

NLWJC - KAGAN

EMAILS RECEIVED

ARMS - BOX 052 - FOLDER -004

[06/03/1999]

RECORD TYPE: PRESIDENTIAL (NOTES MAIL)

CREATOR: Bruce N. Reed (CN=Bruce N. Reed/OU=OPD/O=EOP [OPD])

CREATION DATE/TIME: 3-JUN-1999 15:54:30.00

SUBJECT: Re: Race/Police conference

TO: Elena Kagan (CN=Elena Kagan/OU=OPD/O=EOP@EOP [OPD])

READ:UNKNOWN

TEXT:

----- Forwarded by Bruce N. Reed/OPD/EOP on 06/03/99
03:54 PM -----

Jose Cerda III

06/03/99 03:51:09 PM

Record Type: Record

To: Bruce N. Reed/OPD/EOP@EOP

cc:

Subject: Re: Race/Police conference

FYI -- I think it will take some work to get DOJ to be in a position to do this. I hear Holder wants to do it, but civil rights doesn't. I'll go ahead and plant a seed w/Holder's folks...jc3

RECORD TYPE: PRESIDENTIAL (NOTES MAIL)

CREATOR: Barbara Chow (CN=Barbara Chow/OU=OMB/O=EOP [OMB])

CREATION DATE/TIME: 3-JUN-1999 13:21:47.00

SUBJECT: Synopsis of Teacher Empowerment Act

TO: Elena Kagan (CN=Elena Kagan/OU=OPD/O=EOP@EOP [OPD])

READ:UNKNOWN

TO: Bruce N. Reed (CN=Bruce N. Reed/OU=OPD/O=EOP@EOP [OPD])

READ:UNKNOWN

CC: Wei-Min C. Wang (CN=Wei-Min C. Wang/OU=OMB/O=EOP@EOP [OMB])

READ:UNKNOWN

TEXT:

FYI: Attached is a brief description of Congressman McKeon's teacher training proposal. Note that it probably eliminates funding for the National Board for Professional Teaching Standards (remember that fight?), weakens our class size proposal, and is less targeted and accountable than our proposal.

----- Forwarded by Barbara Chow/OMB/EOP on 06/03/99 01:19 PM -----

Wei-Min C. Wang

06/03/99 11:57:47 AM

Record Type: Record

To: Barbara Chow/OMB/EOP@EOP

cc: Iratha H. Waters/OMB/EOP@EOP, Barry White/OMB/EOP@EOP, Leslie S. Mustain/OMB/EOP@EOP

Subject: Synopsis of Teacher Empowerment Act

In general, the McKeon proposal (H.R. 1995, the Teacher Empowerment Act) reauthorizes the Title II Eisenhower Professional Development program, broadens its scope by incorporating other teacher quality activities, and consolidates it with Goals 2000 and Class Size Reduction into a single teacher quality block grant. It also reauthorizes Reading Excellence with an authorization of appropriations of \$260 million in FY 2001 (less than our request of \$286 million in FY 2000) and such sums in subsequent years.

In a May 26 "Dear Colleague" letter in support of the Administration's ESEA proposal, Clay, Kildee, and Martinez said the following about the McKeon proposal:

Recently, Republicans sent out a "Dear Colleague" touting legislation called the "Teacher Empowerment Act". They claim to support a class size reduction initiative within their bill. In fact, the bill fails to designate any specific amount of funding for class size reduction, nor requires states to initiate class size reduction efforts. The Republican bill tries to take funds allocated for class size reduction so they may be used for other purposes, without any accountability or oversight.

Our summary follows.

Allocations. The proposal would distribute distribute funds to States on the same basis as our own proposal and the current Eisenhower program, on a 50-50 student count/poverty count basis. However, within-State allocation procedures differ significantly. The Administration's proposal is more targeted in two senses: (1) Half of LEA subgrant funds are competitive in our Title II proposal, but only 20 percent are under the McKeon proposal; and (2) we base LEA formula allocations purely on poverty counts, whereas the McKeon program would use a 50-50 formula, as is current practice in Eisenhower. Our proposal also provides more funding for State-level activities, up to 10 percent of its grant, of which no more than 1/3 can be used for administration. McKeon provides 2.5 percent for State activities, of which only 5 percent can be used for administration. This is potentially problematic, given the large scope of State responsibilities.

State/local activities. For the most part, McKeon's bill would fund State and local activities to improve teacher quality that are very similar to our own (professional development, induction/mentoring for new teachers). They differ significantly, however, on issues that relate less directly to teacher quality: (1) McKeon's bill would require an unspecified portion of funds to be used to hire teachers for the purposes of class size reduction or special ed hiring (this would be explicitly waivable); (2) our proposal allows continued development and implementation of State standards and assessments, consistent with the consolidated Goals 2000 program, while McKeon's doesn't; and (3) our proposal allows development and acquisition of certain curricular materials and instructional aids, consistent with the consolidation of Title VI, while McKeon's doesn't (although we can probably assume that the Republicans would retain Title VI in its current form). McKeon's proposal also permits various recruitment activities (signing bonuses, alternative certification routes, etc.) on the local level; we allow these at the State level only, to preserve a professional development focus on the local level. McKeon introduces the concept of "teacher opportunity payments" as an allowable local activity, under which teachers can get vouchers to shop for professional development on their own, independent of LEAs, so long as those activities meet certain quality requirements. Furthermore, McKeon's proposal is more explicit about funding activities that will incite the unions, such as tenure reform, competency testing (not just for new teachers), merit pay, and getting rid of incompetent teachers.

Accountability. McKeon's proposal requires States to broadly disseminate through report cards or otherwise (1) the percentage of classes taught by out-of-field teachers and (2) the average statewide class size. This concept of public accountability is substantially weaker than what we propose in the Education Accountability Act, which contains more useful indicators and disaggregates data at the student, school, and district levels, too. Performance indicators are key accountability elements in both proposals. Our proposal would allow States to terminate formula and competitive subgrants to LEAs that fail to make substantial progress on the Secretary's performance indicators. McKeon would require persistently low-performing LEAs to turn professional development funds over to teachers in the form of "teacher opportunity payments." Our indicators are determined by the Secretary, while McKeon's are State-determined. However, McKeon's State indicators must include student achievement and out-of-field teachers; we are not so specific, nor would ED likely use student achievement as an indicator.

National activities. McKeon's proposal would eliminate the Secretary's flexible authority to carry out research and innovative projects to improve teacher quality, such as a recruitment job bank,

ANALYSIS OF *TEACHER ENPOWERMENT ACT*

- **Weakens the national effort to reduce class size in the early elementary grades.** The proposal would incorporate aspects of the current Class Size Reduction program, but, by failing to provide separate, dedicated funding for this initiative, would put an end to the Federal commitment, enacted on a bipartisan basis through the 1999 appropriations act, to help all school districts reduce class sizes in grades 1-3 to an average of 18. In addition to failing to provide dedicated funding for class-size reduction, the proposal would not focus on reducing class size in the early elementary grades, the grades in which research has demonstrated the effectiveness of small classes in improving student achievement.
- **Does not support the advancement of standards-based reforms.** The *Teacher Empowerment Act* would not provide support for such activities as the refinement and development of State content and student performance standards, and curricula and assessments aligned with those standards. Continuation of these types of activities is essential if teachers are to make high standards a reality in every classroom. As the GAO found in a recent report, Federal support for systemic reforms has been instrumental in driving educational reforms in States and school districts. The bill would end that support.
- **Ends Federal support for the National Board for Professional Teaching Standards.** The bill would prohibit the Secretary from using Federal funds to support the National Board for Professional Teaching Standards (NBPTS). The NBPTS establishes rigorous standards for what accomplished teachers should know and be able to do and operates a national voluntary system to assess and certify teachers who meet these standards. Eventually, the NBPTS hopes to certify 105,000 teachers by the year 2006, one for every school in the country. Federal funds support the development of certification standards and assessments, as well as activities designed to enable more teachers to undertake the assessments. This is an example of an activity where a limited amount of Federal funding can leverage significant non-Federal resources and have a national impact. It should continue.
- **Fails to hold States, districts, and schools accountable for improving student achievement.** The accountability provisions in the proposal are vague and confusing and would be difficult to enforce, if they are enforceable at all. In addition, the bill would require States to take action to improve or terminate local programs that are not "research-based" or fail to raise student achievement. But as the proposal is drafted, it would be almost impossible to determine if a program is research-based or is improving student achievement. Moreover, States would be given almost no resources for carrying out accountability responsibilities.

The bill is also inadequate in the area of "public accountability." States would be required to report publicly on out-of-field teachers and on class sizes, but not on other topics of importance to parents, policy-makers, and the general public.

- **Does not target funds effectively.** The proposal would target 80 percent of the funds available to local districts by a formula based 50 percent on the number of poor children served by the district and 50 percent on district enrollment. The remaining 20 percent of the funds would be awarded competitively, but the proposal fails to specify any type of criteria for competitive funding. These criteria would not target funds sufficiently on high-need districts. By contrast, the Administration's proposal would award 50 percent of the funds available to local districts by a formula based entirely on poverty. The remaining funds would be awarded competitively, primarily to school districts with the greatest need for services.
- **Embodies an inadequate vision of effective professional development.** This bill would not encourage the kinds of professional development that research and teachers identify as being most effective, especially activities that are collaborative, on-going, school-based, and focused on content. Research has shown that activities such as teacher study groups, teacher networks, classroom observation, internships, and mentoring often provide more relevant and useful professional development for teachers than do the more traditional kinds of professional development, such as short-term workshops and college courses. Professional development must also be a component of broader educational reforms underway in the school or district if it is to have a meaningful impact on teaching and learning. The Teacher Empowerment Act fails to make this connection.

In addition, the proposal tends to emphasize teacher licensure over professional development. On-going professional development is critical if teachers are to stay current in their subject-field knowledge and effectively implement curricula tied to student content and performance standards. For this reason, the reauthorized ESEA must provide strong support for effective professional development.

- **Fails to adequately address issues of national significance.** This bill limits the Secretary of Education to administering two specific national activities -- the Troops for Teachers program (see comments below) and Teacher Excellence Academies. The teacher academies are likely to have an impact only at the local level, especially since the proposal does not provide a mechanism for the Secretary to disseminate information about the grantees' teacher academies or to provide technical assistance to other school districts who are developing teacher academies. In contrast, the Administration's proposal provides authority for the Secretary to conduct a broad range of activities of national significance. Such activities would include, among others, professional development programs for principals to help them become instructional leaders, programs to encourage pension and credential portability, and the development of performance-based systems for assessing teacher content knowledge and skills. A broad authority to carry out nationally significant activities, such as these, is an essential component of a reauthorized ESEA Title II.

- **Fails to expand the Troops-to-Teachers program.** The bill's Troops-to-Teachers proposal would continue to focus solely on members of the armed forces and fail to extend eligibility for the program to non-military mid-careerists. By not extending eligibility for the program to other individuals who have solid academic backgrounds, the proposal would deprive school districts of a potentially larger pool of applicants at a time when districts, particularly those with high concentrations of disadvantaged children, are having difficulty finding well-qualified applicants in many of the subject fields.

RECORD TYPE: PRESIDENTIAL (NOTES MAIL)

CREATOR: Erica R. Morris (CN=Erica R. Morris/OU=WHO/O=EOP [WHO])

CREATION DATE/TIME: 3-JUN-1999 15:14:16.00

SUBJECT: follow-up to Juvenile Justice/gun bill meeting

TO: Bruce N. Reed (CN=Bruce N. Reed/OU=OPD/O=EOP@EOP [OPD])
READ:UNKNOWN

TO: Jose Cerda III (CN=Jose Cerda III/OU=OPD/O=EOP@EOP [OPD])
READ:UNKNOWN

TO: Caroline R. Fredrickson (CN=Caroline R. Fredrickson/OU=WHO/O=EOP@EOP [WHO])
READ:UNKNOWN

TO: Elena Kagan (CN=Elena Kagan/OU=OPD/O=EOP@EOP [OPD])
READ:UNKNOWN

TO: Broderick Johnson (CN=Broderick Johnson/OU=WHO/O=EOP@EOP [WHO])
READ:UNKNOWN

CC: Cathy R. Mays (CN=Cathy R. Mays/OU=OPD/O=EOP@EOP [OPD])
READ:UNKNOWN

CC: Janet Murguia (CN=Janet Murguia/OU=WHO/O=EOP@EOP [WHO])
READ:UNKNOWN

TEXT:

There will be a follow-up to this morning's meeting on the House Juvenile Justice/gun bill on Monday, June 7th, at 3:30, in the Capitol, H-201. Please let me know if you are unable to attend.

**PRESIDENT CLINTON AND TIPPER GORE ANNOUNCE NEW CAMPAIGN
TO COMBAT THE STIGMAS SURROUNDING MENTAL ILLNESS AND
ENCOURAGE PEOPLE WITH MENTAL ILLNESS TO GET HELP**

June 5, 1999

Today, in a joint radio address, President Clinton and Tipper Gore announced a new national campaign to eliminate the stigmas of mental illness and encourage the millions of Americans with mental health needs to get help. The President and Mrs. Gore unveiled new information about some of the widespread myths of mental illness and some of the facts that dispel them. These myths will be discussed on Monday as part of the first-ever White House Conference on Mental Health, chaired by Mrs. Gore, the President's Mental Health Advisor. Today, the President and Mrs. Gore:

Announced National Campaign to Combat the Stigmas of Mental Illness and Encourage Americans with Mental Health Needs to Get Help. The President and Mrs. Gore announced that this fall a new nationwide campaign, with Mrs. Gore serving as the honorary chair, will be launched to dispel the myths of mental illness and encourage those with mental illness to get help. This new nationwide campaign will be a public-private partnership, led by the Surgeon General and the Ad Council, which will involve a wide range of community organizations, media, and others. This campaign will draw from many of the issues raised at the White House Conference on Mental Health.

Unveiled New Information on the Widespread Myths of Mental Illness and the Facts That Dispel Them. The President and Mrs. Gore unveiled new information that highlights many of the myths surrounding mental illness, including the following:

- **Myth:** Mental illness is not a disease and cannot be treated.
Fact: The reality is that mental illnesses are diagnosable disorders of the brain and treatments that are effective 60 to 80 percent of time.

- **Myth:** Mental illness doesn't happen to people like me or my family.
Fact: One in five Americans will suffer from a mental illness in their lifetime. These Americans are from all backgrounds.

- **Myth:** Depression is a part of life that can be worked through without seeking treatment.
Fact: Depression is a diagnosable treatable illness that impacts 19 million adult Americans each year and is the leading cause of disability in the United States.

- Myth:** Teenagers don't suffer from "real" mental illness; they are just moody.
Fact: One in ten children and adolescents suffer from mental illness.

- **Myth:** Depression is a part of aging.
Fact: Five million older Americans suffer from clinical depression and older people account for 13 percent of the population but 20 percent of suicides.

- **Myth**: Talk about suicide is an idle threat that need not be taken seriously.
Fact: Research has shown that 90 percent of all suicide victims have had a mental or substance abuse disorder. People who admit to having thoughts and plans about suicide and people who have attempted suicide are at increased risk for completing suicide in the future.

- **Myth**: We cannot afford to treat mental disorders.
Fact: States and businesses that have improved treatment of mental illness, including implementing parity, have not seen a major increase in costs.

- **Myth**: Mental health problems are really the result of poor parenting practices.
Fact: Mental illnesses are proven to be biologically based illnesses that often have nothing to do with parenting.

- **Myth**: A homeless person suffering from mental illness has little chance of recovery.
Fact: Research demonstrates a decrease in homelessness with an effective style of case management that connects the person with treatment for their disorder, housing, and other supportive services.

- **Myth**: There is no hope for people with mental illness.
Fact: Mental illnesses can be treated up a higher rate than many chronic illnesses.

Highlighted the First-Ever White House Conference on Mental Health. These myths and the stigma campaign will be highlighted and discussed on Monday at the first-ever White House Conference on Mental Health, that will involve tens of thousands of Americans around the country at over 1,000 sites connected to the conference in Washington.

MYTH #1: Mental illness is not a disease and it cannot be treated.

FACT: Research in the last decade proves that mental illnesses are diagnosable disorders of the brain. New brain imaging technologies visually illustrate the differences in the brains of healthy people and people with serious mental disorders, such as schizophrenia. They show reductions in the overall volume of the brain and distinct differences in the way in which the brain processes information. There are also now effective treatments for mental illness that, for example, relieve symptoms for 80 percent of people with major depression; control symptoms such as hallucination or delusions for 70 percent of people with schizophrenia; and alleviate symptoms for 50 to 60 percent of people with Obsessive Compulsive Disorder.

MYTH #2: Mental illness doesn't happen to people like me or my family.

FACT: Mental illness affects most extended American families. One in five Americans suffer from mental illness at some point in their life. These illnesses strike all kinds of families, regardless of race, socioeconomic class, educational level or place of residence. Schizophrenia occurs at equal rates regardless of education, socioeconomic status, or culture. Depression, panic disorder and obsessive compulsive disorders are also equal opportunity illnesses. Women suffer from depression at twice the rate of men regardless of where they live, their culture, or socioeconomic status. Five million older Americans suffer from depression, and one in ten children and adolescents suffer from some type of a mental illness. Mental illness can happen to anyone. However, it is also a treatable illness.

MYTH #3: Depression is a part of life that can be worked through without seeking help.

FACT: Depression is a diagnosable, treatable illness that impacts 19 million adult Americans each year. It is a disorder of the brain that is characterized by serious and persistent symptoms such as changes in sleep, appetite, and energy; cognitive losses such as slowed thinking, and clearly discernible feelings like irritability, hopelessness, and guilt. The severity and duration of depression symptoms are clearly distinguishable from sadness and mood swings that are part of life. When untreated, depression can have serious consequences. Depression is the cause of over two-thirds of the 30,000 American suicides each year, and according to the World Health Organization, it is the leading cause of disability in the United States. However, there are effective treatments available that have proven to have 80 percent success rate for people diagnosed with depression.

MYTH #4: Teenagers don't suffer from "real" mental illness; they are just moody.

FACT: We now know that teenagers and even younger children, can and do suffer from mental illness. One in ten children and adolescents suffer from mental illness severe enough to cause some level of impairment, but fewer than 20 percent of these children receive treatment. Without treatment, school work may suffer, normal family and peer relationships may be disrupted, and the absence of diagnosis can potentially contribute to violent acts. In fact, depression may lead to suicide, which is the third leading cause of death among young adults. However, recent studies indicate that 60 percent of depressed teenagers will improve with modern treatments.

MYTH #5: Depression is a part of aging.

FACT: Depression is *not* a normal part of aging. Research using the methods of the clinical and basic neurosciences in older persons with depression have identified actual changes in brain structures. In older persons with other serious health problems (strokes, hip fractures, heart conditions) depression may delay recovery, cause refusal of treatment, and lead to excessive disability and even death. In fact, nearly 5 million of the 32 million Americans age 65 and older suffer from clinical depression. Comprising only 13 percent of the U.S. population, individuals ages 65 and older account for 20 percent of all suicide deaths, with white males being most vulnerable. However, effective mental health treatment is available for older Americans suffering from mental illness.

MYTH #6: Talk about suicide is an idle threat that need not be taken seriously.

FACT: People who admit to having thoughts and plans about suicide and people who have attempted suicide are at increased risk for completing suicide in the future. In a study of nearly 4,000 adults seeking psychiatric treatment, persons with a history of severe suicidal thoughts were 14 times more likely to later commit suicide within four years, compared to persons with less severe suicide ideation. Research has shown that 90 percent of all suicide victims have had a mental or substance abuse disorder.

MYTH #7: We cannot afford to treat mental disorders.

FACT: We cannot afford NOT to treat mental illness. Researchers estimate that mental illnesses, including indirect costs such as days lost from work, cost America tens of billions of dollars each year. However, businesses and states that have implemented new strategies to treat these disorders have not found notable increases in costs. For example, one business, Bank One, spearheaded a comprehensive effort to improve the company's ability to identify and get appropriate treatment for employees with depression in a timely manner. Between 1991 and 1995, the direct treatment costs for depressive disorders decreased by 60 percent. Moreover, Ohio implemented full mental health parity for its state employees and did not find that this increased their costs.

MYTH #8: People with severe and persistent mental illnesses cannot be productive members of society.

FACT: People with psychiatric disabilities have had many barriers. In fact, one study showed a 10-15 percent employment rate for individuals with severe and persistent mental illnesses. A 1995 study of the Employment Intervention Demonstration Program run by the Center for Mental Health Services assessed the effectiveness of employment strategies to assist individuals with severe mental illness get and keep employment. They found 49 percent of individuals receiving employment support services for one year were working and after two years, 55 percent were employed. Clearly, people with severe and persistent mental illnesses want to be employed and productive, and given appropriate treatment and support, they can.

MYTH #9: A homeless people suffering from mental illness has little chance of recovery.

FACT: There are effective treatments for the homeless with mental illness. While one-third of homeless Americans suffer from an untreated mental illness, research demonstrates a decrease in homelessness when outreach to these individuals is coupled with case management that connects them to housing and other supportive services. One study reported a 45 percent reduction in the number of days of homelessness in the first three months of this type of treatment. Over a year, clients had a 70 percent increase in the number of days worked, demonstrating that homeless persons with mental illnesses can make substantial improvements in the overall quality of their lives.

MYTH #10: There is no hope for people with mental illness.

FACT: These illnesses, that will affect one in five Americans in their lifetime, can be extremely debilitating. However, research proves that mental illnesses are diagnosable and treatable disorders of the brain. Eighty percent of people treated for severe depression show positive responses to treatment, and the rate of success for controlling the symptoms of schizophrenia is also high, at 70 percent, higher rates than many physical illnesses. The challenge is to assure that Americans with mental illness recognize these disorders and get the help that they need.

RECORD TYPE: PRESIDENTIAL (NOTES MAIL)

CREATOR: Cynthia A. Rice (CN=Cynthia A. Rice/OU=OPD/O=EOP [OPD])

CREATION DATE/TIME: 3-JUN-1999 20:30:50.00

SUBJECT: Treasury ready to issue tax guidance on smoking cessation

TO: Sarah A. Bianchi (CN=Sarah A. Bianchi/O=OVP @ OVP [UNKNOWN])
READ:UNKNOWN

TO: Christopher C. Jennings (CN=Christopher C. Jennings/OU=OPD/O=EOP @ EOP [OPD])
READ:UNKNOWN

TO: Elena Kagan (CN=Elena Kagan/OU=OPD/O=EOP @ EOP [OPD])
READ:UNKNOWN

TO: Devorah R. Adler (CN=Devorah R. Adler/OU=OPD/O=EOP @ EOP [OPD])
READ:UNKNOWN

TO: Jeanne Lambrew (CN=Jeanne Lambrew/OU=OPD/O=EOP @ EOP [OPD])
READ:UNKNOWN

TO: Laura Emmett (CN=Laura Emmett/OU=WHO/O=EOP @ EOP [WHO])
READ:UNKNOWN

TO: Bruce N. Reed (CN=Bruce N. Reed/OU=OPD/O=EOP @ EOP [OPD])
READ:UNKNOWN

CC: J. Eric Gould (CN=J. Eric Gould/OU=OPD/O=EOP @ EOP [OPD])
READ:UNKNOWN

TEXT:

Good news: Treasury is ready to issue tax guidance making clear that smoking cessation costs are a medical expense, and are thus tax deductible (up to the existing limits in law, e.g. to the extent medical expenses exceed 7.5% of income). This is a reversal of an opinion from 1979 based on the new evidence that smoking is addictive and harmful -- yet another sign that even mainstream institutions like the IRS recognize these cold hard facts. As with other medicines or drugs, only those prescribed by a physician are deductible.

I don't think this is worth holding for an event. I'd recommend we either
a) put out a written VP or Surgeon General statement
b) leak it

RECORD TYPE: PRESIDENTIAL (NOTES MAIL)

CREATOR: Sidney Blumenthal (CN=Sidney Blumenthal/OU=WHO/O=EOP [WHO])

CREATION DATE/TIME: 3-JUN-1999 09:10:15.00

SUBJECT: slate article

TO: Elena Kagan (CN=Elena Kagan/OU=OPD/O=EOP@EOP [OPD])

READ:UNKNOWN

TO: Thomas L. Freedman (CN=Thomas L. Freedman/OU=OPD/O=EOP@EOP [OPD])

READ:UNKNOWN

TO: Bruce N. Reed (CN=Bruce N. Reed/OU=OPD/O=EOP@EOP [OPD])

READ:UNKNOWN

TEXT:

C O N T E N T S

New Today

Complete

S E C T I O N S

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utilities

Thank Heaven for Little Boys
The GOP makes a sexploitation play on the

Hill.

By David Plotz
Posted Thursday, May 27, 1999, at 10:15 a.m.

PT

E-Mail This Article

fantasy to discover that

It is, of course, every politician's
an opponent molests children. But since such

pedarastic
 sometimes must settle
 their opponent coddles
 spectacular example from the

revelations are (surprisingly) rare, pols
 for the next best thing: pretending that
 child molesters. (Click here for a
 1998 election.)

have not been lost on
 not one but two
 past few weeks.
 disagreement over
 studies in how
 inflammatory issue.
 Democrats and

The political benefits of pedophilia
 Washington's Republicans, who have ginned up
 child molestation controversies during the
 These tempests do not arise from any actual
 pedophilia. Rather, they are perfect case
 politicians fabricate, then profit from, an
 (See also: Democrats and Social Security,
 Medicare, etc.)

July 1998 article from
 American
 Rind of Temple
 of Pennsylvania,
 Michigan re-examined
 victims had been
 that victims,
 "intense psychological
 researchers also
 sexual abuse: An
 adult should be
 abuse."

The first controversy begins with a
 Psychological Bulletin, the journal of the
 Psychological Association. Researchers Bruce
 University, Philip Tromovitch of University
 and Robert Bauserman of University of
 59 studies in which child sexual abuse
 surveyed as college students. They concluded
 especially boys, typically do not suffer
 harm" from childhood sexual abuse. The
 recommended changing the terminology of
 encounter between a "willing" child and an
 called "adult-child sex," not "child sexual

suggestion moldered
 until it was brought to
 Schlessinger in March.
 It promoted the
 to sex. Author

The study and its revolting linguistic
 away in the great bibliographic graveyard
 the attention of radio nag Dr. Laura
 The article was an easy and deserving target:
 notion that an 8-year-old child could consent

Paidika: The
favors the
North American
trumpeting the

Bauserman, it turned out, had published in
Journal of Pedophilia, a Dutch journal that
legalization of sex with children. And the
Man/Boy Love Association (NAMBLA) was
article on its Web site.

legions
the
the
pedophilia and
and
article as
President
from
any

r. Laura's crusade against the APA study enlisted the
of the Christian right: the Family Research Council, the
Christian Coalition, Dr. James Dobson, Jerry Falwell, and
Traditional Values Coalition. The APA distanced itself from
study, noting the association's long record of fighting
insisting that the article does not mitigate the illegality
immorality of pedophilia.
In early May, Hill conservatives deployed the APA
a political weapon. Led by House Majority Whip Tom DeLay,
R-Texas, 19 Republican members of Congress have introduced a
resolution to condemn the article and to demand that
Clinton do the same. The House is expected to vote on the
measure in mid-June. Supporters of the resolution say
congressional condemnation will discourage child molesters
citing the article in their legal defenses--not that there's
evidence that anyone has done that.

opportunity on
Lockhart
saying the
House has, of
when Lockhart
blast-faxed a
brave stand and
Still Spinning
From Pedophiles."

he Republican National Committee saw its
May 12, when White House spokesman Joe
skirted a question about the APA study by
White House had not reviewed it. (The White
course, denounced pedophilia.) A week later,
still had not commented on the study, the RNC
press release congratulating the GOP for its
slamming Clinton. Its headline: "White House
'Sexual Relations'--As GOP Protects Minors

The Christian right's political

exploitation of the APA
Coalition's
laying the groundwork
to the Family
president is
activists. "There is an
they are afraid of
ranks, since there is a
activists for
Director of

squabble ranges from the Traditional Values
criticism of "liberal political advocacy ...
for the permissibility of child molestation"
Research Council's loopy accusation that the
fronting for pro-pedarasty gay-rights
eerie silence from the White House. I think
offending their allies in the homosexual
strong element of support among homosexual
lowering the age of consent," says FRC Senior
Cultural Studies Robert Knight.

Dr. he mainstream press has ignored the pedophilia flap, but
Laura, other talk radio hosts, and Christian activist
publications have all trumpeted the GOP's courage to the
party's conservative base.
The conservatives have managed to cast themselves as
the scourge of pedophiles, insinuate that the president is soft
on pedophilia, and link Clinton to a sub rosa campaign to lower
the age of consent--and all this is based on a report that no one
noticed until the Christian right uncovered it, that no one
in the White House seems to have read, and that no one remotely
linked to the Democratic Party or the White House has ever
endorsed.

more pragmatic
past few weeks,
considering a
Service. Federal employee
House strongly
kinds of overtime
opposition,
added \$10 million

he second pedophilia scare has served a
purpose: legislative blackmail. During the
the Ways and Means Committee has been
\$2.3 billion bill for the U.S. Customs
unions, Democratic members, and the White
opposed a provision that would limit certain
pay for customs officers. In the face of this
Republicans played the molester card. They

Internet kiddie porn interdiction. the child-porn and subcommittee because Chairman Phil minority party of giving protects our children unfortunate that the ahead of our

to the legislation for customs to investigate traffickers. They also added money for drug

Democrats on the committee endorsed drug funding but voted against the bill in of the overtime provision. Trade Subcommittee Crane, R-Ill., immediately accused the aid and comfort to molesters. "This bill from drug dealers and pedophiles, and it's Democrats have put special interest pressures children's safety," Crane said.

voting House

Democrats, unwilling to take another beating, folded, unanimously for the bill in full committee. It passed the Tuesday by 410-2.

member of against

A Democratic staffer gripes, "There is not a single the House who objects to the funding to fight child porn, but Republicans constructed the vote in such a way that a vote

drug to."

the bill can be framed as a vote to say Democrats favor pornography. They added on the child-porn provision and the provision simply to force us to vote for them. And we had

Republican every

(Which raises an intriguing notion: Why aren't members of Congress attaching anti-pedophile measures to bill? What are they afraid of?)

Democrats with are siccing still objects to under attack by child Internet. Couple that our children and you everything we can

now that they have conquered the House bogus pedophile charges, House Republicans the tactic against the White House, which the overtime provision. "Our children are pornographers who prey on them over the with the constant peddling of narcotics to have a deadly combination that we must do to stop. This is not a time for partisanship

or special interest

R-Texas, warned

called squishy on

perhaps the two

controversy and tackle the

child sexual

influence," Committee Chairman Bill Archer,
the president this week.

The president, who doesn't want to be
molesters, will probably cave. Once he does,
parties can abandon this imaginary
scourge that actually plagues Washington--not
abuse, but child sexual abuse abuse.

Related in Slate

If you missed the link about how bogus pedophilia charges
were deployed during one 1998 political campaign, click
here.

Related on the Web

the Web, but

You can also

the Family

pedophilia

newsroom: Look for

Relations.' " NAMBLA

its Web

The Psychological Bulletin study is not on
you can read the APA's statement about it.

read denunciations of the study by Tom DeLay,
Research Council, and Dr. Laura. The RNC's
attacks on Clinton are available in its

"White House Still Spinning 'Sexual

has removed its praise for the APA study from
site.

e-mail him at

David Plotz is a Slate senior writer. You can
plotz@slate.com.

Illustrations by Peter Kuper.

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RECORD TYPE: PRESIDENTIAL (NOTES MAIL)

CREATOR: Jonathan H. Schnur (CN=Jonathan H. Schnur/OU=OPD/O=EOP [OPD])

CREATION DATE/TIME: 3-JUN-1999 12:32:14.00

SUBJECT: FYI -- Education Week article on last week's hearing on NAEP reading score

TO: Elena Kagan (CN=Elena Kagan/OU=OPD/O=EOP @ EOP [OPD])

READ:UNKNOWN

TO: Bruce N. Reed (CN=Bruce N. Reed/OU=OPD/O=EOP @ EOP [OPD])

READ:UNKNOWN

Bethany Little (CN=Bethany Little/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

Republicans Vow To Free NCES
From Political Meddling

By David J. Hoff

Washington

Congressional Republicans say they want the National Center for Education Statistics to be free from the day-to-day political influence of future presidential administrations.

Senior members of the House education committee said last week that Vice

President Al Gore had tainted results from the student assessment overseen by

the center when he put a positive spin on them in February. And just last

month, new questions arose when the Clinton administration declined to

renominate the federal commissioner of statistics, who heads the NCES, after

he sided with critics of Mr. Gore's role, the GOP lawmakers said.

"They need to be independent so they can drive the debate ... rather than being

perceived as a political organization," Rep. Peter Hoekstra, R-Mich., the

chairman of the oversight and investigations subcommittee of the Education and

the Workforce Committee, said at a hearing.

Mr. Hoekstra and Rep. Michael N. Castle, R-Del., said after the hearing that

they would look at other federal statistical agencies for models to see how the

NCES could be better insulated from political considerations.

That question will be "absolutely critical" when Congress

turns to revising the law that defines the lines of authority between the Department of Education and the NCES, according to Mr. Castle.

"The commissioner is very much beholden to the Department of Education,"

Mr. Castle said in the interview. He chairs the K-12 subcommittee that will oversee changes to the NCES organizational structure.

The Clinton administration hasn't yet sent its reauthorization proposal to Congress. David Frank, an Education Department spokesman, declined to comment on the idea of granting the statistical agency independent status.

'Good News'

Questions about the administration's influence over the NCES have arisen since a Feb. 10 news conference where Mr. Gore dominated the stage during the release of the 1998 reading results from the National Assessment of Educational Progress.

Mr. Gore spoke about the results ahead of Pascal D. Forgione Jr., the commissioner of the NCES. According to long-standing policy, Mr. Forgione was to release the scores first and then allow others to interpret them.

Instead, Mr. Gore hailed the rise in 4th, 8th, and 12th grade scores in 1998, compared with those from 1994, before Mr. Forgione could point out that 4th and 12th graders had shown "no net gain" since 1992, the first time the NAEP reading test was given. ("Board Contends Gore's Role Politicized NAEP Release," March 10, 1998.)

At last week's hearing, Mr. Hoekstra released internal electronic mail between Education Department officials and an education adviser to the vice president, Jonathan Schnur, that indicates the Feb. 10 event was designed to give positive press coverage to Mr. Gore, who is running for president. Mr. Hoekstra requested the e-mail from the department, which turned it over voluntarily.

In a Feb. 9 message, for example, Mr. Schnur suggests to a department official that packages distributed to journalists be assembled to display an executive

summary more prominently than Mr. Forgione's statement.

After the event, Mr. Schnur asked the department's press secretary: "Do you think the press will cover it as good news?"

Mr. Schnur was not in his office last Thursday and did not return a message left on his voice mail.

Political Pressure

After the National Assessment Governing Board, which sets NAEP policy, protested that Mr. Gore had created a partisan atmosphere that might undermine the test scores' credibility, Mr. Forgione publicly questioned the vice president's role in the Feb. 10 event and supported a revision to the board's policy that requires the NCES to issue the official press releases on NAEP results.

At last week's hearing, Mr. Hoekstra suggested that there might be a link between Mr. Forgione's support of NAGB and the White House's decision to block his renomination. The commissioner withdrew his name from consideration May 18, after administration officials said his failure to file income-tax returns in a timely manner might cause problems with Congress.²

"Perhaps, by doing the job of maintaining the independence of that agency, [Mr. Forgione] may have lost the opportunity to be reappointed to his job," Mr. Hoekstra said.

"I've heard this tax [reason] ... that doesn't seem overwhelming to me," said Mr. Castle, who was the governor of Delaware when Mr. Forgione was the state schools superintendent there. "Frankly, I just hope it was not for political reasons."

But an Education Department spokesman said there was no link between the commissioner's impending departure and his criticisms of the Feb. 10 event.

"It's nonsense to say Forgione was not reappointed" because of his statements about Mr. Gore's presentation at the press conference, Mr. Frank, the communications director for Secretary of Education Richard W. Riley and the

recipient of some of the e-mail from Mr. Schnur, said in an interview after the hearing.

Also last week, the Advisory Council on Education Statistics, which works closely with Mr. Forgione, expressed its dismay to Mr. Riley that the commissioner will leave his job June 21.

"We advised you that he be retained, and we are disappointed that he has not been," Andrew C. Porter, the council's chairman and the director of the Wisconsin Center for Education Research, wrote in a May 24 letter.

The department has yet to decide who will replace Mr. Forgione, Mr. Frank said.

RECORD TYPE: PRESIDENTIAL (NOTES MAIL)

CREATOR: Bruce N. Reed (CN=Bruce N. Reed/OU=OPD/O=EOP [OPD])

CREATION DATE/TIME: 3-JUN-1999 12:32:23.00

SUBJECT: NATO -- mandatory id check for R rated movies

TO: Elena Kagan (CN=Elena Kagan/OU=OPD/O=EOP@EOP [OPD])

READ:UNKNOWN

TEXT:

----- Forwarded by Bruce N. Reed/OPD/EOP on 06/03/99
12:32 PM -----

Richard Socarides 06/03/99 12:19:31 PM

Record Type: Record

To: Bruce N. Reed/OPD/EOP@EOP

cc: Thomas L. Freedman/OPD/EOP@EOP

Subject: NATO -- mandatory id check for R rated movies

They are not quite there yet. circulating paper to their members. They are going to get back to us late this afternoon or tomorrow.

There OK so long as Hatch and Leahy are invited.

RECORD TYPE: PRESIDENTIAL (NOTES MAIL)

CREATOR: Bruce N. Reed (CN=Bruce N. Reed/OU=OPD/O=EOP [OPD])

CREATION DATE/TIME: 3-JUN-1999 10:45:34.00

SUBJECT: ESEA changes

TO: Barbara Chow (CN=Barbara Chow/OU=OMB/O=EOP@EOP [OMB])
READ:UNKNOWN

TO: Elena Kagan (CN=Elena Kagan/OU=OPD/O=EOP@EOP [OPD])
READ:UNKNOWN

TEXT:

fyi -- I'm not sure what this is from

----- Forwarded by Bruce N. Reed/OPD/EOP on 06/03/99
10:45 AM -----

Andy Rotherham <ARotherham@dlcppi.org>

06/03/99 10:31:13 AM

Record Type: Record

To: Bruce N. Reed/OPD/EOP

cc:

Subject: ESEA changes

Bruce: What do you all think of this? We're considering mentioning it in the fax, but I don't want to get in front of you all.

Andy

House Democrats Alter Clinton's Social Promotion Plan

Revealing a simmering controversy, House Democrats last week modified President Clinton's social promotion plan before introducing it as a bill in Congress, underscoring some advocates' disagreement with the White House about needed school reforms.

In changes that emphasize the need to provide added academic services to struggling students, the House bill, H.R. 1960, alters the president's proposed definitions for "social promotion" and "retention."

And lawmakers included a new clause in the House bill that would require states, school districts and parents to take "whatever steps are necessary

*
to ensure that all students will meet the challenging academic performance standards * so that students will progress through school and graduate."

Clinton submitted his bill for updating the 1965 Elementary and Secondary Education Act (ESEA) to lawmakers on May 21, asking schools over four years to identify struggling students, provide intensive academic services and ultimately hold back children who fail to meet promotion requirements (ED, May 20).

Led by Rep. Bill Clay, D-Mo., House education lawmakers are taking extra care to ensure that states meet "a pretty tough burden" before stalling a student's grade advancement, according to a House aide.

A New Mandate

Clinton's bill would require states to ensure that students "progress through school on a timely basis" and that states "end the practice of social promotion and retention."

Clay and his allies, including most Democratic members of the House Education and the Workforce Committee, have retained that general language. But they altered the definition of "social promotion," which Clinton called an unsound educational practice of promoting students who have not mastered challenging state academic standards.

House Democrats also deemed the practice unsound, but only after schools have provided students with "continuing intensive and comprehensive interventions" that are needed to ensure children can master state standards.

Likewise, House Democrats revised the president's definition of "retention," which the administration called the unsound practice of requiring students to repeat a grade "without the specific educational interventions they need to master" state standards.

Rather than swallow this whole, House lawmakers proposed to bar schools from retaining a child for one grade, or for part of a grade, without first providing "age-appropriate settings" that offer struggling students aid in meeting state standards.

The clause mandating "whatever steps are necessary" for graduation would represent a new educational mandate for districts, schools and parents, who are all listed in the Clay bill. But Democrats believe that new standard is needed, especially when coupled with a federal policy aimed at retaining some children who fall short of state academic goals.

Schools that fail to provide age-appropriate remedial programs are "cheating students out of the help they need," the House aide said.

Jeff Simering, lobbyist for the Council of the Great City Schools, reviewed Clay's language and said he was pleased to see that states would share the legal obligation with school districts to ensure that children receive needed academic help.

"If the federal government is forcing people into policies that would likely retain kids, or somehow put them in a high-stakes situation, then, arguably, someone ought to provide them with some services," Simering said.

Quiet Negotiations

Clay's changes to the president's bill underscore a wrenching debate that has dogged the Clinton administration in recent weeks.

Civil rights advocates--including representatives from the Leadership Conference of Civil Rights, the NAACP Legal Defense Fund, the National Council of La Raza and noted civil rights lawyer William Taylor of

Washington, D.C.--have met often with Education Department officials in recent weeks to negotiate retention issues.

The advocates pressured ED to drop any social promotion strategy, fearing it would have a disparate, harmful impact on poor and minority children in high-poverty schools.

The meetings continued through May 19, the day ED officials briefed reporters about the president's plan. But the process ended in a truce, according to both sides.

The Clay language "is not something the civil rights groups were seeking," Taylor explained in an interview. "This is, essentially, our last, best offer to the administration in the negotiations that were going on * It was kind of a compromise."

If the administration were to propose an amendment inserting its original social promotion plan back into the ESEA bill, the president would face opposition from the civil rights community, according to Taylor.

"It would be very wrong, and terrible policy, for the federal government to put its imprimatur behind retaining" students, said Taylor, citing research showing that retained children are more likely to drop out (ED, April 30). "We wanted to get that out of the bill."

Not The Last Word

Mike Cohen, senior adviser to Education Secretary Richard Riley, greeted Clay's language as "not far" from the administration's own. "I'm sure that this will not be the last change in the wording of a bill we sent up," Cohen said. "This is part of the process."

He added that ending social promotion is "a controversial issue. But there's actually a remarkably high degree of agreement--to make sure that children don't move through school without meeting basic standards, and to make sure that children aren't held back in ways that we know are harmful."

For the moment, the social promotion controversy has not surfaced in the Senate.

Sen. Edward Kennedy, D-Mass., last week introduced Clinton's ESEA plan, S. 1180, without changing the president's social promotion language or any other aspect of the bill. The senator intends to keep track of the social promotion issue as ESEA debate progresses, said spokesman Jim Manley.

Lawmakers are on a Memorial Day recess until June 7.

--William J. Cahir

Andrew Rotherham
Director, 21st Century Schools Project
Progressive Policy Institute
600 Pennsylvania Ave., SE, Suite 400
Washington, DC 20003

(202) 547-0001
(202) 544-5014 FAX

RECORD TYPE: PRESIDENTIAL (NOTES MAIL)

CREATOR: Jeffrey A. Shesol (CN=Jeffrey A. Shesol/OU=WHO/O=EOP [WHO])

CREATION DATE/TIME: 3-JUN-1999 12:58:10.00

SUBJECT: LA Times op-ed

TO: Ruby Shamir (CN=Ruby Shamir/OU=OPD/O=EOP@EOP [OPD])
 READ:UNKNOWN

TO: Laura Emmett (CN=Laura Emmett/OU=WHO/O=EOP@EOP [WHO])
 READ:UNKNOWN

TO: Elena Kagan (CN=Elena Kagan/OU=OPD/O=EOP@EOP [OPD])
 READ:UNKNOWN

TO: Richard Socarides (CN=Richard Socarides/OU=WHO/O=EOP@EOP [WHO])
 READ:UNKNOWN

TO: Neera Tanden (CN=Neera Tanden/OU=WHO/O=EOP@EOP [WHO])
 READ:UNKNOWN

TO: Cathy R. Mays (CN=Cathy R. Mays/OU=OPD/O=EOP@EOP [OPD])
 READ:UNKNOWN

TO: Bruce N. Reed (CN=Bruce N. Reed/OU=OPD/O=EOP@EOP [OPD])
 READ:UNKNOWN

TEXT:

Thursday, June 3, 1999

Fair Inquiry on Media Violence

President Clinton's decision Tuesday to open an inquiry into how the entertainment industry markets violent movies, video games and other products to children should not be allowed to turn into a hunt for scapegoats. But it will be useful if it sheds light on negative industry practices and helps parents understand and control influences on their children. No one is suggesting that Hollywood alone has stoked the violent youth culture that surrounds the recent rash of school shootings in the United States. Myriad social problems, from inadequate public education to failed gun control, are also to blame. Still, entertainment industry executives like Seagram CEO Edgar Bronfman Jr.--who has said that teen violence is a "societal problem," not "an entertainment problem"--need to give serious consideration to the role that violent entertainment plays in real violence. It is difficult if not impossible to

link a specific video or film to a specific violent act; it is another thing to link, as more than 300 studies have done, violent behavior to

sustained exposure to violent entertainment.

The inquiry should give special attention to the role of highly violent "point-and-shoot" video games, which, as former West Point instructor David Grossman showed in recent testimony to Congress,

might be desensitizing some children to killing. Though Washington must keep in mind the

entertainment

industry's free speech rights, the inquiry should do

two specific things:

was right to ask the Federal Trade Commission to study whether violent material rated for adult viewing is being marketed to kids. As the trade journal Daily Variety recently pointed out, "It's hard to imagine that Hollywood does not count on kids to help pay for violent R-rated fare like 'I

* Spotlight inappropriate marketing. Clinton Know What You Did Last Summer' and 'Scream.' "

voluntary

* Encourage the entertainment industry to adopt

the television

reforms, notably a ratings system to go along with V-chip. That device, which lets parents block racy programming, is increasingly available in new TV Communications Commission Chairman William E.

or violent

sets. Federal

praised CBS TV President Leslie Moonves and ABC

Kennard recently

Group

Chairman Robert Iger for their advocacy of a V-chip

ratings system.

Moonves and Iger's lead,

The rest of the industry needs to follow

in a recent

recognizing, as movie producer Robin Swicord put it in a recent Times article, that "stories and movies do change

lives."

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**CLINTON/GORE ADMINISTRATION UNVEILS NEW INITIATIVES TO ADDRESS
MENTAL HEALTH AT THE FIRST-EVER WHITE HOUSE CONFERENCE ON
MENTAL HEALTH** Automated Records Management System
June 7, 1999 Hex-Dump Conversion

Today at the first-ever White House Conference on Mental Health, chaired by the President's Mental Health Advisor Tipper Gore, the Clinton/Gore Administration is unveiling unprecedented steps to improve mental health. The Administration's proposals are addressing parity, improving treatment, bolstering research, and improving community responses to help those with mental illnesses. Highlights of these initiatives include:

- **Assuring that the Federal Employees Health Benefits Plan (FEHBP) -- the nation's largest private insurer -- implements full mental health and substance abuse parity.** Today the Office of Personnel Management is sending a letter to the 285 participating health plans informing them that starting next year they will have to offer full mental health and substance abuse parity to participate in the program. This step will provide full parity for nine million beneficiaries by next year and assure the Federal government leads the way to providing parity. The Department of Labor is also launching a new outreach campaign to inform Americans about their rights under the Mental Health Parity Act of 1996.
- **Launching national school safety training program for teachers and educational personnel.** The President announced a major nationwide public/private partnership between the Departments of Education, Justice, and Health and Human Services and the National Education Association (NEA), EchoStar, and other partners to improve school safety. The partnership will create and run a comprehensive program that will be available at the beginning of the new school year with the goal of reaching every school across the country and providing training to teachers, school personnel, and community members on how to improve school safety. The partnership will provide both lesson plans for educational and community members working to make schools safer and the technology for schools to receive the new materials. *(Bruce Reviewing)*
- **Improving progress in research.** In July, The National Institute of Mental Health (NIMH) will launch a \$7.3 million landmark study to determine the nature of mental illness and treatment nationwide and to help guide strategies and policy for the next century. This new study will get information on mental illness, including the prevalence and duration of mental illness as well as the types of treatment that are most commonly used. NIMH also announced that this fall they will launch two new clinical trials, investing a total of \$61 million, to build on effective treatments for those affected by mental illness.
- **Encouraging states to offer more coordinated Medicaid services for people with mental illness.** Millions of Americans with severe mental illness rely on Medicaid to pay for their physical health and mental health care. To encourage states to make the most effective services available, the Health Care Financing Administration (HCFA) will advise all state Medicaid directors that: (1) Medicaid will reimburse for services provided in Assertive Community Treatment (ACT) programs targeting people with people with the most severe and persistent mental illness; (2) Medicaid recipients all have access to medications that have been approved by FDA for the treatment of serious mental illnesses; and (3) states should educate Medicaid providers and beneficiaries about the existence of advance planning directives for individuals who may be incapacitated in the future and unable to control their care.

- **Launching a pilot program to help people with mental illness get the quality treatment they need to return to work.** Of the 4.7 million Americans that receive Social Security Disability Insurance (SSDI), the Social Security Administration (SSA) estimates that approximately one in nine has an affective mood disorder. Research suggests that many of these affective disorders cases could be effectively treated and perhaps could return to work. The Administration will launch a new 5-year, \$10 million demonstration to provide treatment for SSDI beneficiaries with affective disorders. This complements the Roth-Moynihan-Jeffords-Kennedy legislation that allows people to buy into the Medicaid or Medicare program when they return to work.
- **Educating older Americans and their health professionals about the risks for depression.** Five million Americans over the age of 65 suffer from some form of depression, but many do not recognize their symptoms as depression and do not receive the treatment they need. NIMH and the Administration on Aging (AoA) will launch an outreach initiative to educate the elderly and their healthcare professionals that they may be at risk for or suffer from a mental illness. The Department of Veteran Affairs will also launch six new study sites to test two modes of primary care for aging persons with mental health and/or substance abuse disorders.
- **Reaching out to the vulnerable homeless Americans with mental illnesses.** The Department of Housing and Urban Development is launching a new initiative to encourage communities to create safe havens—where homeless mentally ill Americans can get treatment and care, including a new satellite conference for communities to learn strategies to create these safe havens. HHS will also launch a 2-year, \$4.8 million grant program to study the treatment, housing, education/training and support services that will impact as many as 2,000 homeless mothers and their 4,000 children, many of whom suffer from mental illnesses. The Department of Veteran Affairs will double the number of “stand downs” events to reach out to homeless Americans with mental illness to help them get the treatment and services they need. Finally, to assure that people with mental illness are treated fairly in housing HUD will require all employees and grantees to participate in three training and awareness sessions led by Secretary Cuomo.
- **Implementing new strategies to the mental health needs of crime victims.** To assure that part of any comprehensive response to community crises, such as acts of terrorism or mass violence, includes a strong mental health component, the Administration is announcing a new interagency partnership between the Department of Justice’s Office for Victims of Crime and the Center for Mental Health Services within the Substance Abuse and Mental Health Services Administration (SAMSHA). This also includes appointing someone within the Emergency Disaster Relief Branch of SAMHSA to work with DOJ to assure that there is a strategy in place to address the mental health needs of victims of federal crime.
- **Developing and implementing new strategies to address mental illness in the criminal justice system.** SAMHSA and DOJ are hosting a conference later this summer to focus on how all aspects of the criminal justice system can better address the needs of mentally ill offenders and prevention model strategies. Following this conference, DOJ will launch an outreach efforts to educate the criminal justice community on how to better serve people with mental health needs, which includes a new partnership with the National GAINS center so that communities interested in pursuing these approaches can get technical assistance and ideas about how to implement successful strategies.
- **Implementing a new comprehensive approach to address combat stress in the military.** At least 30 percent of those who have spent time in war zones experience post traumatic stress disorder. Today the President directed the Department of Defense to report back within 180 days on

an implementation plan for a comprehensive combat stress program throughout the military. DOD will also hold a conference this fall to develop strategies and educate military leaders and medical personnel about the need to enhance current practices.

- **Launching the expansion of the “Caring For Every Child” mental health campaign.** At least one in ten American children and adolescents may have behavioral, emotional or mental health problems. The Administration will launch a five year \$5 million campaign to help reduce stigma in targeted communities by highlighting the special mental health needs of children.
- **Improving the mental health of Native American youth.** The suicide rate for Native Americans between the ages of 5-24 years old is three times higher than the rest of the U.S. population in this age group. This initiative allocates at least \$5 million for a collaboration between the Departments of Interior, Justice, Education, HHS, and Tribes that will go to ten Native American communities to develop effective strategies to address mental health needs of youth in settings such as the home, school, treatment centers, and the juvenile justice system.
- **Launching a national mental health and medical/surgical care integration strategy.** VA will provide mental health assessment and care to veterans served by medical primary care teams and that medical assessment and care is available to veterans served by mental health primary care teams. Clinicians will be trained in the issues and methods involved in integration of mental health and medical services.
- **The Administration Also Challenged Congress to Pass Legislation to Improve Care and Services for People with Mental Illness.** The Administration urged Congress to:
 - Fund the historic \$70 million increase in the mental health grant and to call on the states to also renew their commitment to providing mental health proposals.
 - Pass a strong enforceable patients’ bill of rights which assures that people with mental health needs obtain critical protections such as the access to specialists and the continuity of such care protections.
 - Pass strong comprehensive privacy and legislation to eliminate genetic discrimination.
 - Pass the Roth-Moynihan-Jeffords-Kennedy legislation, which would enable people with disabilities to return to work by accessing affordable health insurance.
 - Hold hearings on the current mental health parity legislation immediately and to review the strengths and weaknesses of the current law.

RECORD TYPE: PRESIDENTIAL (NOTES MAIL)

CREATOR: Mickey Ibarra (CN=Mickey Ibarra/OU=WHO/O=EOP [WHO])

CREATION DATE/TIME: 3-JUN-1999 10:39:57.00

SUBJECT: Gun Suits

TO: Elena Kagan (CN=Elena Kagan/OU=OPD/O=EOP@EOP [OPD])

READ:UNKNOWN

TO: Bruce N. Reed (CN=Bruce N. Reed/OU=OPD/O=EOP@EOP [OPD])

READ:UNKNOWN

TEXT:

----- Forwarded by Mickey Ibarra/WHO/EOP on 06/03/99
10:39 AM -----

William H. White Jr.

06/03/99 10:34:09 AM

Record Type: Record

To: Mickey Ibarra/WHO/EOP@EOP, Barbara B. Hunt/WHO/EOP@EOP, Jose Cerda III/OPD/EOP@EOP

cc:

Subject: Gun Suits

Today, Boston becomes the 20th city to sue the gun manufacturers.

RECORD TYPE: PRESIDENTIAL (NOTES MAIL)

CREATOR: Barry J. Toiv (CN=Barry J. Toiv/OU=WHO/O=EOP [WHO])

CREATION DATE/TIME: 3-JUN-1999 17:42:14.00

SUBJECT: Boston Sues Gun Industry

TO: Elena Kagan (CN=Elena Kagan/OU=OPD/O=EOP@EOP [OPD])

READ:UNKNOWN

TO: Jose Cerda III (CN=Jose Cerda III/OU=OPD/O=EOP@EOP [OPD])

READ:UNKNOWN

TO: Bruce N. Reed (CN=Bruce N. Reed/OU=OPD/O=EOP@EOP [OPD])

READ:UNKNOWN

TEXT:

Boston Sues Gun Industry

BOSTON (AP) -- Accusing the gun industry of
negligence,
against 31
with guns.

The lawsuit, similar to a slew of litigation
filed in other cities,
It accuses
safety devices
to people not

recklessness and greed," Mayor Thomas M. Menino
announced the filing Thursday of a lawsuit
companies accused of flooding the city's streets
said guns have created a public health problem.
gunmakers of failing to incorporate all possible
and unjustly making money from firearms flowing
authorized to own them.

The city is seeking more than \$100 million in
damages for
violence, as
declines in real estate

police, fire and medical expenses caused by gun
well as for increased security costs and
values.

Springfield-based
Company Inc. of
Morgan, Utah.

Among the companies named in the suit are
Smith & Wesson Corp., Colt's Manufacturing
Hartford, Conn., and Browning Arms Corp. of

Travis Hall, a
the most

"These lawsuits, they have no merit," said
spokesman for Browning. "Our industry is one of
prohibited and monitored industries there is."
He said public officials should more rigorously

enforce gun laws
crimes to make

and not allow people accused of gun-related
plea bargain deals.

and New
industry.

Boston joins 19 other cities, including Chicago
Orleans, in filing suit against the gun

□#AP-NY-06-03-99 1717EDT

RECORD TYPE: PRESIDENTIAL (NOTES MAIL)

CREATOR: Karin Kullman (CN=Karin Kullman/OU=OPD/O=EOP [OPD])

CREATION DATE/TIME: 3-JUN-1999 18:39:30.00

SUBJECT: Re: draft briefing paper

TO: Elena Kagan (CN=Elena Kagan/OU=OPD/O=EOP@EOP [OPD])

READ:UNKNOWN

TEXT:

She doesn't really care either way. The only concern is that if the President actually has a question about the EO, no one in the briefing will have really worked on it specifically. Although Chris has been talking to the press about it today, so I assume he would probably be fine. So should I have Courtney take Cynthia off?

RECORD TYPE: PRESIDENTIAL (NOTES MAIL)

CREATOR: Mary L. Smith (CN=Mary L. Smith/OU=OPD/O=EOP [OPD])

CREATION DATE/TIME: 3-JUN-1999 20:50:52.00

SUBJECT: Final draft of school safety training announcement

TO: Elena Kagan (CN=Elena Kagan/OU=OPD/O=EOP @ EOP [OPD])
READ:UNKNOWN

TO: Bruce N. Reed (CN=Bruce N. Reed/OU=OPD/O=EOP @ EOP [OPD])
READ:UNKNOWN

CC: Marsha Scott (CN=Marsha Scott/OU=WHO/O=EOP @ EOP [WHO])
READ:UNKNOWN

CC: Laura Emmett (CN=Laura Emmett/OU=WHO/O=EOP @ EOP [WHO])
READ:UNKNOWN

TEXT:

Here is a longer paper on the school safety training announcement and the Q&A you asked for. Education, NEA , HHS, and DOJ are OK with both of these documents. Thanks, Mary

===== ATTACHMENT 1 =====

ATT CREATION TIME/DATE: 0 00:00:00.00

TEXT:

Unable to convert ARMS_EXT:[ATTACH.D45]ARMS23225816V.136 to ASCII,
The following is a HEX DUMP:

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National School Safety Training Program for Teachers and Educational Personnel

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The President will highlight that the goal of the campaign is to get teachers and school personnel the school safety training they need for the coming school year. In its first event in October of this year, the partnership will host a training session at which teachers and school personnel can learn about identifying warning signs of troubled kids and what resources they have to help those children. The training sessions will be transmitted with donated satellites and through other means.

In order to make sure school districts have the technology to receive the new materials, the satellite company EchoStar, which is based in Littleton, Colorado, and its partner Future View, Inc., are donating satellite dishes to 1000 school districts and 40 hours of free time for programming. President Clinton will challenge other members of the business community, including cable companies, public television stations, and other media outlets, to donate resources so that every school district will be able to receive the materials.

The Departments of Education, Justice, and Health and Human Services will participate in this public-private partnership by providing funding and other resources to develop at least three training sessions; assisting in the distribution of any materials; providing technical assistance in developing lesson plans; making government experts available for training sessions; and working with NEA, EchoStar, and the other partners to make sure that the resources and the goals of this initiative are coordinated in order to facilitate outreach to schools.

In creating the curriculum for the training sessions, the NEA has launched this program with members of the Learning First Alliance, including the American Federation of Teachers, the National Association of State Boards of Education, the National Parent Teachers Association, along with other national education organizations as well as the Fraternal Order of Police and the American Psychological Association. The Harvard School of Public Health will also participate. The partnership plans to transmit the training to school districts that will then be able to distribute the material by videotape to local schools and hold hands-on training sessions with teachers, educational personnel, and

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**Q&A on National School Safety Training Program
for Teachers and Educational Personnel
June 4, 1999**

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A: Today the President announced a major nationwide public/private partnership with the National Education Association (NEA), EchoStar, and other partners to improve school safety. The partnership, which includes the Departments of Education, Justice, and Health and Human Services, will create and run a comprehensive program that will be available at the beginning of the new school year with the goal of reaching every school across the country and providing training to teachers, school personnel, and community members on how to improve school safety. The partnership will provide both lesson plans for educational and community members working to make schools safer and the technology for schools to receive the new materials.

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Q: How does this fit in with other efforts the Administration has made in the area of school safety?

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This proposal also provides more effective prevention programs for the reduction of drugs and violence in schools, more accountability for results, and better targeting to those schools that need the most assistance. Under the revamped program, school districts will be expected to develop plans that: require schools to adopt comprehensive school safety plans, use proven anti-drug and violence prevention programs, establish security procedures for schools, and give parents an annual school report of incidents of drug use and violence. In addition, the Administration's safe schools initiative would create Project SERV--the School Emergency Response to Violence --to dispatch a coordinated FEMA-like response if a school tragedy should occur.

But whole communities need to get involved with keeping our schools safe. That is why the Administration created a new \$380 million program, the Safe Schools-Healthy Students initiative, to establish community-wide responses to school safety. Our initiative will give communities funds to provide comprehensive services for our young people, such as mental health services, school resource officers, mentoring, and after school programs.

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RECORD TYPE: PRESIDENTIAL (NOTES MAIL)

CREATOR: Cynthia A. Rice (CN=Cynthia A. Rice/OU=OPD/O=EOP [OPD])

CREATION DATE/TIME: 3-JUN-1999 10:37:28.00

SUBJECT: Tribes to sue tobacco firms

TO: Elena Kagan (CN=Elena Kagan/OU=OPD/O=EOP @ EOP [OPD])
READ:UNKNOWN

TO: Laura Emmett (CN=Laura Emmett/OU=WHO/O=EOP @ EOP [WHO])
READ:UNKNOWN

TO: Bruce N. Reed (CN=Bruce N. Reed/OU=OPD/O=EOP @ EOP [OPD])
READ:UNKNOWN

CC: J. Eric Gould (CN=J. Eric Gould/OU=OPD/O=EOP @ EOP [OPD])
READ:UNKNOWN

TEXT:

fyi

----- Forwarded by Richard J. Turman/OMB/EOP on 06/03/99
10:18 AM -----

American Indians want their share of
\$206 billion nationwide settlement

June 3, 1999: 8:17 a.m. ET

NEW YORK (CNNfn) - American Indian tribes Thursday said they filed a lawsuit against U.S. tobacco manufacturers for being improperly excluded from the industry's \$206 billion settlement with 46 U.S. states, according to lawyers for the tribes.

The federal suit seeking class-action status was filed in U.S. District Court in San Francisco, and alleges tobacco makers stood in the way of the tribes' due process and civil rights because their settlement accounted for American Indian populations without actually directing any of the proceeds to them.

A settlement between four major tobacco companies and 46 states to end individual health-related lawsuits unveiled last November was supposed to cover all citizens' health costs. Among other things, the settlement deemed that the tobacco giants - R.J. Reynolds, Phillip Morris, Lorillard and Brown & Williamson - fund a \$1.5 billion anti-smoking campaign and open previously secret industry documents.

The Indians' suit filed late Wednesday alleges that native Americans were excluded from the November settlement by being tallied as part of the dollar figure, but not receiving benefits from the funds directed toward state regulators and other agencies. It also alleges that native Americans were a specific group

targeted by tobacco producers, similar to teenagers and women.

"There was simply no legal, political or moral justification for failing to include the tribes in the settlement process," said Bill Audet, lead attorney for the tribes. "Native Americans have been targeted as tobacco consumers and Native American youth, adults, and women of reproductive age have the highest rates of smoking," he added.

Four states -- Florida, Minnesota, Mississippi and Texas -- had already settled separately for a total of \$40 billion.

Tribal representatives from California, Oklahoma, Colorado, New Mexico, Washington and Arizona will discuss the lawsuit at a Thursday news conference in Oakland, Calif. Other tribes will be allowed to join in the case, which was filed on behalf of American Indian tribes across the country.

On Wednesday, shares of Philip Morris (MO) closed down 9/16 at 39, while RJR Nabisco Holding Co. (RN) lost 1/4 to 31-1/8. Loews Corp. (LTR), parent company of Lorillard, declined 1-11/16 to 79-11/16.

RECORD TYPE: PRESIDENTIAL (NOTES MAIL)

CREATOR: Irene Bueno (CN=Irene Bueno/OU=OPD/O=EOP [OPD])

CREATION DATE/TIME: 3-JUN-1999 10:37:11.00

SUBJECT: INS Restructuring Meeting with Groups

TO: Elena Kagan (CN=Elena Kagan/OU=OPD/O=EOP @ EOP [OPD])
READ:UNKNOWN

TO: Bruce N. Reed (CN=Bruce N. Reed/OU=OPD/O=EOP @ EOP [OPD])
READ:UNKNOWN

CC: Laura Emmett (CN=Laura Emmett/OU=WHO/O=EOP @ EOP [WHO])
READ:UNKNOWN

Irene Bueno (CN=Irene Bueno/OU=OPD/O=EOP [OPD])
READ:UNKNOWN

TEXT:

Immigrant advocacy groups requested a meeting with Maria to discuss INS Restructuring issues and I suggested to Maria that I organize a staff level meeting with them first to identify their issues. Below is report on the meeting with the groups. FYI - we are still waiting for the revised INS restructuring plan. Following the review of the revised plan, INS will brief you, other senior level WH staff and representatives from State and Labor. Please let me know if you have any questions. Thanks.

----- Forwarded by Irene Bueno/OPD/EOP on 06/03/99 10:35 AM -----

Irene Bueno
06/03/99 09:15:56 AM
Record Type: Record

To: Maria Echaveste/WHO/EOP
cc: Janet Murguia/WHO/EOP, Steven M. Mertens/OMB/EOP, Clara J. Shin/WHO/EOP
Subject: INS Restructuring Meeting with Groups

Maria -

On Wed 6/2, Janet, Steve and I met with representatives from some of the advocacy groups on INS Restructuring. We had a good meeting and they seemed satisfied where the Administration is on this issue and we will continue to work together to make sure INS Restructuring occurs in a way that is consistent with Administration's principals.

They expressed concern that there is a vacuum of leadership on the Hill on this issue and asked that the Administration take a more visible role on this issue.

We informed them that we are pushing INS to develop a bold and credible plan that would withstand any argument that INS is not making fundamental changes. They were also aware of the meeting that Reno is having with Rodgers to discuss INS Restructuring matters and we explained that Reno

plans to discuss the Administration's principles of the INS Restructuring and to lay the groundwork for a working relationship with Rodgers to develop a plan that would be consistent with both our goals.

They also strongly suggested that the INS restructuring plan be presented by someone other than the INS and we explained that that the Department of Justice and the AG herself would be the lead person on this issue. This is a preferable approach given Reno's good relationship with Rodgers and they seemed pleased with that strategy.

The groups informed us that they have sent letters to key members of Congress on their principles (this letter was attached to the letter they sent to you) which are quite similar to our principles. They are also planning to follow up with Congressional staff meetings with the Congressional Hispanic Caucus (6/18), states with high immigrant populations, and key members on the House and Senate side particularly members of the House Appropriations Committee including - Serrano, Roybal-Allard, and Pastor.

Please let me know if you have any questions. Thanks.

(Janet and Steven - let me know if I left anything out.)

Irene

RECORD TYPE: PRESIDENTIAL (NOTES MAIL)

CREATOR: Mary L. Smith (CN=Mary L. Smith/OU=OPD/O=EOP [OPD])

CREATION DATE/TIME: 3-JUN-1999 20:24:39.00

SUBJECT: longer paper on school safety training announcement

TO: Elena Kagan (CN=Elena Kagan/OU=OPD/O=EOP @ EOP [OPD])
READ:UNKNOWN

TO: Bruce N. Reed (CN=Bruce N. Reed/OU=OPD/O=EOP @ EOP [OPD])
READ:UNKNOWN

CC: Marsha Scott (CN=Marsha Scott/OU=WHO/O=EOP @ EOP [WHO])
READ:UNKNOWN

CC: Laura Emmett (CN=Laura Emmett/OU=WHO/O=EOP @ EOP [WHO])
READ:UNKNOWN

TEXT:

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===== ATTACHMENT 1 =====

ATT CREATION TIME/DATE: 0 00:00:00.00

TEXT:

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June 3, 1999

**PRESIDENT'S COMMITTEE ON EMPLOYMENT OF PEOPLE WITH DISABILITIES
PRESIDENT'S AWARD CEREMONY**

DATE:	June 4, 1999
LOCATION:	East Room
BRIEFING TIME:	2:00pm – 2:30pm
EVENT TIME:	2:40pm – 3:15pm
FROM:	Bruce Reed, Mary Beth Cahill

I. PURPOSE

To present the President's Committee on Employment of People with Disabilities (PCEPD) President's Award; to call on Congress to pass the Jeffords-Kennedy legislation by the July anniversary of the American with Disabilities Act; and to announce an executive order to eliminate the stricter standards applied to federal hiring practices for adults with psychiatric disabilities.

II. BACKGROUND

Established in 1947 by President Harry Truman, the President's Committee on Employment of People with Disabilities is a small federal agency based in Washington, DC, that reports to the President on progress and problems related to disability employment issues. Under the leadership of Chairman Tony Coelho, some 300 members communicate, coordinate and promote public and private efforts to enhance the employment of individuals with disabilities. The Committee provides information, training and technical assistance to America's business leaders, organized labor, rehabilitation and service providers, advocacy organizations, families and individuals with disabilities. Among the Committee's services are the Job Accommodation Network, the Business Leadership Network, High School/High Tech, Project EMPLOY and the Workforce Recruitment Program for College Students with Disabilities, which during the past year placed 300 people with disabilities in private and public sector jobs.

The President's Award is America's highest honor for achievement in furthering the employment and empowerment of people with disabilities. An annual recipient is selected from a national slate of nominees. Honorees have demonstrated outstanding achievements in the world of work and made significant contributions to increase public awareness about Americans with disabilities in the workforce. Since 1947, the award has been presented only six times at the White House, three of those times by you.

Today you will present awards to the following honorees:

Joyce Bender is the president of Bender Consulting Services (BCS), which actively recruits and hires people with disabilities who have expertise in information technologies. BCS contracts these employees as consultants to client companies throughout the Pittsburgh, Pennsylvania, and Wilmington, Delaware, areas. In 1985, Ms. Bender sustained a life-threatening epileptic attack that caused an intracranial hemorrhage requiring brain surgery. She returned to work with a seizure disorder, a 40 percent hearing loss in one ear and a renewed respect for the attitudinal obstacles faced by individuals with disabilities. Employment of people with disabilities has become her life's work.

James H. Click, Jr. founded the non-profit LINKAGES program in Tucson, Arizona, as a one-stop shop for employers who want to hire people with disabilities. A LINKAGES liaison works with local rehabilitation agencies to identify qualified candidates for every position. Since 1998, some 80 employers have hired more than 170 people with disabilities through the program. As president of the Jim Click Automotive Team, Mr. Click is also a LINKAGES employer. Approximately 35 individuals with disabilities are working in his car dealership franchises throughout Arizona and California. His dream is to take LINKAGES throughout the country.

Laura Hershey is a grass roots leader who has tirelessly advocated for reform in the Social Security system, housing, transportation and other areas affecting the livelihood of Americans with disabilities. She is best known for mobilizing the PASS Participants Rights Campaign to fight for the rights of adults with severe disabilities to pursue employment and maintain their eligibility for Medicaid coverage. Ms. Hershey has served as interim executive director of the Denver Disability Center for Independent Living and is a former director of the Denver Commission for People with Disabilities. She consults and writes frequently on disability issues.

Today you will also:

Announce the Signing of an Executive Order Expanding Hiring Opportunities for People with Psychiatric Disabilities. In January, Tipper Gore announced that the Office of Personnel Management (OPM) would explore measures to eliminate the stricter standards applied to federal hiring practices for people with psychiatric disabilities. Today, you will sign an executive order modernizing these twenty two year-old rules which:

- Ensure that individuals with psychiatric disabilities are given the same hiring opportunities as persons with severe physical disabilities or mental retardation. The civil service rules will be changed to ensure that people with psychiatric disabilities will be covered by the same kind of appointing authority as used for individuals with other disabilities.

- Permits people with psychiatric disabilities the same opportunity to acquire competitive civil service status after two years of successful service. This authority will allow adults with psychiatric disabilities the same opportunity for conversion into the competitive civil service as employees with other disabilities.

This action was recommended by Tipper Gore and the President's Task Force on Employment of Adults with Disabilities under the leadership, Labor Secretary Alexis Herman, chair, and Tony Coelho, vice-chair, as well as by OPM Director Janice R. Lachance, who chairs the Task Force's Committee on the Federal Government as a Model Employer.

Challenge Congress to Pass the Historic, Bipartisan Work Incentives Improvement Act. This historic new legislation, which has received overwhelming bipartisan support in both the House and Senate under the leadership of Senators Roth, Moynihan, Jeffords, and Kennedy and Representatives Lazio, Waxman, Dingell, and Bliley, removes significant barriers to work for people with disabilities by improving access to health care through Medicaid; extending Medicare coverage for people with disabilities who return to work; and creating a new Medicaid buy-in demonstration to help people with a specific physical or mental impairment that is expected to lead to a severe disability without medical assistance. One of the biggest barriers to entering the workplace for individuals with disabilities is that, under current law, people with disabilities often become ineligible for Medicaid or Medicare if they work, forcing them to choose between health care coverage and employment. Today you will challenged the Congress to pass this legislation by July 26, the 9th anniversary of the Americans with Disabilities Act.

I. PARTICIPANTS

Briefing Participants:

Bruce Reed
Chris Jennings
Cynthia Rice
Mary Beth Cahill
Janet Murguia
Jonathan Young
June Shih

Stage Participants:

Joyce Bender
James H. Click, Jr.
Laura Hershey

Program Participants:

Secretary Alexis Herman
Jill Rickgauer

Jill Rickgauer is currently employed as a switchboard receptionist for a large automotive dealer in Tuscon, Arizona, the Jim Click Automotive Group. Soon after becoming blind in 1991, Ms. Rickgauer lost her job as a career planner for college students due to downsizing. With assistance from the Arizona Vocational Rehalitation Department, Mrs. Rickgauer learned to navigate daily living as a blind person and use assistive technology. Despite her solid resume and new skills, however, she faced extensive discrimination from employers, who offered many interviews but no jobs. Ms. Rickgauer identified and successfully obtained her current position through Jim Click's LINKAGES program.

II. PRESS PLAN

Open Press.

III. SEQUENCE OF EVENTS

- **YOU** will greet the award winners and their families in the Blue Room.
- **YOU** will be announced, accompanied by Secretary Alexis Herman, Joyce Bender, James Click, Laura Hershey, and Jill Rickgauer, into the East Room.
- Secretary Herman will make remarks and introduce Jill Rickgauer.
- Jill Rickgauer will make remarks and introduce **YOU**.
- **YOU** will make remarks, present the President's Awards, and depart.

VI. REMARKS

To be provided by speechwriting.

CLINTON/GORE ADMINISTRATION UNVEILS NEW INITIATIVES TO ADDRESS MENTAL HEALTH AT THE FIRST-EVER WHITE HOUSE CONFERENCE ON MENTAL HEALTH

Today at the first-ever White House Conference on Mental Health, chaired by the President's Mental Health Advisor Tipper Gore, the Clinton/Gore Administration is unveiling unprecedented steps to improve mental health. The Administration's proposals are addressing parity, improving treatment, bolstering research, and improving community responses to help those with mental illnesses. Highlights of these initiatives include:

- **Assuring that the Federal Employees Health Benefits Plan (FEHBP) -- the nation's largest private insurer -- implements full mental health and substance abuse parity.** Today the Office of Personnel Management is sending a letter to the 285 participating health plans informing them that starting next year they will have to offer full mental health and substance abuse parity to participate in the program. This step will provide full parity for nine million beneficiaries by next year and assure the Federal government leads the way to providing parity. The Department of Labor is also launching a new outreach campaign to inform Americans about their rights under the Mental Health Parity Act of 1996.
- **Helping teachers and parents identify and assist kids at risk.** The Administration also announced it's plan to host a series of meetings this Fall in every state where teachers and faculty from schools could come together for training on spotting troubled youth and guidance on how to help them. Participating organizations include NEA, American Psychological Association, PTA, HHS, DOJ, and the Department of Education.
- **Improving progress in research.** In July, The National Institute of Mental Health (NIMH) will launch a \$7.3 million landmark study to determine the nature of mental illness and treatment nationwide and to help guide strategies and policy for the next century. This new study will get information on mental illness, including the prevalence and duration of mental illness as well as the types of treatment that are most commonly used. NIMH also announced that this fall they will launch two new clinical trials, investing a total of \$61 million, to build on effective treatments for those affected by mental illness.
- **Encouraging states to offer more coordinated Medicaid services for people with mental illness.** Millions of Americans with severe mental illness rely on Medicaid to pay for their physical health and mental health care. To encourage states to make the most effective services available, the Health Care Financing Administration (HCFA) will advise all state Medicaid directors that: (1) Medicaid will reimburse for services provided in Assertive Community Treatment (ACT) programs targeting people with people with the most severe and persistent mental illness; (2) Medicaid recipients all have access to medications that have been approved by FDA for the treatment of serious mental illnesses; and (3) states should educate Medicaid providers and beneficiaries about the existence of advance planning directives for individuals who may be incapacitated in the future and unable to control their care.

- **Launching a pilot program to help people with mental illness get the quality treatment they need to return to work.** Of the 4.7 million Americans that receive Social Security Disability Insurance (SSDI), the Social Security Administration (SSA) estimates that approximately one in nine (about 500,000) has an affective disorder (such as depression or a bipolar disorder). Research suggests that many of these affective disorders cases could be effectively treated and perhaps could return to work. The Administration will launch a new 5-year, \$10 million demonstration to provide treatment for SSDI beneficiaries with affective disorders. This complements the Roth-Moynihan-Jeffords-Kennedy legislation that allows people to buy into the Medicaid or Medicare program when they return to work.
- **Educating older Americans and their health professionals about the risks for depression.** Five million Americans over the age of 65 suffer from some form of depression, but many do not recognize their symptoms as depression and do not receive the treatment they need. NIMH and the Administration on Aging (AoA) will launch an outreach initiative to educate the elderly and their healthcare professionals that they may be at risk for or suffer from a mental illness. The Department of Veteran Affairs will also launch six new study sites to test two modes of primary care for aging persons with mental health and/or substance abuse disorders.
- **Reaching out to the vulnerable homeless Americans with mental illnesses.** The Department of Housing and Urban Development is launching a new initiative to encourage communities to create safe havens—places where homeless mentally ill Americans can get treatment and care, including a new satellite conference for communities to learn strategies and develop ways to create these safe havens. The Administration will also launch a 2-year, \$4.8 million grant program to study the treatment, housing, education/training and support services needed by homeless women and their children that will impact as many as 2,000 homeless mothers and their 4,000 children, many of whom suffer from mental illnesses. Finally, the Department of Veteran Affairs will double the number of “stand downs” events to reach out to homeless Americans with mental illness to help them get the treatment and services they need.
- **Implementing new strategies to the mental health needs of crime victims.** To assure that part of any comprehensive response to community crises, such as acts of terrorism or mass violence, includes a strong mental health component, the Administration is announcing a new interagency partnership between the Department of Justice’s Office for Victims of Crime and the Center for Mental Health Services within the Substance Abuse and Mental Health Services Administration (SAMSHA). This also includes appointing someone within the Emergency Disaster Relief Branch of SAMHSA to work with the Office for Victims of Violence to assure that there is a strategy in place to address the mental health needs of victims of federal crime.

- **Developing and implementing new strategies to address mental illness in the criminal justice system.** SAMHSA and DOJ are hosting a conference later this summer to focus on how all aspects of the criminal justice system can better address the needs of mentally ill offenders and prevention model strategies. Following this conference, DOJ will launch an outreach efforts to educate the criminal justice community on how to better serve people with mental health needs, which includes a new partnership with the National GAINS center so that communities interested in pursuing these approaches can get technical assistance and ideas about how to implement successful strategies.

The Administration Also Challenged Congress to Pass Legislation to Improve Care and Services for People with Mental Illness. The Administration urged Congress to:

- Fund the historic \$70 million increase in the mental health grant and to call on the states to also renew their commitment to providing mental health proposals.
- Pass a strong enforceable patients' bill of rights which assures that people with mental health needs obtain critical protections such as the access to specialists and the continuity of such care protections.
- Pass strong comprehensive privacy and legislation to eliminate genetic discrimination.
- Pass the Roth-Moynihan-Jeffords-Kennedy legislation, which would enable people with disabilities to return to work by accessing affordable health insurance.
- Hold hearings on the current mental health parity legislation immediately and to review the strengths and weaknesses of the current law.

**CLINTON/GORE ADMINISTRATION TAKES UNPRECEDENTED STEPS TO
ADDRESS MENTAL ILLNESS AT THE FIRST-EVER WHITE HOUSE CONFERENCE
ON MENTAL HEALTH**

Today, at the first-ever White House Conference on Mental Health, the Clinton/Gore Administration is unveiling a comprehensive range of initiatives to improve mental health. The Administration's proposals are addressing a variety of key mental health issues including improving parity, dispelling myths about mental illness, improving community responses to encourage people with mental illnesses to get help, taking new strides in research, and challenging Congress to pass a series of bills that will help people with mental illness. Today the Administration is:

PARITY

Assuring that the Federal Employees Health Benefits Plan (FEHBP) -- the nation's largest private insurer -- implements full mental health and substance abuse parity. Today the Office of Personnel Management is sending a letter to the 285 participating health plans informing them that starting next year they will have to offer full mental health and substance abuse parity to participate in the program. OPM will work with these plans throughout the year to evaluate to what extent they need to make modifications to come into compliance. This step will provide full parity for nine million beneficiaries and assure the federal government leads the way to providing parity.

Educating Americans about current mental health parity laws. Many Americans with mental illnesses are not aware that the Mental Health Parity Act of 1996 required health plans that cover mental health benefits to guarantee equal lifetime and annual benefits for mental and physical treatments. To help assure that consumers and employers are fully aware of the current protections under the law, the Department of Labor will launch a new outreach campaign to educate Americans about their existing parity rights. This campaign will include: (1) new public service announcements on local radio stations and newsletter and newspaper columns nationwide to promote awareness; (2) an outreach campaign to inform consumers they can call the Department's toll free number (1-800-789-2647) to understand these protections; and (3) new efforts to work with consumer advocates to assure awareness about the law.

IMPROVING COMMUNITY RESPONSES TO MENTAL HEALTH NEEDS

Implementing new strategies to the mental health needs of crime victims. Communities that are victims of terrorism or mass violence have enhanced needs for mental health services following these types of emergencies. To assure that part of any comprehensive response to these crises includes a strong mental health component, the Administration is announcing a new interagency partnership between the Department of Justice's Office for Victims of Crime and the Center for Mental Health Services within the Substance Abuse and Mental Health Services Administration (SAMSHA). Part of this effort includes appointing someone within the Emergency Disaster Relief Branch of SAMHSA to work with the Office for Victims of Violence to assure that there is a strategy in place to address the mental health needs of victims of federal crime. This new partnership will assure that the response to these crises include mental health training, technical assistance, and consultation services to communities for assisting victims of crime.

Implementing a new comprehensive approach to address combat stress in the military. Combat stress reactions are common, as those in combat are in foreign environments and many times under extreme conditions. At least 30 percent of those who have spent time in war zones experience post traumatic stress disorder. The importance of addressing combat stress reduction is timely given the deployments around the world. Today the President directed the Department of Defense to report back within 180 days on an implementation plan for a comprehensive combat stress program throughout the military (leadership, morale, and unit cohesion are key factors in primary prevention). DOD will also hold a conference this fall to develop strategies and educate military leaders and medical personnel about the need to enhance current practices to assure that prevention strategies are strengthened.

Reaching out to the vulnerable homeless Americans with mental illnesses. The Department of Housing and Urban Development is launching a new initiative to encourage communities to create safe havens—places for homeless mentally ill Americans can get treatment and care, including a new satellite conference for communities to learn strategies and develop ways to create these safe havens. The Administration will also launch a 2-year, \$4.8 million grant program to study the treatment, housing, education/training and support services needed by homeless women and their children that will impact as many as 2,000 homeless mothers and their 4,000 children, many of whom suffer from mental illnesses. Finally, the Department of Veteran Affairs will double the number of "stand downs" events to reach out to homeless Americans with mental illness to help them get the treatment and services they need.

Improving the mental health of Native American youth. The suicide rate for Native Americans between the ages of 5-24 years old is three times that of the rest of the U.S. population in this age group. This initiative is a collaboration between the Departments of Interior, Justice, Education, Health and Human Services and Tribes and will go to ten Native American communities throughout the country. The proposal allocates \$5 million over three years to develop effective strategies to address the mental health needs of Native American youth in settings such as the home, school, health care treatment centers, and the juvenile justice

system. Beginning in FY 2000, these communities will be able to apply for competitive funds, contingent on appropriations, through this coordinated grant process.

Launching a national mental health and medical/surgical care integration strategy. The Department of Veteran's Affairs will provide mental health assessment and care to veterans served by medical primary care teams and that medical assessment and care is available to veterans served by mental health primary care teams. Clinicians will be trained in the issues and methods involved in integration of mental health and medical services. VA will evaluate and monitor quality and outcomes of integrated medical/surgical and mental health services.

REDUCING STIGMA AND PROMOTING AWARENESS

Announcing a new nationwide anti-stigma campaign to dispel the myths and promote awareness about mental illness. At a radio address with the President, Mrs. Gore announced that this fall she will launch a major anti-stigma campaign to dispel the myths and promote awareness about mental health and how to access treatment. This campaign will be chaired by Mrs. Gore and will include a whole range of private sector partners including the Ad Council, community organizations, the media and others.

Launching the expansion of the "Caring For Every Child" mental health campaign. At least one in ten American children and adolescents may have behavioral, emotional or mental health problems. To take steps right away to reduce stigma, the Administration will launch a five year five million dollar campaign to help reduce stigma in targeted communities by highlighting the special mental health needs of children. This public/private campaign will assist states and communities in developing culturally competent education programs about the mental health needs of children, for parents, primary care providers, educators and social services workers.

Educating older Americans and their health professionals about the risks for depression. The National Institutes of Mental Health (NIMH) estimates that five million Americans over the age of 65 suffer from some form of depression. However, many of these Americans do not recognize their symptoms as depression and do not receive the treatment they need. NIMH and the Administration on Aging (AoA) will launch an outreach initiative to educate the elderly and their healthcare professionals that they may be at risk for or suffer from a mental illness. AoA will work to get this information throughout the aging network, including through the AoA website, the AoA newsletter (that goes to 600 older adult agencies), and the State Units on Aging, that run a range of programs serving millions of older Americans including meals on wheels and adult day care centers.

Launching six new study sites to help older adults with mental illness get quality treatment in primary care settings. Research indicates that three-fourths of older adults who commit suicide had visited a primary care physician within the month before their suicide and 20 percent had visited their primary care physician on that very day. Usually older adults do not seek services for these disorders due to the lack of awareness that their symptoms are a treatable mental illness, rather than normal signs of aging. The Department of Veteran Affairs will collaborate with the Substance Abuse and Mental Health Services Administration in HHS by providing \$17 million to expand an existing SAMHSA program to test two models of primary care service delivery for aging persons with mental health and/or substance abuse disorders in these six sites for a total of thirteen.

IMPROVING TREATMENT FOR AMERICANS WITH MENTAL ILLNESS

Encouraging states to offer more coordinated Medicaid services for people with mental illness. Millions of Americans with severe mental illness rely on Medicaid to pay for their physical health and mental health care. To encourage states to make the most effective services available to treat mental health needs, the Health Care Financing Administration (HCFA) will advise all state Medicaid directors that: (1) Medicaid will reimburse for services provided in Assertive Community Treatment (ACT) programs targeting people with the most severe and persistent mental illness; (2) Medicaid recipients all have access to medications that have been approved by FDA for the treatment of serious mental illnesses; and (3) states should educate Medicaid providers and beneficiaries about the existence of advance planning directives for individuals who may be incapacitated in the future and unable to control their care.

Launching a pilot program to help people with mental illness get the quality treatment they need to return to work. Of the 4.7 million Americans that receive Social Security Disability Insurance (SSDI), the Social Security Administration estimates that approximately one in nine (about 500,000) has an affective disorder (such as depression or a bipolar disorder). Research suggests that many of these affective disorders cases could be effectively treated and perhaps could return to work. The Administration will launch a new five-year, \$10 million demonstration to provide treatment for SSDI beneficiaries with affective disorders. Up to 1,000 SSDI beneficiaries with affective disorders will participate in this pilot, and SSA will monitor this study to determine if it enables these beneficiaries to return to work and determine to the extent this can be launched on a broader scale. This complements the Roth-Moynihan-Jeffords-Kennedy legislation that allows people to buy into the Medicaid or Medicare program when they return to work.

PROMOTING FAIR TREATMENT AND REDUCING DISCRIMINATION

Developing and implementing new strategies to address mental illness in the criminal justice system. The Bureau of Justice Statistics estimates that the prevalence of mental illness in prisons and jails is about 10 to 15 percent. The Substance Abuse and Mental Health Services Administration within HHS and DOJ are hosting a conference later this summer to focus on how all aspects of the criminal justice system can better address the needs of mentally ill offenders. The conference will bring together mental health experts, leaders in the juvenile justice system

and law enforcement officials from around the country to focus on a range of topics including, model prevention strategies; treatment and support needs of juvenile offenders, how institutional and community corrections can better treat those with mental illnesses. Following up on promising strategies learned at this conference as well as other community practices that have proven effective, DOJ will launch an outreach efforts to educate the criminal justice community on how to better serve people with mental health needs. These efforts include a new guide that discusses community-based strategies as well as a partnership with the National GAINS center so communities interested in pursuing these approaches can get technical assistance and ideas about how to implement successful strategies.

Reducing discrimination and stigma in housing. The Department of Housing and Urban Development (HUD) will hold three training and awareness sessions led by Secretary Cuomo and facilitated by community partners in HUD's 81 offices to reduce stigma and discrimination in housing and to help assure that housing facilities address the needs of consumers with mental illness. HUD will require that all their employees and its thousands of grantees participate in one of these sessions by satellite.

IMPROVING PROGRESS IN RESEARCH

Launching landmark study to determine nature of mental illness and treatment nationwide to help guide strategies and policy for the next century. In July, the National Institute of Mental Health (NIMH) will launch a \$7.3 million major new study to collect the first data collected in over a decade on mental illness, including the prevalence and duration of mental illness, and the types of treatment that are most commonly used. This study of 10,000 Americans will provide information that will help guide how the nation allocates resources and designs policies for the 21st century.

Developing two new clinical trials to improve mental health treatment. The National Institute of Mental Health is announcing that this fall they will launch two new five-year clinical trials to build on effective treatments for those affected by mental illness including: a new \$36 million trial to test new antipsychotic medications with fewer side effects, and a \$25 million trial to test intervention strategies for the treatment of patients who have depression, but are resistant to available treatments. Unlike other studies, these new effectiveness trials will be set in a wide range of "real world" environments allowing for a stronger understanding of how interventions translate in everyday life.

CHALLENGE FOR CONGRESS TO PASS LEGISLATION TO IMPROVE CARE AND SERVICES FOR PEOPLE WITH MENTAL ILLNESS.

Fund an historic increase in the mental health block grant. The Administration called on the Congress to pass the President's FY 2000 budget proposal for a \$70 million increase in the mental health block grant. In an era of surpluses, the Administration also called on states to expand their coverage in this area.

Pass a strong enforceable patients' bill of rights. The Administration also challenged the Congress to pass a strong enforceable patients' bill of rights that assures that consumers, including those with mental health needs, receive critical protections such as access to specialists, the continuity of care protections, and an independent appeals process to address grievances with their health plans.

Pass strong comprehensive privacy protections and legislation to eliminate genetic discrimination. The President and Vice President also urged Congress to pass comprehensive legislation to assure medical records privacy, so that information, including sensitive information about mental illness, is protected. In addition, as researchers continue to unlock the genetic code, which enhances the potential to expand treatment options, the Administration urged the Congress to pass legislation that prevents employers and health care plans discriminating against Americans based on their genetic information.

Pass Roth-Moynihan-Jeffords-Kennedy legislation to enable people with disabilities return to work. Access to affordable health insurance is the biggest barrier preventing people with disabilities from returning to work. Congress was encouraged to pass this legislation which would help people with disabilities, including mental illnesses, buy into Medicare and Medicaid so they can return to work.

Challenge Congress to hold hearings on mental health parity legislation and to review the strengths and weaknesses of the current law. The Administration urged the Congress to hold hearings right away on the strengths and weaknesses of the current mental health parity law and to determine the feasibility of congressional legislation that would expand these proposals for private health plans.

ATT CREATION TIME/DATE: 0 00:00:00.00

TEXT:

<p>HR 1899 IH

<p><center>106th CONGRESS</center>

<p><center>1st Session</center>

<p><center> H. R. 1899</center>

<p><tttitle>To require the Secretary of Labor to issue regulations to eliminate or minimize the significant risk of needlestick injury to health care workers.</tttitle>

<p><center>IN THE HOUSE OF REPRESENTATIVES</center>

<p><h3><center>May 20, 1999</center></h3>

<p>Mr. STARK (for himself, Mrs. ROUKEMA, Mr. GEORGE MILLER of California, and Mr. ANDREWS) introduced the following bill; which was referred to the Committee on Education and the Workforce, and in addition to the Committees on Commerce, and Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

<p><hr>

<p><center>A BILL</center>

<p><bttitle>To require the Secretary of Labor to issue regulations to eliminate or minimize the significant risk of needlestick injury to health care workers.</bttitle>

<p> Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

<p><h3>SECTION 1. SHORT TITLE.</h3>

<p> This Act may be cited as the `Health Care Worker Needlestick Prevention Act'.

<p><h3>SEC. 2. REQUIREMENTS.</h3>

<p> (a) BLOODBORNE PATHOGENS STANDARD-

<p> (1) IN GENERAL- Except as provided in paragraph (2), the Secretary of Labor, acting through the Occupational Safety and Health Administration, shall amend the bloodborne pathogens standard to require that--

<p> (A) employers utilize needleless systems and sharps with engineered sharps injury protections in their work sites to prevent the spread of bloodborne pathogens; and

<p> (B) to assist employers in meeting the requirement of subparagraph (A), non-managerial direct care health care workers of employers participate in the identification and evaluation of needleless systems and sharps with engineered sharps injury protections.

<p> (2) EXCEPTION- The bloodborne pathogens standard requirements of paragraph (1) shall apply to any employer, except where the employer demonstrates, to the Secretary's satisfaction, that--

<p> (A) there are circumstances in the employer's work facility in which the needleless systems and sharps with engineered sharps injury protections do not promote employee safety, interfere with patient safety, or interfere with the success of a medical procedure; or

<p> (B) the needleless systems and sharps with engineered sharps injury protections required are not commercially available to the employer.

<p> (b) STANDARD CONTENT- For carrying out the requirement of subsection (a) (1) for needleless systems and sharps with engineered sharps injury protections, the amendment required by subsection (a) shall include the following:

<p> (1) EXPOSURE CONTROL PLAN- The employer shall include in their exposure control plan an effective procedure for identifying and selecting existing needleless systems and sharps with engineered sharps injury protections and other methods of preventing bloodborne pathogens exposure.

<p> (2) SHARPS INJURY LOG- In addition to the recording of all injuries

s from contaminated sharps on the OSHA Occupational Injuries and Illnesses 200 log or its equivalent, the employer shall maintain a separate contaminated sharps injury log containing the following information (to the extent such information is known to the employer) with regard to each exposure incident:

- (A) Date and time of the exposure incident.
 - (B) Type and brand of sharp involved in the exposure incident.
 - (C) Description of the exposure incident which shall include--
 - (i) job classification of the exposed employee;
 - (ii) department or work area where the exposure incident occurred;
 - (iii) the procedure that the exposed employee was performing at the time of the incident;
 - (iv) how the incident occurred;
 - (v) the body part involved in the exposure incident;
 - (vi) if the sharp had engineered sharps injury protections--
 - (I) whether the protective mechanism was activated, and whether the injury occurred before the protective mechanism was activated, during activation of the mechanism, or after activation of the mechanism, if applicable; and
 - (II) whether the employee received training on how to use the device before use, and a brief description of the training;
 - (vii) if the sharp had no engineered sharps injury protections, the injured employee's opinion as to whether and how such a mechanism could have prevented the injury, as well as the basis for the opinion; and
 - (viii) the employee's opinion about whether any other engineering, administrative, or work practice control could have prevented the injury as well as the basis for the opinion.
- (3) TRAINING- A requirement that all direct care health care workers shall be provided adequate training on the use of all needleless systems and sharps with engineered sharps injury protections which they may be required to use.
- SEC. 3. NATIONAL CLEARINGHOUSE ON SAFER NEEDLE TECHNOLOGY.
- (a) IN GENERAL- The Director of the National Institute for Occupational Safety and Health shall establish and maintain a national database on existing systems and sharps with engineered sharps injury protections.
- (b) EVALUATION CRITERIA- The Director shall develop a set of evaluation criteria for use by employers, employees, and other persons when they are evaluating and selecting needleless systems and sharps with engineered sharps injury protections.
- (c) TRAINING- The Director shall develop a model training curriculum to train employers, employees, and other persons on the process of evaluating needleless systems and sharps with engineered sharps injury protections and shall (to the extent feasible) provide technical assistance to persons who request such assistance.
- (d) MONITORING- The Director shall establish a national system to collect comprehensive data on needlestick injuries to healthcare workers, including data on mechanisms to analyze and evaluate prevention interventions in relation to needlestick injury occurrence. In carrying out its duties under this subsection, the National Institute for Occupational Safety and Health shall have access to information recorded by employers on the sharps injury log as required by section 2(b)(2).

<p> (e) AUTHORIZATION- There is authorized to be appropriated \$15,000,000 to the National Institute of Occupational Safety and Health to carry out the requirements of this section.

<p><h3>SEC. 4. DEFINITIONS.</h3>

<p> For purposes of this Act:

<p> (1) BLOODBORNE PATHOGENS- The term `bloodborne pathogens' means pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include hepatitis B virus, hepatitis C virus, and human immunodeficiency virus.

<p> (2) CONTAMINATED- The term `contaminated' means the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.

<p> (3) DIRECT CARE HEALTH CARE WORKER- The term `direct care health care worker' means an employee responsible for direct patient care with potential occupational exposure to sharps related injuries.

<p> (4) EMPLOYER- The term `employer' means each employer having an employee with occupational exposure to human blood or other material potentially containing bloodborne pathogens.

<p> (5) ENGINEERED SHARPS INJURY PROTECTIONS- The term `engineered sharps injury protections' means--

<p> (A) a physical attribute built into a needle device used for withdrawing body fluids, accessing a vein or artery, or administering medications or other fluids, that effectively reduces the risk of an exposure incident by a mechanism such as barrier creation, blunting, encapsulation, withdrawal, retraction, destruction, or other effective mechanisms; or

<p> (B) a physical attribute built into any other type of needle device, or into a nonneedle sharp, which effectively reduces the risk of an exposure incident.

<p> (6) NEEDLELESS SYSTEM- The term `needleless system' means a device that does not use needles for--

<p> (A) the withdrawal of body fluids after initial venous or arterial access is established;

<p> (B) the administration of medication or fluids; and

<p> (C) any other procedure involving the potential for an exposure incident.

<p> (7) SHARP- The term `sharp' means any object used or encountered in a health care setting that can be reasonably anticipated to penetrate the skin or any other part of the body, and to result in an exposure incident, including, but not limited to, needle devices, scalpels, lancets, broken glass, broken capillary tubes, exposed ends of dental wires and dental knives, drills, and burrs.

<p> (8) SHARPS INJURY- The term `sharps injury' means any injury caused by a sharp, including cuts, abrasions, or needlesticks.

<p> (9) SHARPS INJURY LOG- The term `sharps injury log' means a written or electronic record satisfying the requirements of section 2(b)(2).

>

<p><h3>SEC. 5. APPLICATION TO MEDICARE HOSPITALS.</h3>

<p> The Secretary of Health and Human Services shall provide by regulation that, as a condition of participation under the medicare program under title XVIII of the Social Security Act of a hospital that is not otherwise subject to the bloodborne pathogens standard amended under section 2(a) because it is exempt from regulation by the Occupational Safety and Health Administration, the hospital shall comply with the bloodborne pathogen standard amended under section 2(a) with respect to any employees of the hospital, effective at the same time as such amended standard would have applied to the hospital if it had not been so exempt.

<p><h3>SEC. 6. EFFECTIVE DATE.</h3>

<p> This Act shall become effective upon the date of its enactment, except that the Secretary of Labor shall take the action required by section 2 within

one year of such date.

<p>END
