" program, located in a Nashville housing project, which I initiated at Meharry Medical College in 1987. The program is working and has received numerous awards, including being recognized as one of President Bush's "Thousand Points of Light." Moreover, an impressive number of our program's graduates are staying in school and going on to college.

These successes can be replicated nationwide. Additionally, there are some other productive programs conducting similar activities with youth; through networking, their programs' outcomes can complement other programs. The problem, however, should not be approached from the top down. Decisions should be made at the local level, and everyone has a role to play—parents, grandparents, clergy, business leaders, volunteers, the media, and others.

One thing every program must do is give young people a positive vision of the future. Too many children believe that their futures hold nothing for them except having babies, and when nothing else is there for them, this becomes a rational response. However, this outlook is a dead-end dream and must be replaced with a dream of unlimited achievement. Hence, we must offer our youth three things.

First, basic information about health, sexuality, conflict resolution, and drug and alcohol abuse. They need to understand the consequences of early sexual activity and other risky behaviors.

Second, we must make available an array of adolescent health services with support from the community and parents. We must stress abstinence and convince youth that being sexually active is not the norm for adolescents. But for teenagers who, for whatever reasons, choose to be sexually active, we must provide effective contraception, for to do otherwise is highly irresponsible.

Third, and most important, we must help young people improve their opportunities by improving not just their job skills but also their self-reliance and sense of values.

Children in America are subjected to a barrage of sexual messages from the time they awaken until they go to sleep. In an open democratic society such as we have in the United States, free speech is a fundamental right, and it should be. But there exists a paradox. In this same open democratic society there are some forces that do not want us to teach our children about human sexuality, thus leaving them extremely vulnerable to this media onslaught.

Each community must find its solution. What works in Nashville will not necessarily work in Newark. What is needed is a national coordination in the sharing, testing, and evaluation of local efforts such that we can decide what works best generically. As Surgeon General, preventing teen pregnancy was going to be the focal point of my agenda, but that forum was precluded. In lieu of that, I now have another venue as a private citizen from which I can and will proclaim the same message as I would have had I been confirmed. Yes, another door has opened, and I am walking through it.

–Henry W. Foster, Jr., MD

Dr. Foster is professor of obstetrics and gynecology, Meharry Medical College, Nashville, Tennessee, and consultant, Department of Health and Human Services, Washington, D.C.

THE WHITE HOUSE

WASHINGTON

December 5, 1995

MEMORANDUM TO LEON PANETTA

FROM: Don Baer
Michael McCurry
Jeremy Ben-Ami

SUBJECT: Announcement of Henry Foster

Following the last scheduling meeting, we agreed to look at the possibility of announcing Dr. Foster as part of a radio address at some point in November and December. Based on our review of the calendar and the difficulty of predicting the topics of radio addresses in advance, we do not think this will be possible and recommend moving forward with the announcement on paper.

We recommend announcing Dr. Foster next week (week of December 11) and would recommend the following plan:

1) Issue a White House press release announcing Dr. Foster's position along with a statement from the President

2) Put out a roughly ten-page report on the administration's policies and programs on teen pregnancy to date

3) Bring Dr. Foster to Washington for meetings with key teen pregnancy groups and some minimal press interviews.

We realize that the President has wanted to do this announcement himself, but this has now dragged for six months without our finding an appropriate time to do it, and we simply need to get the announcement done.

You should note that: (1) we will not be ready to announce what we are doing about the Surgeon General position in December, and (2) we will not be able to announce anything related to the private sector initiative on teen pregnancy yet. In spite of these issues, we still recommend moving forward with the December announcement.

Please advise.

cc: Erskine Bowles
Carol Rasco
Bob Nash
Ann Walley

THE WHITE HOUSE

WASHINGTON

November 28, 1995

To: Don Baer
Mike McCurry

From: Jeremy Ben-Ami

Re: Dr. Foster

Based on the last scheduling meeting, we were supposed to consider using a radio address to announce Foster. That will not happen in everyone's best opinion.

The attached memo would be from the three of us to Leon saying we've looked at that possibility, it doesn't work, please give us the go-ahead to do this on paper.

Please let me know if you agree with the approach and if you approve the memo.

Thanks.

Baer, Jeremy
I believe we should do all 3 at once and make somethin of it. Look at news mag covers on Elisa this week. -n

DRAFT

November 28, 1995

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We would suggest a three-part plan for an early December announcement:

1) Issue a White House press release announcing Dr. Foster's position along with a statement from the President

2) Put out a roughly ten-page report on the administration's policies and programs on teen pregnancy to date

3) Bring Dr. Foster to Washington for meetings with key teen pregnancy groups and some minimal press interviews.

We realize that the President has wanted to do this announcement himself, but this has now dragged for six months without our finding an appropriate time to do it, and we simply need to get the announcement done.

Two other related issues: we would not be ready to announce what we are doing about the Surgeon General position in December, and we would not be able to announce anything related to the private sector initiative on teen pregnancy yet. In spite of these two factors, we still recommend moving forward with the December announcement.

Please advise.

cc: Erskine Bowles
Carol Rasco
Bob Nash
Ann Walley

THE WHITE HOUSE
WASHINGTON

Don Baer
Mike McCurry

To: Ben Ami
Where are we?
Don Baer

FYI

This is our seventh request to announce Foster. If rejected, we should do it on paper that week.

—Jeremy

SCHEDULE PROPOSAL

THE WHITE HOUSE
WASHINGTON

Date: 11/2/95

____ACCEPT ____REGRET ____PENDING

TO: Stephanie Street/Anne Walley
Directors of Presidential Scheduling

FROM: Carol Rasco
Assistant to the President for Domestic Policy

REQUEST: POTUS Teen Pregnancy Event

PURPOSE: The event would allow the President to: (1) announce Dr. Foster's new position; (2) get some credit for a teen pregnancy grant just awarded to Boston, 1 of 15 recently awarded around the country; and (3) release a status report highlighting the administration's teen pregnancy initiatives.

BACKGROUND: The event will enable us to bring closure to the question of Dr. Foster's future role in the administration and allow the President to demonstrate the administration's achievements and underscore its commitment in the area of teen pregnancy.

It will further enable us to take some credit for recently announced CDC grants, while highlighting successful local efforts. Launching a new program, CDC awarded 13 grants totalling $3.25 million to community coalitions working with youth to prevent unwanted teen pregnancies. One of the grants ($300,000) went to the Trustees of Health and Hospitals of the City of Boston and was announced last week by Mayor Menino as a new initiative to prevent teen pregnancy, called the Adolescent Pregnancy Prevention and Intervention Network. It is a public/private effort by the Boston Department of Health and Hospitals, the Boston Public Schools and the Alliance for Young Families to pool resources among the many teen pregnancy prevention programs in Boston, targeting 5 neighborhoods where teen birth rates are highest.

PREVIOUS PARTICIPATION The President committed in the State of the Union address to help launch a national campaign against teen pregnancy. He has since then visited a teen health clinic in North Carolina to discuss the issue and has held a closed press meeting with private sector leaders to try to encourage the formation of a national campaign.

DATE AND TIME: November 13

BRIEFING TIME: 10 minutes

DURATION: 30-40 minutes

LOCATION: Site of Teen Pregnancy Program in Boston (Options to be provided.)

PARTICIPANTS: The President
Mayor Menino
Dr. Henry Foster
A small group of representatives of the grant recipients, teens, parents, teachers, community leaders, and providers

OUTLINE OF EVENTS: The event would be held at the site of a successful teen pregnancy program in the city of Boston. The President would tour the center. The Mayor would make brief remarks and introduce the President, the President would make remarks and introduce Dr. Foster. We would also propose releasing a brief document highlighting the administration's activities and plans in the area of teen pregnancy.

REMARKS: Brief opening remarks to be supplied by Speechwriting

MEDIA: Open press

FIRST LADY'S ATTENDANCE: TBD

VICE PRESIDENT'S ATTENDANCE TBD

SECOND LADY'S ATTENDANCE: TBD

RECOMMENDED BY: Don Baer and Jeremy Ben-Ami

CONTACT: Debbie Fine: 6-5572

ORIGIN OF PROPOSAL: Staff generated

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WASHINGTON

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cc: Erskine Bowles
Carol Rasco
Bob Nash
Ann Walley

Withdrawal/Redaction Marker
Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. memo	Bob J. Nash to Leon Panetta re: Surgeon General Issue and Recommendations (6 pages)	11/14/1995	P2, P5

COLLECTION:
Clinton Presidential Records
Domestic Policy Council
Lyn Hogan
OA/Box Number: 11027

FOLDER TITLE:
Teen Pregnancy - Foster Announcement

2010-1083-S
rc120

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [a)(5) of the PRA]
P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.
PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).
RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

b(1) National security classified information [(b)(1) of the FOIA]
b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

SCHEDULE PROPOSAL

THE WHITE HOUSE
WASHINGTON

Date: 11/2/95

___ACCEPT ___REGRET ___PENDING

TO: Stephanie Street/Anne Walley
Directors of Presidential Scheduling

FROM: Carol Rasco
Assistant to the President for Domestic Policy

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PREVIOUS PARTICIPATION: The President committed in the State of the Union address to help launch a national campaign against teen pregnancy. He has since then visited a teen health clinic in North Carolina to discuss the issue and has held a closed press meeting with private sector leaders to try to encourage the formation of a national campaign.

DATE AND TIME: November 13

BRIEFING TIME: 10 minutes

DURATION: 30-40 minutes

LOCATION: Site of Teen Pregnancy Program in Boston (Options to be provided.)

PARTICIPANTS: The President
Mayor Menino
Dr. Henry Foster
A small group of representatives of the grant recipients, teens, parents, teachers, community leaders, and providers

OUTLINE OF EVENTS: The event would be held at the site of a successful teen pregnancy program in the city of Boston. The President would tour the center. The Mayor would make brief remarks and introduce the President, the President would make remarks and introduce Dr. Foster. We would also propose releasing a brief document highlighting the administration's activities and plans in the area of teen pregnancy.

REMARKS: Brief opening remarks to be supplied by Speechwriting

MEDIA: Open press

FIRST LADY'S ATTENDANCE: TBD

VICE PRESIDENT'S ATTENDANCE TBD

SECOND LADY'S ATTENDANCE: TBD

RECOMMENDED BY: Don Baer and Jeremy Ben-Ami

CONTACT: Debbie Fine: 6-5572

ORIGIN OF PROPOSAL: Staff generated

ROUTING SLIP

DATE: 10/20/95

FROM: Stephanie Streett and Anne Walley
Deputy Assistants to the President and Directors of Scheduling

SUBJECT: Teen Pregnancy Event

Don Baer	✓	Leon Panetta	
Erskine Bowles		Jack Quinn	
Peg Cusack		Carol Rasco	✓
Rahm Emanuel		Paige Reffe	
Jack Gibbons		Patti Solis	
Laura Graham	X	Doug Sosnik	
Pat Griffin		Speechwriting	✓
Marcia Hale		G. Stephanopoulos	
Alexis Herman		Todd Stern	
Nancy Hernreich		Ann Stock	
Kitty Higgins		Kim Tilley	
Harold Ickes		Jodie Torkelson	
Jennifer Jose	✓	Laura Tyson	
Anthony Lake		Melanne Verveer	
Bruce Lindsey		V.P. Chief of Staff	
Mike McCurry	✓	Maggie Williams	
Mack McLarty		Jeremy Ben Ami	✓

FILE: Regret

COMMENTS: Per AW+SS on 10/20/95. Regret for 27th. Perhaps something in Nashville on 11/7/95

SCHEDULE PROPOSAL Date: 10/16/95 11:07 pm

___ACCEPT ___REGRET ___PENDING

TO: Stephanie Street/Anne Walley
Directors of Presidential Scheduling

FROM: Carol Rasco
Assistant to the President for Domestic Policy

REQUEST: POTUS Teen Pregnancy Event

PURPOSE: The event would allow the President to: (1) Announce Dr. Foster's new position; (2) announce a new round of teen pregnancy grants; and (3) release a status report highlighting the administration's teen pregnancy initiatives.

BACKGROUND: The event will allow closure on the question of Dr. Foster's future role in the administration and allow the President to demonstrate the administration's achievements and underscore its commitment in the area of teen pregnancy.

PREVIOUS PARTICIPATION: The President committed in the State of the Union address to help launch a national campaign against teen pregnancy. He has since then visited a teen health clinic in North Carolina to discuss the issue and has held a closed press meeting with private sector leaders to try to encourage the formation of a national campaign.

DATE AND TIME: October 27th; AM

BRIEFING TIME: 10 minutes

DURATION: 30–40 minutes

LOCATION: Roosevelt Room

PARTICIPANTS: The President
Secretary Shalala
Dr. Henry Foster
A small group of teens, parents, teachers, community leaders, and potentially grant recipients

OUTLINE OF EVENTS: The event would be a discussion about the best way to affect teen attitudes on the issue of teen pregnancy. The President would make some brief remarks, introduce Dr. Foster and then engage in a brief discussion with the invited guests. We would also propose releasing a brief document highlighting the administration's activities and plans in the area of teen pregnancy.

We could consider inviting representatives of national organizations who either supported Dr. Foster as Surgeon General or who focus on teen pregnancy prevention to watch the discussion on satellite in room 450. Dr. Foster could come drop by room 450 directly following the discussion to thank the groups.

REMARKS: Brief opening remarks to be supplied by Speechwriting

MEDIA: Open press

FIRST LADY'S ATTENDANCE: TBD

VICE PRESIDENT'S ATTENDANCE TBD

SECOND LADY'S ATTENDANCE: TBD

RECOMMENDED BY: Don Baer, Jeremy Ben-Ami, Julia Moffett

CONTACT: Jeremy Ben-Ami, 6-5584/Debbie Fine, 6-5572

ORIGIN OF PROPOSAL: Staff generated

SCHEDULE PROPOSAL Date: 10/16/95

___ACCEPT ___REGRET ___PENDING

TO: Stephanie Street/Anne Walley
Directors of Presidential Scheduling

FROM: Jeremy Ben-Ami
Debbie Fine

REQUEST: POTUS Teen Pregnancy Event

PURPOSE: The event would allow the President to: (1) Announce Dr. Foster's new position; (2) announce a new round of teen pregnancy grants; and (3) release a status report highlighting the administration's teen pregnancy initiatives.

BACKGROUND: The event will allow closure on the question of Dr. Foster's future role in the administration and allow the President to demonstrate the administration's achievements and underscore its commitment in the area of teen pregnancy.

PREVIOUS PARTICIPATION: The President committed in the State of the Union address to help launch a national campaign against teen pregnancy. He has since then visited a teen health clinic in North Carolina to discuss the issue and has held a closed press meeting with private sector leaders to try to encourage the formation of a national campaign.

DATE AND TIME: October 27th; AM

BRIEFING TIME: 10 minutes

DURATION: 30-40 minutes

LOCATION: Roosevelt Room

PARTICIPANTS: The President
Secretary Shalala
Dr. Henry Foster
A small group of teens, parents, teachers, community leaders, and potentially grant recipients

OUTLINE OF EVENTS: The event would be a discussion about the best way to affect teen attitudes on the issue of teen pregnancy. The President would make some brief remarks, introduce Dr. Foster and then engage in a brief discussion with the invited guests. We would also propose releasing a brief document highlighting the administration's activities and plans in the area of teen pregnancy.

We could consider inviting representatives of national organizations who either supported Dr. Foster as Surgeon General or who focus on teen pregnancy prevention to watch the discussion on satellite in room 450. Dr. Foster could come drop by room 450 directly following the discussion to thank the groups.

REMARKS: Brief opening remarks to be supplied by Speechwriting

MEDIA: Open press

FIRST LADY'S ATTENDANCE: TBD

VICE PRESIDENT'S ATTENDANCE TBD

SECOND LADY'S ATTENDANCE: TBD

RECOMMENDED BY: Don Baer, Jeremy Ben-Ami, Julia Moffett

CONTACT: Jeremy Ben-Ami, 6-5584/Debbie Fine, 6-5572

ORIGIN OF PROPOSAL: Staff generated

FAX TO FAX

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
Office of Population Affairs

East-West Towers, Suite 200 West
4350 East-West Highway
Bethesda, MD 20857

Phone: (301) 594-4000

FAX: (301) 594-5981

DATE: October 3, 1995 **# of pages:** Cover + 2

TO: Janet Adams/Jeremy Ben-Ami, White House **Phone:** (202) 456-2216 **FAX:** (202) 456-7028

FROM: ~~Mariana Kastrinakis, MD, MPH~~
Senior Advisor on Adolescent Health

CAPT Kathleen Hastings, JD, MPH, RN
Senior Advisor on Adolescent Health

Remarks: Here is a "CORRECTED" list that Felicia suggests for invitation to the meeting with Dr. Foster. — Please note the corrections.

Thanks,
Kathie Hastings

* Please call me if any questions. *

Withdrawal/Redaction Marker
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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
002. list	Contact list for organizations and individuals [partial] (2 pages)	10/03/1995	P6/b(6)

COLLECTION:
Clinton Presidential Records
Domestic Policy Council
Lyn Hogan
OA/Box Number: 11027

FOLDER TITLE:
Teen Pregnancy - Foster Announcement

2010-1083-S
rc120

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
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P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [a)(5) of the PRA]
P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.
PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).
RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

b(1) National security classified information [(b)(1) of the FOIA]
b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
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b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

ORGANIZATIONS:

National Organization on Adolescent Pregnancy, Parenting, and Prevention
Patricia Jo Angelini, President (H Phone = P6/(b)(6)) [002]
4221 East-West Highway
Bethesda, MD 20814
(301) 913-0378

National Family Planning and Reproductive Health Association
Joan Henneberry, President
c/o Colorado Department of Public Health and Environment
FCHSD/WH/A4
4300 Cherry Creek Drive South
Denver, Colorado 80222-1530
(303) 692-2483

addition to the original list

National Association of Nurse Practitioners in Reproductive Health
Susan Wysocki, President
2401 Pennsylvania Avenue, NW, Suite 350
Washington, D.C. 20037-1718
(202) 466-4825

Association of Reproductive Health Professionals
Dennis Barbour, President
2401 Pennsylvania Avenue, NW, Suite 350
Washington, D.C. 20037-1718
(202) 466-3825

Family Planning Councils of America, Inc.
Jodi Tomlonovic, Chairperson
c/o Family Planning Council of Iowa
1101 Walnut Street, Suite 200
Des Moines, Iowa 50309
(515) 288-9028

correction to original list

State Family Planning Administrators
Deborah Arnold, Co-Chair
c/o North Dakota Department of Health
Division of Maternal and Child Health
600 E. Boulevard Avenue
Bismarck, North Dakota 58505-0200
(701) 328-2493

Sandi Van Scoyoc, Co-Chair
c/o New Hampshire Div. of Public Health Services
Bureau of Maternal and Child Health
6 Hazen Drive
Concord, New Hampshire 03301
(603) 271-4527

correction to original list

INDIVIDUALS:

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Columbia University
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(212) 854-5453 (H Phone = P6/(b)(6))

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Professor and Chairman, Department of OB/GYN
Charles R. Drew University of Medicine and Science
King/Drew Medical Center
1621 East 120th Street, MP 15
Los Angeles, CA 90059
(310) 668-4601

Luella Klein, M.D.
Charles Howard Candler Professor of OB/GYN
Emory University
69 Butler Street SE, Room 408
Atlanta, GA 30303
(404) 616-8493/8500

Art Elster, M.D.
Director, Department of Adolescent Medicine
American Medical Association
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Chicago, IL 60610
(312) 464-5530

Joe Sanders, M.D
Executive Director
American Academy of Pediatrics
141 NW Point Blvd.
Elk Grove Village, IL 60007
1-800-433-9016

Lee Lee Doyle, Ph.D.
Chair, National Adolescent Reproductive Health Partnership
University of Arkansas Medical Center
Department of OB/GYN, Slot 518
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Little Rock, AR 72205
(501) 686-5753

FAX TO FAX

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PUBLIC HEALTH SERVICE
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4350 East-West Highway
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FAX: (301) 594-5981

DATE: Sept 27, 1995 **# of pages:** Cover + 2

TO: Jeremy Ben Ami **Phone:** (202) 456-2216

FAX: (202) 456-7028

FROM: ~~Mariana Kastrinakis, MD, MPH~~
~~Senior Advisor on Adolescent Health~~

CAPT Kathleen Hastings, JD, MPH, RN
Senior Advisor on Adolescent Health

Remarks: List of additional providers for the meeting with Dr. Foster (from Dr. Felicia Stewart).

Kathie H.

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003. list	Contact list for organizations and individuals [partial] (1 page)	09/27/1995	P6/b(6)

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rc120

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4221 East-West Highway
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Susan Wysocki, President
2401 Pennsylvania Avenue, NW, Suite 350
Washington, D.C. 20037-1718
(202) 466-4825

Association of Reproductive Health Professionals
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(202) 466-3825

Family Planning Councils of America, Inc.
Jeffery Zonis, Executive Director
Adams Center
1017 Mumma Road, P.O. Box 360
Camp Hill, PA 17011
(717) 761-7380

State Family Planning Administrators
Lynn Peterson, Project Director
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Charles Howard Candler Professor of OB/GYN
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Joe Sanders, M.D.
Executive Director
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Chair, National Adolescent Reproductive Health Partnership
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4301 West Markham
Little Rock, AR 72205
(501) 686-5753

Jeremy,
Here's the List of Key Supporters.
Marilyn

100 Black Men
Fax: 92920914
Voice: (202) 292-9676
Comments: Roland Jones

Academic Health Centers
Fax: 92657514
Voice: (202) 265-9600
Comments: Joan Durgin

ACOG
Fax: 94883985
Voice: (202) 863-2511
Comments: Kathy Bryant

Advocates for Youth
Fax: 93472263
Voice: (202) 347-5700
Comments: Michele Booth Cole

African Methodst Episcopl Churc
Fax: 92891942
Voice: (202) 842-3788
Comments: Frederick Calhoun James

Am Ac Child & Adoles Psychiatry
Fax: 99662891
Voice: (202) 966-7300
Comments: Mary Crosby or Tracey Krowell

Am Ac of Dermatology
Fax: 98424355
Voice: (202) 842-3555
Comments: Cheryl Hayden

Am Ac of Otolaryngology
Fax: 97036835100
Voice: (703) 836-4444
Comments: John Williams

Am Ac of Pain Medicine
Fax: 917089669418
Voice: (708) 966-9510
Comments: Jeffrey Engle

Am Ac of Pediatrics
Fax: 93936137
Voice: (202) 347-8600
Comments: Marjorie Tharp

Am Asn of University Women
Fax: 98721425
Voice: (202) 785-7720
Comments: Nancy Zirkin

Am Assn of Dental Schools
Fax: 96670642
Voice: (202) 667-9466
Comments: Keri Briel

Am College Emergency Physicians
Fax: 97280617
Voice: (202) 728-0610
Comments: John Scott or Roslyne Schulman

Am College of Chest Physicians
Fax: 92936200
Voice: (202) 293-6300
Comments: Raymond Cotton or Michael Gaba

Am College of Physicians
Fax: 97831347
Voice: (202) 393-1650
Comments: Kathleen Haddad or Howard Shapiro

Am College Preventive Medicine
Fax: 94662662
Voice: (202) 466-2044
Comments: Donna Grossman

Am Counceling Assn
Fax: 97038230252
Voice: (703) 823-9800
Comments: Rion Pressman

Am Fed St/County/Municipl Emplo
Fax: 94291293
Voice: (202) 429-1000
Comments: Gerald McEntre

Am Gastroenterological Assn
Fax: 95435327
Voice: (202) 543-7441
Comments: Alissa Fox

Am Group Practice Assn
Fax: 97035481890
Voice: (703) 838-0033
Comments: Brent Miller

Am Jewish Congress
Fax: 93873434
Voice: (202) 332-4001
Comments: Mark Pelavin or David Harris

Am Medical Assn
Fax: 97894581
Voice: (202) 789-7447
Comments: Rich Deem

Am Medical Womens Assn
Fax: 97035493864
Voice: (703) 838-0509
Comments: Eileen McGrath

Am Nurses Assn
Fax: 96517001
Voice: (202) 651-7000
Comments: Marjorie Vanderbuilt

Am Occupational Therapy Assn
Fax: 93016527711
Voice: (301) 652-2682
Comments: Christina Metzler

Am Osteopathis Assn
Fax: 95443525
Voice: (202) 544-5060
Comments: Elizabeth Beckwith

Am Pediatric Society
Fax: 93936137
Voice: (202) 347-8600
Comments: Karen Hendricks for AMSPDC, Soc 4 Pediactric Research

Am Psychiatric Assn
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Voice: (202) 682-6142
Comments: Gus Cervini

Am Psychological Assn
Fax: 93366063
Voice: (202) 336-5500
Comments: Marisa Reddy

Am Public Health Assn
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Voice: (202) 789-5600
Comments: Sandy Nolte

Am Soc 4 Gastrointest Endoscopy
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Voice: (202) 833-0007
Comments: Randlolph Fenninger

Am Soc 4 Reproductive Medicine
Fax: 94844039
Voice: (202) 863-4985
Comments: Lynne Lawerence

Am Soc Catarct/Refractv Surgery
Fax: 97035910614
Voice: (703) 591-2220
Comments: Nancy McCann

Am Soc of Anesthesiologists
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Voice: (202) 289-2222
Comments: Michael Scott

Ambulatory Pediatric Assn
Fax: 97035568729
Voice: (703) 556-9222
Comments: Marge Degnon

Americans for Democratic Action
Fax: 97855969
Voice: (202) 785-5980
Comments: Amy Isaacs

Ams United 4 Separ Church&State
Fax: 94662587
Voice: (202) 466-3234
Comments: Barry Lynn or Julie Segal

Assn Maternal/Child Health Prgm
Fax: 97750061
Voice: (202) 775-0436
Comments: Catherine Hess

Assn Minority Health Pro School
Fax: 95467105
Voice: (202) 544-7499
Comments: Dale Dirks

Assn of Am Medical Colleges
Fax: 98281123
Voice: (202) 828-0456
Comments: Patricia Shea

Assn of Black Cardiologists
Fax: 96638007
Voice: (202) 663-9214
Comments: Singleton McAllister

Assn of Schools of Public Healt
Fax: 92898274
Voice: (202) 296-1099
Comments: Mike Gemmell

Assn of State/Terr. Health Offi
Fax: 95449349
Voice: (202) 546-5400
Comments: Donna Crane

Assn StateTerritorial Health Of
Fax: 915152814958
Voice: (515) 281-5787
Comments: Christopher Atchison

Assn Teachers Preventive Medici
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Voice: (202) 463-0550
Comments: Barbara Calkins

Assn WomenHealth Ob/NeoNatNurse
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Voice: (202) 662-1600
Comments: Michelle Miller

B'nai B'rith Women
Fax: 98571380
Voice: (202) 857-1300
Comments: Jana Goldman

Black Leadership Forum
Fax: 97896390
Voice: (202) 789-3500
Comments: Eddie Williams

Campaign for Women's Health
Fax: 96382356
Voice: (202) 783-6686
Comments: Tanya Thomas

Catholics for a Free Choice
Fax: 93327995
Voice: (202) 986-6093
Comments: Frances Kessling

Children's Health Fund
Fax: 912125357488
Voice: (212) 535-9400
Comments: Irwin Redlener

Clara Bell Duvall Educatn Fund
Fax: 912159289848
Voice: (215) 928-9848
Comments: Carol Petraitis

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Comments: Dwight Kirk

Coalition of Labor Union Women
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Comments: Heather Hauck

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Comments: Kathy Bryant

Ctr 4 Reproductive Law & Policy
Fax: 912125145538
Voice: (212) 514-5534
Comments: Janet Benshoof

Ctr 4 Women Policy Studies
Fax: 92968962
Voice: (202) 872-1170
Comments: Leslie Wolfe

Delta Sigma Theta Sorority Inc.
Fax: 99862513
Voice: (202) 286-2400
Comments: Roseline McKinney

Endocrine Society
Fax: 93019410259
Voice: (301) 941-0252
Comments: Catherine Bryan

Hollywood Women's Polit Comite
Fax: 913102872815
Voice: (310) 287-2803 ext. 21
Comments: Lara Bergthold

Human Rights Campaign Fund
Fax: 93475323
Voice: (202) 628-4160
Comments: Daniel Zingale

Int'l Women's Health Coalition
Fax: 912129799009
Voice: (212) 979-8500
Comments: Joan B. Dunlop

Medical Students for Choice
Fax: 96675890
Voice: (202) 667-7281
Comments: Patricia Anderson

N/A 4 Equal Opp in Higher Ed.
Fax: 95439113
Voice: (202) 543-9111
Comments: Samuel Myer

N/A of County & City Health Off
Fax: 97831583
Voice: (202) 783-5550
Comments: Annette Ferebee or Boyce Ginieczki

NAACP
Fax: 96385936
Voice: (202) 638-2269
Comments: Edward Hailes

Nat Abortion & Reproductive Rts
Fax: 99733070
Voice: (202) 973-3003
Comments: Jo Blum (NARAL)

Nat Abortion Federation
Fax: 96675890
Voice: (202) 667-5881
Comments: Gina Shaw

Nat Alince Blk School Educators
Fax: 94838323
Voice: (202) 483-1549
Comments: Alfred Roberts

Nat Asian Women's Health Organi
Fax: 915102082865
Voice: (510) 208-3171
Comments: Mary Chung

Nat Assn 4 Public Health Policy
Fax: 97037090089
Voice: (703) 709-0020
Comments: Terence Carroll

Nat Assn of People with AIDS
Fax: 98980414
Voice: (202) 898-0414
Comments: Troy Peterbrink

Nat Assn of Public Hospitals
Fax: 94080235
Voice: (202) 408-0223
Comments: Cheis Burch

Nat Assn of School Nurses, Inc
Fax: 912078832683
Voice: (207) 883-2117
Comments: Judy Ressallat

Nat Assn of Social Work
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Comments: Sheldon Goldstein

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Voice: (202) 626-3191
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Fax: 95083826
Voice: (202) 624-5457
Comments: Diane Bush

Nat Black Chamber of Commerce
Fax: 94161809
Voice: (202) 416-1622
Comments: Harry Alford

Nat Black Child Developmnt Inst
Fax: 92341738
Voice: (202) 387-1281
Comments: Evelyn Moore

Nat Black Nurses' Association
Fax: 93473808
Voice: (202) 393-6870
Comments: Patricia Gray

Nat Black Women's Health Proj.
Fax: 98338790
Voice: (202) 835-0125
Comments: Cynthia Newbille

Nat Coalition of 100 Black Womn
Fax: 912129472477
Voice: (212) 947-2196
Comments: Shirley Poole

Nat Council of Jewish Women
Fax: 93317792
Voice: (202) 331-2588
Comments: Deena Margolis

Nat Council of Negro Women
Fax: 96280233
Voice: (202) 628-0015
Comments: Dorothy Height

Nat Education Association
Fax: 98227741
Voice: (202) 822- 7564
Comments: Michael Edwards

Nat Fam Plang/Rprodctv Hlth Asn
Fax: 97372690
Voice: (202) 628-3535
Comments: Marilyn Keefe

Nat Hispanic Medical Associatio
Fax: 92345468
Voice: (202) 265-4297
Comments: Elina Rios

Nat Medical Association
Fax: 98423293
Voice: (202) 347-1895
Comments: Janice Brown-Glasgow

Nat Minority AIDS Council
Fax: 95443293
Voice: (202) 544-1076
Comments: Helen Fox

Nat Organization for Women
Fax: 97858576
Voice: (202) 331-0066
Comments: Mea Arnold

Nat Osteoporosis Foundation
Fax: 92232237
Voice: (202) 223-2226
Comments: Bente Cooney

Nat Women's Law Center
Fax: 93285137
Voice: (202) 328-5160
Comments: Linda Cooper

Nat'l Urban League
Fax: 96820782
Voice: (202) 898-1604
Comments: Bob McAlpine

NOW Legal Defense & Eductn Fund
Fax: 912122261066
Voice: (212) 925-6635
Comments: Kathryn Rodgers

Office for Church in Society
Fax: 95435994
Voice: (202) 543-1517
Comments: Sandy Sorensen (United Church of Christ

Older Women's League
Fax: 96382356
Voice: (202) 783-6686
Comments: Dianna Porter

Operation PUSH
Fax: 913123733571
Voice: (312) 373-3366
Comments: Rev. Jimmie Daniels

Pathfinder International
Fax: 916179243833
Voice: (617) 924-7200
Comments: Carol Wall

People for the American Way
Fax: 92932672
Voice: (202) 467-4999
Comments: Leslie Harris, Andrea Hill, Laura Sheinkopf

Phi Beta Sigma Fraternity
Fax: 98821681
Voice: (202) 726-5424
Comments: Lawrence Miller

Planned Parenthood Fedrtn of Am
Fax: 92934349
Voice: (202) 785-3351
Comments: Diane Pollack

Religious Actn Ctr Reform Jewdi
Fax: 96679070
Voice: (202) 387-2800
Comments: Rabbi Lynne Landsberg

Rlgus Coalitn 4 Rprodctv Choice
Fax: 96287716
Voice: (202) 628-7700
Comments: Laurie Shepard

Sexuality Info & Ed Council US
Fax: 912128199776
Voice: (212) 819-9770
Comments: Debra Haffner (SIECUS)

Soc 4 Investigative Dermatology
Fax: 912168446810
Voice: (216) 844-6859
Comments: Angela Welsh

Soc 4 Pediatric Research
Fax: 93936137
Voice: (202) 347-8600
Comments: Karen Hendericks

Soc of Critical Care Medicine
Fax: 917142826050
Voice: (714) 282-6000
Comments: Norma Shoemaker

Society for Adolescent Medicine
Fax: 98654558
Voice: (202) 865-1592
Comments: Dr. Renee Jenkins

Unitd House of Prayer 4 All ppl
Fax: 98294717
Voice: (202) 882-3956
Comments: Bishop S.C. Madison

United Methodist Church
Fax: 95470358
Voice: (202) 547-2271
Comments: Barbara Thompson

Unity Fellowship Church Movemnt
Fax: 912139364973
Voice: (213) 936-4948
Comments: Bishop Carl Bean

Voters for Choice
Fax: 95880600
Voice: (202) 588-5200
Comments: Julie Burton

Wider Opp. for Women
Fax: 96384885
Voice: (202) 6383143
Comments: Cynthia Marano

Women's Legal Defense Fund
Fax: 99862539
Voice: (202) 986-2600
Comments: Joanne Hustead

Zero Population Growth
Fax: 93322302
Voice: (202) 332-2200
Comments: Brian Dixon

Zeta Phi Beta Sorority
Fax: 92324593
Voice: (202) 387-3103
Comments: Vicki Robinson

PRESIDENT CLINTON ANNOUNCES APPOINTMENT OF DR. HENRY FOSTER AS SENIOR ADVISOR ON TEEN PREGNANCY

The President today announced the appointment of Dr. Henry Foster as Senior Advisor to the President on Teen Pregnancy and Youth Issues. Dr. Foster will also be serving as an Expert Advisor to the Director of the Centers for Disease Control and Prevention and to the Secretary of Health and Human Services.

In this role, Dr. Foster will be playing a major role in the administration's efforts to address the rising levels of teen pregnancy in this country. He will be working to bring national attention to the issue, galvanize activity at the local level to prevent teen pregnancy, and to advise the Administration on policies relating to youth generally. He will be the President's liaison to efforts in the private sector to fulfill the President's call for a national campaign to address teen pregnancy and will be meeting with leaders in business, media and other fields to mobilize their interest in the issue.

"I am very pleased that Dr. Foster has agreed to this position," the President said. "I was very disappointed earlier this year that the Senate denied the country the opportunity to be served by this outstanding and dedicated man. I am pleased that he has agreed to find another way to work with us in our efforts to reduce teen pregnancy and promote hope and opportunity for our youth."

Dr. Foster is presently a Professor of Obstetrics and Gynecology at Meharry Medical College in Nashville, Tennessee. He has in the past been the Dean of the School of Medicine at Meharry and Chairman of the Department of Obstetrics and Gynecology.

The appointment of Dr. Foster is effective immediately.

FOSTER

DRAFT

To: Peter and HHS folks
From: Jeremy

Here's a very rough first cut at a press statement on Dr. Foster. Could you share this with Kevin, Melissa and anyone else who needs to see it for comment? I will then circulate a revised draft internally here. Let's talk Wednesday about possible timing of the announcement and some meetings we could set up with groups in advance of 10/5.

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• > new #'s: Soon.
- Peter checking.

• > comments - Peter getting
• > Meetings associated: Thurs.
> no to reports: not really interesting.

THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release July 12, 1995

PRESIDENT CLINTON NAMES SIX MEMBERS TO THE NATIONAL COMMISSION ON CRIME CONTROL AND PREVENTION

The President today announced his intent to appoint six members to the National Commission on Crime Control and Prevention. The Commission will be composed of ten individuals, four of whom will be announced at a later date.

Lee Fisher of Ohio to serve as Chair, currently practices law with the Cleveland firm of Hahn Loeser and Parks. He served as Ohio Attorney General from 1991-1995 and received national acclaim for forming unique partnerships with local law enforcement and citizens to fight violent crime. His "Operation Crackdown" program to close drug houses received the national Innovation Award from the Council of State and Local Governments. His "Operation Windfall" program was the largest sting operation of its kind in the country, luring fugitive felons. He currently serves on the Boards of Directors of the National Center for Missing and Exploited Children and the National Center to Prevent Handgun Violence, and on the American Bar Association Task Force on the Unmet Legal Needs of Children. Attorney General Fisher served for ten years in the Ohio Legislature where he was voted "Legislator of the Year" by a number of law enforcement and child advocacy organizations. He received his B.A. from Oberlin College and his J.D. from Case Western Reserve Law School.

Dennis Wayne Archer of Michigan to serve as a Member, is the Mayor of the City of Detroit. In the past, Mayor Archer has served as Associate Justice to the Michigan Supreme Court, an Associate Professor at Detroit College of Law, and an adjunct Professor at Wayne State University Law School. He is currently a member of the United States Conference of Mayors, the National Conference of Black Mayors, and the Intergovernmental Policy Advisory Committee of the United States Trade Representative. Mayor Archer received his B.S. from Western Michigan University and his J.D. from Detroit College of Law.

-more-

Paul Helmke of Indiana to serve as a Member, is the Mayor of the City of Fort Wayne, Indiana. Mayor Helmke previously practiced law in Fort Wayne and served as an Assistant Allen County Attorney. He is Chair of the Public Safety and Crime Prevention Policy Committee for the National League of Cities, second Vice-President of the Indiana Association of Cities and Towns and Past-President of both the National Conference of Republican Mayors and Local Officials and the Indiana Republican Mayors' Association. He is a graduate of Indiana University and received his J.D. from the School of Law at Yale University.

Deborah Prothrow-Stith of Massachusetts to serve as a Member, is a Professor of Public Health Practice and Assistant Dean of Government and Community Programs for the Harvard School for Public Health. Dr. Prothrow-Stith also served the Commissioner of Public Health for the Commonwealth of Massachusetts from 1987 to 1989. She is currently directing a number of projects whose goals are to identify and prevent community- and school-based violence. She received her B.A. from Spelman College and her M.D. from Harvard Medical School.

Andrew J. Shookhoff of Tennessee to serve as a Member, is the Juvenile Court Judge for Metropolitan Nashville-Davidson County. Judge Shookhoff serves on the Executive Committee of the Tennessee Council of Juvenile and Family Court Judges, and is a member of the National Council of Juvenile and Family Court Judges. He has served on the American Bar Association's Criminal Justice Section Council and is Vice-Chair of the Juvenile Justice Committee. He served on the faculty of Vanderbilt Law School for ten years before being elected Judge in 1990. Judge Shookhoff received his B.A. from Bard College, his Master's from Central Washington State University and his J.D. from Vanderbilt University Law School.

Esta Soler of California to serve as a Member, is Founder and Executive Director of the Family Violence Prevention Fund, a national organization working to develop innovative responses to the epidemic of domestic violence. Ms. Soler is the former Chair of the Human Rights Commission of the City and County of San Francisco and a recipient of a Kellogg Foundation National Leadership Fellowship.

The National Commission on Crime Prevention and Control was created to develop a comprehensive proposal, including the cost of implementation, for preventing and controlling crime and violence in the United States. The Commission will submit a detailed report to the Congress and the President containing its findings and recommendations two years after the Commission is fully constituted.

-30-30-30-

John Emerson

EXECUTIVE OFFICE OF THE PRESIDE

26-Jan-1995 01:39pm

TO: (See Below)

FROM: Jeremy M. Gaines
Office of the Press Secretary

SUBJECT: Personnel Announcement

THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release January 26, 1995

PANETTA ANNOUNCES WHITE HOUSE APPOINTMENTS

Chief of Staff Leon E. Panetta today announced that the President has made the following appointments to the White House staff:

Kathryn O'Leary (Kitty) Higgins, currently Chief of Staff at the Department of Labor, will be the new Cabinet Secretary, with the title of Assistant to the President for Cabinet Affairs. Prior to her Labor Department appointment, Higgins served as chief of staff for Representative Sander M. Levin. She has also served as Democratic staff director for the Senate Labor and Human Resources Committee, as a member of the White House domestic policy staff in the Carter Administration. Higgins holds a B.S. degree from the University of Nebraska.

Bob J. Nash, who serves now as Under Secretary of Agriculture for Rural Economic and Community Development, has been named Assistant to the President and Director of Presidential Personnel. Immediately prior to his position at the Department of Agriculture, Nash was Associate Director of Personnel at the White House. Nash has also served as president of the Arkansas State Development Finance Authority, as senior executive assistant for

economic development in the office of then-Governor Clinton, and as vice president of the Winthrop Rockefeller foundation in Little Rock. He earned a B.A. degree from the University of Arkansas at Pine Bluff and a Masters degree in urban studies from Howard University.

Nash replaces J. Veronica Biggins, who has informed the President that she is resigning to return to her home in Atlanta.

Rahm Emanuel, now an Assistant to the President and Deputy Director of Communications, has been appointed to the new position of Director of Special Projects. In his current position, he coordinated White House efforts to enact the NAFTA and crime legislation, and he will continue to coordinate such efforts. He will remain an Assistant to the President. Emanuel's prior positions include White House Political Director, Co-executive Director of the Presidential Inaugural Committee, Finance Chairman of the Democratic National Committee, Finance Director of Clinton for President, and National Campaign Director of the Democratic Congressional Campaign Committee. Emanuel holds a bachelor of arts degree from Sarah Lawrence College and a Masters degree in speech and communications from Northwestern University.

-more-

John B. Emerson, who is currently a Deputy Assistant to the President and who coordinated the White House effort to enact the GATT legislation, has been named Deputy Assistant to the President and Deputy Director of Intergovernmental Affairs. He will have responsibility for working with the nation's governors and lieutenant governors. Prior to his current position, Emerson served as the White House Deputy Director of Personnel. He was California campaign director for the 1992 Clinton-Gore presidential campaign. Emerson has served as chief deputy and chief of staff to the Los Angeles City Attorney, and he is a former partner in the Los Angeles law firm Manatt, Phelps & Phillips. He earned a B.A. from Hamilton College and a J.D. from the University of Chicago.

Stephen B. Silverman, currently a Special Assistant to the President and acting Cabinet Secretary, will resume his role as Deputy Cabinet Secretary, with the title Deputy Assistant to the President for Cabinet Affairs. Silverman served in a number of positions on the Clinton/Gore national campaign. Prior to his White House position, he practiced law in New York. He earned a B.A. from Cornell and a J.D. from Northwestern University School of Law.

The appointments of Higgins, Nash, and Silverman are effective February 6. The appointments of Emanuel and Emerson are effective immediately.

"As the President works to serve the American people, we continue to put in place the best possible team to support his efforts," Panetta said. "These men and women are the kind of hard-working, experienced, and intelligent people who will make this White House as effective as possible on behalf of the President and the nation."

-30-

Distribution:

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TO: Lori E. Abrams
TO: Dawn A. Alexander
TO: David B. Anderson
TO: Walker, Angelina
TO: Heather Beckel

DEPARTMENT OF HEALTH & HUMAN SERVICES

Chief of Staff

Washington, D.C. 20201

FACSIMILE

DATE Sept. 7, 1995

TO: (NAME, ORGANIZATION, CITY/STATE AND PHONE NUMBER):

Jeremy Ben-Ami
Office of Domestic Policy

456-5566

FROM: (NAME, ORGANIZATION, CITY/STATE AND PHONE NUMBER):

Kevin Thurm
Chief of Staff
DHHS

690-6133

RECIPIENT'S FAX NUMBER: ( ) 456-7028

NUMBER OF PAGES TO SEND (INCLUDING COVER SHEET): 5

COMMENTS:

SUPPLEMENTAL INFORMATION – EXPERT OR CONSULTANT

(Submit with request for Personnel Action, SF-52)

1. NAME OF PERSON (Last, first, middle initial)

Foster, Henry W., Jr., M.D.

2. TOTAL PERIOD FOR WHICH APPOINTMENT IS REQUESTED (enter one: 365 days or a shorter period.)

Not -to-exceed-one-year

3. MAILING ADDRESS

4. APPROXIMATE NUMBER OF DAYS PERSON IS EXPECTED TO PERFORM SERVICES DURING THIS PERIOD.

5. SERVICES TO BE PERFORMED:

A. EXPLAIN IN FULL THE SERVICES TO BE PERFORMED:

(SEE ATTACHED)

B. SPECIFY WHAT DUTIES WILL BE ASSIGNED THAT WILL INVOLVE THE PERSON IN THE TRANSACTION OF BUSINESS ON BEHALF OF THE GOVERNMENT WITH ANY PROFIT OR NON-PROFIT ORGANIZATION:

C. SPECIFY WHAT DUTIES WILL BE ASSIGNED THAT WILL INVOLVE THE PERSON IN THE RENDERING OF ADVICE TO THE GOVERNMENT WHICH WILL HAVE DIRECT AND PREDICTABLE EFFECT ON THE INTERESTS OF ANY PROFIT OR NON-PROFIT ORGANIZATION:

6. SPECIAL QUALIFICATIONS OF THE PERSON RECOMMENDED FOR APPOINTMENT (List those which relate specifically to the services to be performed.)

(SEE ATTACHED)

NOTE: Complete required certification on other side of form.

NFW-418 (Rev.12/77)

5.A

- Serve as an advisor to the Director of the Centers for Disease Control and Prevention, the Secretary of Health and Human Services, the President, and their respective staffs on matters pertaining to teen pregnancy and related adolescent health issues.

- Evaluate past and current teen pregnancy prevention programs (public and private) and, based on findings, work with CDC, DHHS and White House staff on a national teen pregnancy prevention initiative.

- Serve as a liaison between the Administration and outside leaders and groups focusing on teen pregnancy prevention.

- Participate in teen pregnancy meetings with White House and DHHS staff.

- Assist the Administration in galvanizing groups and individuals at the local level to create and implement initiatives to prevent teen pregnancy.

- Serve as a representative of the Administration on teen pregnancy issues by speaking publicly and participating in public and private meetings and events at the national and local level.

- Raise public awareness of successful state and local efforts and of the federal efforts and resources available to assist communities in preventing teen pregnancy.

Dr. Foster possesses extraordinary credentials and expertise in the field of medicine and health, specifically in obstetrics and gynecology. He is certified by the American Board of Obstetrics and Gynecology; serves as Professor, Department of Obstetrics and Gynecology, Meharry Medical College, and has held many leadership positions, including Dean, School of Medicine, Chairman, Department of Obstetrics and Gynecology. He also serves on numerous committees and advisory boards at the local, regional, and national levels; received several hospital appointments; and has received major awards and honors for his work. He has been actively involved in research activities which has resulted in numerous publications in medical and scientific journals. (See CV for more details)

CERTIFICATION

In approving the appointment of this consultant/expert, I have considered the requirements of law, relevant decisions of the Comptroller General, and Office of Personnel Management Department policies and instructions. More specifically, I have satisfied myself that:

1. the services of the individual are essential for effective program management
2. the duties to be performed are those of (check one)

   ____ a consultant (that is, they are purely advisory in nature and will not include the performance or supervision of operating functions)

   ✓ an expert (that is, they require a high level of expertise not available in the regular work force)

3. the proposed appointee is qualified to (check one)

   ____ provide advisory services as a consultant

   ✓ serve as an expert as that term is used in FPM Chapter 304-1

4. the appointment is appropriately designated as (check one)

   ✓ intermittent (the individual will work occasionally and irregularly)

   ____ temporary (the individual will work on a regular basis for temporary period)

5. the appropriate appointment authority is being used
6. the pay level is appropriate for the duties to be performed and the qualifications of the appointee
7. the record of appointment has been clearly documented to show the services to be performed and the special qualifications of the appointee which relate specifically to these services
8. a statement of employment and financial interests has been obtained and it has been determined that no conflict of interest exists.

Date — Signature of Program Manager Authorized to Obtain the Consultant's/Expert's Services (This certification relates particularly to items 1, 2, 3, 6, 7 and 8)

Date — Signature of Appointing Official (This certification relates particularly to items 3 through 8)

DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Office of the Assistant Secretary
for Health
Washington DC 20201

August 29, 1995

Mr. Jeremy Ben-Ami
Deputy Assistant to the President
for Domestic Policy
The White House
Washington, D.C. 20500

Dear Jeremy:

I am hopeful that you had the most enjoyable vacation ever. While you were away, as you can see from the enclosed position description, I have expanded somewhat on the activities that we discussed. I welcome any comments you might wish to make. Also, you will note I have included a blind copy of a note I sent to Kevin Thurm following meetings with him. This letter, I think, captures much of both the operational and programmatic aspects of my function as an SGE.

I look forward to working with you and your staff and our remaining in close communication.

Sincerely,

Henry W. Foster, Jr., M.D.
Professor of Obstetrics and Gynecology
Meharry Medical College
U.S. Surgeon General-Designate

Enclosures

HWF:ljh

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Professor of Obstetrics and Gynecology
Meharry Medical College
U.S. Surgeon General-Designate

Enclosures

HWF:ljh

Position Description for Dr. Henry Foster, Jr.

Dual Title:

- Senior Advisor to the President on Teen Pregnancy and Youth Issues
- Expert to the Director, Centers for Disease Control and Prevention

1. Serve as an advisor to the Director of the Centers for Disease Control and Prevention, the Secretary of Health and Human Services, the President, and their respective staffs on matters pertaining to teen pregnancy and related adolescent health issues.

2. Evaluate past and current teen pregnancy prevention programs (public and private) and, based on findings, work with CDC, HHS and White House staff on a national teenage pregnancy prevention initiative.

3. Serve as a liaison between the Administration and outside leaders and groups who focus their activities on teen pregnancy prevention.

4. Bring national attention to the enormous magnitude of the problem of teen pregnancy in the United States.

5. Raise public awareness of successful local and state efforts and raise public awareness of federal efforts and resources that are available to assist communities in addressing these problems in their communities.

6. Assist the Administration in galvanizing groups and individuals at the local level to create and implement initiatives to substantially reduce the teen pregnancy rate in the United States.

7. Serve as a representative of the Administration on teen pregnancy issues by speaking publically and participating in both national and local meetings of organizations concerned with teen pregnancy and youth issues.

8. Make appearances and give interviews to the media to publicize the teen pregnancy issue, feasible interventions starting with abstinence and challenge people (particularly at the local level) to become more involved.

9. Meet with individuals and groups in less public settings to motivate them to action on behalf of the President, the Secretary, and the CDC director.

10. Participate in teen pregnancy meetings with White House, HHS and CDC staff.

DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Office of the Assistant Secretary
for Health
Washington DC 20201

August 29, 1995

Note to the Chief of Staff

Dear Kevin:

First, I thank you and your staff very much for helping me to address the operational issues concerning my forthcoming activities in teen pregnancy prevention that the President wishes for me to undertake. As you are aware, I have also been engaged in meetings with principals in the office of the Deputy Assistant to the President for Domestic Policy. Hence, as a consequence of meetings with them and you and your staff, I have enclosed the position description for the activities I will carry out for the Administration's attack on the epidemic of teen pregnancy that exists in our Nation.

It is envisioned that a national campaign, similar to that which exists for a "Partnership for a Drug-Free America," will be created to confront the problem of teenage pregnancy. Based on discussions at the President's Office on Domestic Policy, he wishes for me to serve as his ambassador to the public sector. In executing this task I will be explaining and clarifying those programs and operations that Federal Government is providing which can catalyze the activities of the private sector thus creating a true local/national partnership.

As I mentioned when we last met, Kevin, I had to assure I do not compromise: (1) my own integrity, (2) the integrity of the President, CDC and HHS, and (3) the financial stability of my family. It is my sense that all three of these issues have been successfully addressed. I have read very carefully the document entitled, "Effect of Special Government Employee Status on Applicability of Criminal Conflict of Interest Statutes and Other Ethics-Related Provisions," and have met subsequently with Jack Kress. In my capacity as an **uncompensated** special government employee (SGE) I will not be constrained by the Hatch Act or have restrictions placed on my earnings **except** on those days (inclusive 24-hour-period) wherein I am conducting specific activities and functions as stipulated in my position description. With this in mind, I feel well-positioned to comfortably engage this new challenge and look forward to the opportunity it presents.

Now, in order for me to continue to function effectively, your office should be advised of some of the support services that are necessary. They fall in three broad categories: (1) personnel, (2) space, and (3) equipment/supplies.

Currently, I have superlative administrative support in that of Ms. Lenora Holland. She was assigned to me by Dr. Audrey Manley (for which I am most grateful) this past March when I became an unpaid consultant to the Department

of Health and Human Services. During this period of time, I have kept Ms. Holland fully engaged with respect to her work volume and certainly see no decrease in this need with my expanded role as Senior Advisor; hence, I'm requesting to obtain her excellent services if she wishes to do so.

With the issue of space, the **amount** required is conservative but I do seek **quality**, i.e., good access, windows, adequate heating/cooling and a modest-size conference area.

Lastly and because of the significant advocacy characteristics of my position as Senior Advisor, communications take on a special need; hence, the following items are requested to support the function of the office: a Personal Computer (486 minimum) connected to the LAN with a comparable Laser printer, IBM Wheelwriter typewriter, scanner, separate FAX machine and copying machine, and phones with voice mail/speakerphone capability.

Again, thank you for your efforts. I look forward to remaining in contact with you.

Sincerely,

Henry W. Foster, Jr., M.D.

Attachment

cc:
Mary Beth Donahue
Deputy Chief of Staff

bcc:
Mr. Jeremy Ben-Ami

THE WHITE HOUSE

WASHINGTON

August 17, 1995

NOTE TO CAROL RASCO
BOB NASH
KEVIN THURM
MARY BETH DONOHUE

From: Jeremy Ben-Ami

Subject: Attached Letter to Dr. Foster

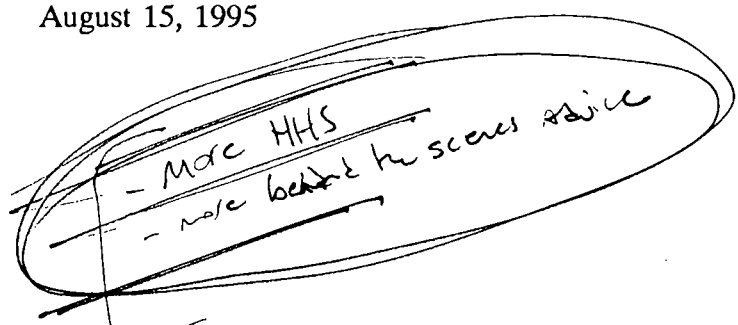
I would greatly appreciate it if you could review the attached letter to Dr. Foster which outlines the position he will be accepting with the administration as a Senior Advisor to the President and the Secretary of HHS on Teen Pregnancy and Youth Issues.

Please let me know if you see any problems with the letter which I would like to send to Dr. Foster by c.o.b. Friday August 18. I am leaving the country, and Dr. Foster is coming to D.C. to meet with Kevin next week - so it would be helpful to get this letter out as quickly as we can.

Please call me with comments as soon as possible. Thanks in advance for your help.

DRAFT

August 15, 1995



Dr. Henry Foster

Nashville TN

Dear Dr. Foster:

I am writing to confirm the details of our several conversations over the past month concerning your new position working for the President and the Secretary of Health and Human Services (HHS) on teen pregnancy and youth issues. This letter confirms the White House's understanding of the position and has been developed in cooperation with HHS. I understand that you will be meeting with Kevin Thurm next week to discuss further details including how much of the year you will be working, reimbursement, and any additional duties the Department may have in mind.

It is our intention to appoint you to be Senior Advisor to the President on Teen Pregnancy and Youth Issues. You will also be appointed to a similar position at HHS. You will be the President's primary spokesperson and ambassador on issues relating to teen pregnancy and youth. As we have discussed, the President is hopeful that a private-sector National Campaign Against Teen Pregnancy can be started this year. You will be the President's liaison to that effort, but would not be responsible for organizing, creating or directing it.

As we have discussed, you will spend the majority of your time travelling the country and speaking on behalf of the President on the issue of teen pregnancy. The goals of your efforts will include:

- bringing national attention to the need for action in these areas
- raising public awareness of the federal efforts and resources that are available to assist communities in addressing these problems in their communities
- motivating people and organizations to get more involved in helping youth in their communities

Your regular activities would almost certainly include:

- an active public speaking schedule attending both national and local meetings of organizations interested in youth issues and teen pregnancy

- appearances and interviews in the media to publicize the issue, highlight solutions and challenge people to become more involved

- meetings with individuals and groups in less public settings to motivate them to action on behalf of the President and the Secretary.

The President has often said that teen pregnancy is a problem that government alone cannot solve. We can only address it as a nation through a partnership between the private and public sectors. We hope that the "National Campaign" we have been discussing will help coordinate and lead the private sector's efforts, and we hope that you will be the President's ambassador on behalf of the public sector -- explaining those programs and opportunities that the federal government is providing and helping to motivate private sector participation in this partnership.

This letter obviously only scratches the surface in describing your specific duties. We anticipate that you will be working closely with Carol Rasco and with me at the Domestic Policy Council and with the staff at HHS designated by the Secretary to determine your schedule and specific activities. We all look forward to a successful and close cooperation in the future between the White House, HHS and yourself as we work to mobilize the nation to reduce teen pregnancy and provide hope and a brighter future for our country's teenagers.

Thank you very much for your patience and cooperation over the last month as we have developed this position. We hope to make an announcement of your new role in September provided that the above outline matches your expectations. I wish you the best of luck in this new role.

Sincerely,

Jeremy Ben-Ami
Deputy Assistant to the President
for Domestic Policy

DRAFT

August 15, 1995

Dr. Henry Foster

Nashville TN

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Thank you very much for your patience and cooperation over the last month as we have developed this position. We hope to make an announcement of your new role in September provided that the above outline matches your expectations. I wish you the best of luck in this new role.

Sincerely,

Jeremy Ben-Ami
Deputy Assistant to the President
for Domestic Policy

Washington D.C. 20201

FACSIMILE

DATE 7-12

TO: (NAME, ORGANIZATION, CITY/STATE AND PHONE NUMBER) :

Lynn Hogan / J Lee-Ann

FROM: (NAME, ORGANIZATION, CITY/STATE AND PHONE NUMBER) :

Kevin Thurm
Chief of Staff
DHHS

690-6133

Jonathan

RECIPIENTS FAX NUMBER ( ) 4-7028

NUMBER OF PAGES TO SEND (INCLUDING COVER SHEET) 3

COMMENTS

FYI

—Wall St. Jrnl.; 7-12-96

GOP to Allow Separate Vote On Welfare Bill

By Dana Milbank A14
Staff Reporter of The Wall Street Journal

WASHINGTON—House and Senate Republican leaders agreed to send a free-standing welfare-revision bill to President Clinton, reviving the prospects for an overhaul of poverty programs this year.

The move is a reversal of policy for the GOP which, respecting the wishes of its presidential candidate, Robert Dole, was reluctant to give President Clinton another chance to sign welfare reform after two earlier vetoes. Instead, they had wanted to link the revision to an overhaul of Medicaid, the health-care program for the poor, but Mr. Clinton had threatened to veto that controversial and less popular legislation.

The GOP switch in policy puts Mr. Clinton on the spot. He has said repeatedly that he is eager to sign a welfare-revision measure and fulfill his 1992 pledge to overhaul the welfare system. In May, the president said that if a welfare bill has time limits, work requirements, tough child-support enforcement and protection for children, "I'll sign it right away." A few days later, when Mr. Dole suggested a welfare plan without the Medicaid attachment, the president said: "My attitude is, let's let her rip . . . I will sign it, and it will be good for the country."

However, he will likely face enormous pressure from the left in Congress and within his administration to reject the reform. One administration official said the battle will be "very ugly," with opponents charging that the reform is racially discriminatory. The White House already appeared to wiggle away from earlier support. "It's not a foregone conclusion he'll sign it," a Clinton adviser said yesterday.

The president hopes to get political mileage out of his success in getting the Republicans to back down on Medicaid revision. He will also point to his state-by-state welfare-revision efforts. Along those lines, Mr. Clinton plans to sign Wisconsin's sweeping welfare waiver request next week, as the nation's governors meet in Puerto Rico.

Yesterday, House Speaker Newt Gingrich (R., Ga.) and Senate Finance Chairman William Roth (R., Del.) said that both chambers had agreed to split the welfare measure from the Medicaid bill. Votes are expected next week. A spokesman for Senate Majority Leader Trent Lott (R., Miss.) said a formal decision hadn't yet been reached, and conservative senators, who oppose the split, expect further meetings next week.

"Mr. President, we are calling your bluff," said House Ways and Means Committee Chairman Bill Archer, a Texas Republican. "It's time to put up or stop the rhetoric." The split is a victory for moderates of both parties, who had been pushing for agreement on welfare. "While passage of both Medicaid and welfare reform are equally important, we cannot let opposition to one defeat the other," said Rep. Dave Camp, a Michigan Republican. Sen. John Breaux, a Louisiana Democrat who believes there is "much agreement" on welfare reform, said "there is no excuse for holding welfare reform hostage to a bad Medicaid plan."

Despite the public bickering, differences between the administration and Congress over welfare policy are relatively insignificant. The two sides are virtually indistinguishable on child-care funding and standards, a five-year time limit, work requirements, child support, and the amount of their own funds states must continue to spend. The only substantial disagreements remaining are over an optional block grant for Food Stamps, and assistance to legal aliens. Administration officials voiced hope that these differences could be erased by amendments in the Senate.

Robert Greenstein, head of the Center on Budget and Policy Priorities, which opposes the existing welfare legislation, acknowledged that the split "makes it more likely" welfare revision will become law. If Democratic senators prevail in amendments protecting food stamps, immigrants and states' funding, he said, "it would virtually guarantee a signature."

Wash. Times; 7-12-96

Specter pleases pro-life forces

Wants more funds for abstinence plan

By Julia Duin
The Washington Times

Confronted by a panel of five persons pleading for more federal funds for abstinence education, Sen. Arlen Specter yesterday unveiled a plan to add $5 million to the Adolescent Family Life (AFL) program.

"With abortion being such a divisive issue in this country, there's one thing we can agree on, which is abstinence," the Pennsylvania Republican said.

Currently funded at $7 million, AFL was nearly eliminated two years ago by the Clinton administration. The administration backed down under protest from Congress and pro-family groups who pointed out the disparity between funding for abstinence education and the $450 million the government gives to contraceptive programs.

During his brief presidential bid last year, Mr. Specter ran into conflicts with pro-lifers about his insistence on abortion rights. More recently, as chairman of the Senate Appropriations subcommittee on Labor, Health and Human Services, and Education, he has reached out to pro-lifers by emphasizing abstinence programs.

However, $5 million is a mere drop in the bucket, said panelists who suggested that Congress divert more funds for Title X family-planning programs to abstinence-centered education.

"For 25 years, public-policy programs and funding have been concentrated under the category, or heading, of teen pregnancy," said Kathleen Sullivan, director of the Chicago-based Project Reality abstinence program. "Maybe it's time we reconsider the very concept of this category."

Too many programs focus on simply preventing pregnancy, she said, while ignoring the root cause of the problem, which is lack of sexual self-control.

Teen-agers are perfectly able to choose abstinence, Miss Sullivan said, citing her group's findings that only 5 percent of the students they work with claim their sexual urges cannot be controlled.

When quizzed by Mr. Specter about whether her program even mentions condoms, she replied they do, with an emphasis on their failure rates. Unlike some programs, hers does not encourage the students to try on the condoms nor does it suggest outlets where they can be purchased.

Dr. Henry W. Foster Jr., whose nomination for surgeon general failed to win Senate confirmation last year and now President Clinton's adviser on reducing teen pregnancy, put in a surprise appearance at the meeting to describe his ambivalence about abstinence-only programs.

"As someone in the field, that doesn't work for me," said Dr. Foster, who heads the "I Have a Future" program based in Nashville, Tenn.

Photo by Kenneth Lambert/The Washington Times

Dr. Henry W. Foster Jr. appears at a hearing yesterday to describe his doubts about abstinence-only programs.

Sex Education, 1st Ld-Writethru, a0686,420
Clinton's Advisor on Teen Pregnancy Criticizes Abstinence-Only Programs
EDS: RECASTS 5th graf 'Specter has' to REMOVE reference to primaries, which occurred after Specter dropped out
By ANICK JESDANUN=
Associated Press Writer=

WASHINGTON (AP) Sex education that stresses abstinence will not work unless teen-agers also are taught the proper use of contraceptives, President Clinton's special advisor on teen pregnancy said Thursday.

Henry Foster, whose nomination as surgeon general was rejected by the Senate last year, said abstinence-based programs are laudable but impractical by themselves.

''You have to accept the fact that being sexually active cannot be ignored,'' said Foster, whose impromptu appearance came after panel chairman Sen. Arlen Specter noticed him the audience and invited him to testify at a hearing on abstinence education funding.

Specter, R-Pa., who chairs the Appropriations subcommittee on labor, health and human services and education, said he still plans to include more than $12 million in fiscal 1997 funding for abstinence-only programs a $5 million increase over current levels.

Specter has been pushing the abstinence issue as a way to bridge the gap between abortion-rights supporters and opponents after his abortion-rights agenda failed to generate support during his unsuccessful quest for the GOP presidential nomination.

Foster's nomination as surgeon general was shot down in a politically-charged debate over the number of abortions he had performed. Earlier this year, President Clinton named Foster as senior advisor on teen pregnancy reduction and youth issues, an unpaid position that does not require Senate confirmation.

Foster said after the hearing that regardless of efforts to promote abstinence, ''some won't buy the message.''

''All adults don't buy the message that you shouldn't smoke, so for those youngsters who don't buy the primary message, we can't turn our backs on them,'' Foster said. ''That would be irresponsible, and it would be medically immoral in my judgment.''

Specter, the only senator in attendance, told reporters he would push forward with funding for abstinence-only programs, saying those who want to talk about family planning and contraceptives can tap other federal revenue sources.

The spending bill is scheduled for consideration later this month.

Supporters of abstinence-only programs said including lessons on the use of condoms and birth-control pills sends teen-agers a conflicting message.

''How would you like it if we said, 'You can drink and drive if you just use a seat belt' or 'You can smoke a cigarette, ... just choose one with a filter'?'' asked William Devlin, director of the Philadelphia Family Policy Council, an educational and research group that opposes abortions.

APWR-07-11-96 1649EDT

FAX TRANSMISSION

U.S. Department of Health and Human Services
Office of the Secretary

PS. made copies upon arrival for me Thanks.

DATE: June 25, 1996

TO: Ms Dorothy Kavianis

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TOTAL NUMBER OF PAGES TRANSMITTED: 3

COMMENTS:

Dr. Foster transcript from ABC News report on Saturday. Please give a copy of last page to Lynn Hogan. Thanks.

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Office of the Secretary

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Document ID: C:\WORD\LISA\FOSTER.ABC

SHOW: World News Saturday (ABC 6:30 pm ET)

June 22, 1996 10:00 Eastern Time

Transcript # 625-6

SHOW-TYPE: Package

SECTION: News

LENGTH: 582 words

HEADLINE: Dr. Henry Foster - The Doctor Is In

HIGHLIGHT: The politics of abortion kept Dr. Henry Foster from becoming U.S. surgeon general, but that rejection didn't stop him. He's found a different path to help young people, fight teen pregnancy, go on with his life

BODY:

AARON BROWN: One year ago, the Senate said no to President Clinton's choice for surgeon general, Dr. Henry Foster. No one questioned his medical credentials. It was politics that cost him the job, specifically, the politics of abortion. Foster left the public stage, but as ABC's Deborah Weiner discovered, he hardly gave up his life's work.

DEBORAH WEINER, ABC News: [voice-over] To Dr. Henry Foster, what happened one year ago was only an episode, not his biggest crisis. Nearly four decades of practicing medicine has provided more difficult moments.

Dr. HENRY FOSTER, former Surgeon General Nominee: The toughest thing in your life is not being able to find a pumping artery in a patient at 2:00 in the morning and her blood pressure won't stabilize. That is pressure. This other stuff is just stuff.

DEBORAH WEINER: [voice-over] The stuff of politics. Because Dr. Foster had performed abortions, his nomination became a heated political issue. In fact, conservative opposition blocked the confirmation vote in the Senate. The President offered Dr. Foster a consolation.

[on camera] Dr. Foster was made senior adviser to the President on teen pregnancy and youth issues, and consultant to the Department of Health and Human Services, a big title with no salary.

[voice-over] In his new job, Dr. Foster is in high demand, booked through November, mobilizing grassroots efforts to reduce teen pregnancy, and talking with young people.

Dr. HENRY FOSTER: When people say, 'You're not getting anything' for this job I'm doing, they don't understand how the world works, and that is more important to me than money, what we do for these kids.

DEBORAH WEINER: [voice-over] Dr. Foster preaches abstinence and encourages early education about sexuality and health. He says he has a closeness with young people he might not have had as surgeon general.

Dr. HENRY FOSTER: In this country, I guess the sun would quit rising in the east if we advertised condoms on television.

DEBORAH WEINER: [voice-over] Dr. Michael Carrera, who also works with young people, has known Henry Foster for nearly 10 years.

Dr. MICHAEL CARRERA, Children's Aid Society: Dr. Foster, because of his work, working with young people and families, experienced, many times, great despair. This makes you very tough, and it is this toughness that we're seeing right now.

Dr. HENRY FOSTER: When one door closes, another opens. I'm doing- I'm really just simply getting my message through a different venue.

DEBORAH WEINER: [voice-over] To earn a living, Dr. Foster teaches medicine at Meharry Medical College in Nashville, as he has for years. Even without the title of surgeon general, he believes he is making a difference. Deborah Weiner, ABC News, Washington.

AARON BROWN: It took riot police and tear gas to bring calm back to Ann Arbor, Michigan today, when a small rally by Ku Klux Klan members-

[voice-over] -was met by thousands of angry counterdemonstrators. The Klan rally drew barely a dozen people, but the counterdemonstration quickly became violent. The Klan members were finally hustled away.

[on camera] We'll be right back.

[Commercial break]

The preceding text has been professionally transcribed. However, although the text has been checked against an audio track, in order to meet rigid distribution and transmission deadlines, it has not yet been proofread against videotape.

LANGUAGE: ENGLISH
LOAD-DATE: June 23, 1996

Teen Prey.

Foster

Fell Foster Announcement (Teen Preg.)

Date: 01/29/96 Time: 13:48
CClinton to Announce Crusade to Reduce Teen Pregnancies

WASHINGTON (AP) Recasting a failed nominee, President Clinton today appointed rejected surgeon general candidate Dr. Henry Foster as his special adviser on teen-age pregnancy.

Clinton also helped kick off a private campaign to reduce the number of children having children. The president said Foster would be his liaison ''to make sure that we have done everything we can do to support this effort.''

''This is not a problem that can be solved in Washington. This is not a problem that can be solved by a political speech, no matter how statesmanlike,'' Clinton said. ''This is a challenge that has to be dealt with one-on-one ... all throughout the country.''

''I believe what is needed on this issue is a revolution of the heart,'' the president added. ''We have to work to instill in every young man and woman a sense of responsibility.''

Members of the campaign plan to meet in New York this week and should be ''up and running in a month,'' Clinton said. Few details were released about the group's plans.

The decision to appoint Foster could spark criticism from Republicans, who rejected Foster's nomination last year because of inconsistent statements on his abortion record as a Tennessee obstetrician. Reducing teen-age pregnancy was supposed to be Foster's top priority as surgeon general.

Foster will not be paid for what White House press secretary Mike McCurry described as a part-time job. But he will get an office and travel budget at the Department of Health and Human Services. Foster, who did not talk to reporters today, will continue his work as professor at Meharry Medical College in Nashville, Tenn., McCurry said.

Women's groups have pressed Clinton to make teen-age pregnancy a key issue, and they had lined up in support of Foster. Later today, Clinton was accepting a report on women business ownership

McCurry said Clinton did not plan to nominate a surgeon general candidate this year.

''It would be difficult to appoint a surgeon general or nominate a surgeon general candidate who reflects the president's view that abortion should be safe, legal and rare,'' McCurry said. ''That doesn't qualify with the rather extreme view that portions of the Republicans have in the Senate.''

He said Clinton is satisfied with the work of Audrey F. Manley, deputy surgeon general.

The president nominated Foster in 1995 after Surgeon General Joycelyn Elders was forced to resign over a series of controversial statements. Foster's nomination was rejected in the summer of 1995 by the Republican Senate.

Foster's new position, which also makes him a presidential adviser on youth issues, won't need Senate confirmation.

He announced the first members of a private National Campaign to Reduce Teen-age Pregnancy, including former surgeon general C. Everett Koop, comedian Whoopi Goldberg, former Sen. Warren Rudman, R-N.H., and MTV president Judy McGrath.

McCurry said the group had secured pledges for millions of dollars in private donations that will help kickoff the campaign. McCurry said he did not know how the money will be spent, but he said the group probably will urge teens to use contraceptives if they have sex.

''Encouraging the use of contraceptives is something that everyone involved with this has seen as one aspect of solving this problem,'' McCurry said.

''One of their mandates is to lay out a clear mission,'' said White House spokeswoman Ginny Terzano. ''This is a serious, non-partisan effort to mobilize various sectors across the country.''

Terzano did not reveal who will serve as campaign organizers.

Clinton renewed his commitment to reduce teen pregnancy during his State of the Union address last week. He had promised such a crusade during last year's address, but that promise died with Foster's nomination.

APNP-01-29-96 1349EST

E X E C U T I V E O F F I C E O F T H E P R E S I D E N T

30-Apr-1996 08:05pm

TO: (See Below)

FROM: Deborah L. Fine
Domestic Policy Council

SUBJECT: foster testimony

This morning I participated in a meeting for Dr. Foster at HHS in preparation for his testimony on teen pregnancy prevention. I also attended the hearing, which went fine.

There were only a few members there because the first vote of the day was not until 5pm, and the hearing started at 10am. In attendance were: Shays (chair), Souder (freshman Repub.), Morella and Towns. All Members attending seemed serious about their interest in the issue and how to deal with it. THey were all very respectful of Dr. Foster, and there were no tough or unreasonable questions. (Souder was not actually there for questions during Foster's panel.)

He did well with his testimony, which focused primarily on the importance of local community action, noting that this has been a focus of the Administration strategy and highlighting his I Have a Future program.

Q and A for Dr. Foster was easy. When the panel was asked what they would recommend that Congress or the federal government do, Dr. Foster responded that each Member of Congress ought to become part of/or a catalyst for a statewide effort in each of their states to address teen pregnancy and to work with the Campaign. He also said that: we ought to set a national goal for reducing teen pregnancy, government ought to provide technical assistance for local programs and we ought to invest in both outcome and process evaluation. His other comments were about the immportance of providing incentives to young people for postponing sexual activity. (All panelists responded that increased funding for programs, for evaluation and updated data was important. Solutions are at the local level.)

The other panelists were basically all friendly, and we have worked with many on an ongoing basis. They included: Rep. Eva Clayton, Rep. Nancy Johnson, Lt. Gov. Kathleen Kennedy Townsend, Kristin Moore (Child Trends and National Campaign), Elayne Bennett (Best Friends), Charles Ballard (Institute for Responsible