

vides an excellent recruiting ground for young scientists, mathematicians, and engineers. And there is always an awareness that close liaison with the universities is desirable against the day of possible total mobilization. For these reasons and others, responsible officials might regret being pushed toward a policy which would increase tensions between the military and university researchers.

There can be little doubt, however, that the letters introduce a new strain into the relationship. It is too early to gauge the reaction of mathematicians at large. *Science* talked to several mathematicians who signed the *Notices* announcement, and few expressed surprise. Not untypical was the remark of one that, "if people criticize the Army, Navy and Air Force, it's perfectly well for the Army, Navy and Air Force

to reconsider doing business with them." But there was little evidence of sympathy for those responsible for managing military-supported university research during an undeclared war which is unpopular in the universities. ONR and ARO had the candor to put their questions in writing. Now quite a few people are wondering whether this "isolated incident" could escalate.

—JOHN WALSH

California: Reagan and the Public Health Controversy

California. The battles between Governor Ronald Reagan and the University of California have received considerable attention in the national press. Less noticed outside of California, but no less intense, have been the conflicts between the Reagan administration and two groups of health professionals. This article will examine the struggle between Reagan and the public health authorities in California. A second article will review the fight between Reagan and the mental health establishment.

The public health battle has raged off and on for much of this year, though it has recently shown signs of quieting down. Rightly or wrongly, several prominent health leaders in the state concluded that Reagan's conservative philosophy—particularly his emphasis on economy, his aversion to a big governmental role in health matters, his tendency to seek solutions at the local rather than state level, and in the private rather than public sector—posed a threat to the effectiveness of public health services in California. Some even charged, perhaps overdramatically, that Reagan was on the verge of wrecking the state department of public health—though they generally assumed he was doing so inadvertently rather than deliberately. "This administration has an utter lack of the sense of professionalism—it thinks the government can be run best by amateurs," Roger O. Egeberg, president of the state board of health and dean of the school of medicine at the University of Southern California, told *Science*.

At issue in the struggle is the future of a health department that Berwyn

F. Mattison, executive director of the American Public Health Association (APHA), rates as "one of the leaders in public health work over the past decade or so." The department, which is operating on a total budget of some \$101.5 million (state, federal, and private funds) in fiscal year 1969, up from \$89.5 million last year, conducts a variety of programs aimed at preventing disease, improving the quality of the environment, and ensuring the availability of high-quality health services. Among other achievements, the department is said to have pioneered in developing and implementing health care standards through its licensing programs; in devising new forms of health services, such as multiphasic screening; in controlling such diseases as plague, tularemia, Q-fever, and coccidioidomycosis; and in developing programs for the detection, prevention, and rehabilitation of chronic diseases. The department provides substantial funding and technical assistance to local health programs. It also conducts a sizable research program, including epidemiological studies and laboratory research in fields related to public health problems. Two of the seven prospective studies that provided the principal data on death rates of smokers and nonsmokers for the Surgeon General's 1964 report on "Smoking and Health" were compiled by department researchers.

Though the department suffered a 10 percent cut in state funding in fiscal 1968 at the hands of the Reagan administration, and though it suffered a cut in authorized manpower in both fiscal 1968 and fiscal 1969, most public

health leaders acknowledge that the cuts, as Egeberg puts it, "have not been a great tragedy." Instead, the fears of the public health leaders stem from several actions and anticipated actions that have thrown doubt on the intentions of the Reagan administration.

The first major incident that caused alarm was Reagan's failure to reappoint Lester Breslow, a Democrat, as state director of public health when his term expired at the end of last year. Egeberg rates Breslow, who is president-elect of the American Public Health Association, as "one of the two or three best public health officers in the country." Breslow had been in the department since 1946 and had been director since 1965. He seems to have been dropped because of his liberal views on Medicare and other controversial social programs.

Breslow, now a professor in the school of public health at UCLA, told *Science* that the incoming Reagan administration, which took office on 1 January 1967, first asked for his resignation in December 1966. At the urging of friends and various public health leaders, Breslow refused to resign. He took the position that the public health director had deliberately been given an appointment that overlaps gubernatorial administrations in order to insulate the post from politics, and that to resign before completing his term would violate this principle.

So Breslow stayed on, and, as things turned out, there were no substantial conflicts between Breslow and the administration. Spencer Williams, Reagan's health and welfare administrator, even recommended that Breslow be reappointed. But Reagan ignored Williams' suggestion, primarily, according to sources within the Reagan administration, because powerful elements in the California Medical Association wanted Breslow ousted.

Breslow was not, technically, fired or "let go." He was simply told that

he would not be reappointed to a full 4-year term, so he resigned as of 31 December 1967, the end of his previous term, rather than continue to serve on a day-by-day basis while a replacement was found.

Breslow's departure had been foreshadowed in mid-December when an appointments official in the Reagan administration told a newspaper reporter that while Breslow was "eminently qualified" for the post, the governor was "leaning against" reappointing him because of "basic philosophical differences." Later Reagan defined these differences in a press conference: "He (Breslow) believes that government . . . should play a greater part in certain areas, in the social structure, than I believe, and that government should . . . have a greater control in the field of medicine than I believe it should have."

Many observers felt Reagan was justified in seeking a public health director more in tune with the philosophy of his administration. But, to some public health leaders, the dropping of Breslow—and particularly the effort to get him to resign before his term was up—seemed an ominously political move unrelated to professional questions. "Public health has not been a tool of politics in this state, but Reagan is bringing back the spoils system. It's the worst thing he's done as far as health is concerned," asserts L. S. Goerke, dean of the school of public health at UCLA. Goerke, a Democrat, served on the state board of health for 14 years under both Republican and Democratic governors but was not reappointed by Reagan.

A second factor that has alarmed California public health leaders has been the character of Reagan's appointments to the state board of health, which have generally lessened the influence of the public health professionals and the academicians and boosted the influence of the private practitioners. "Reagan hasn't appointed a single public health expert—there's not a man on the board with a background in public health," says Egeberg, who points out that he himself is a dean of medicine, not of public health. (Egeberg's term on the board expires 31 December.) Under the previous administration, the board, whose responsibilities are largely advisory, had included the late Charles E. Smith, public health dean at the University of California, Berkeley, who served on the board until he died; Goerke, the public health

NEWS IN BRIEF

● EAST EUROPE EXCHANGES:

Recent political developments in Eastern Europe notwithstanding, the National Academy of Sciences (NAS) has announced that applications are open for the NAS Soviet Eastern European exchange program. Under the existing agreements, NAS, in cooperation with the Soviet Academy and the academies of sciences in Czechoslovakia, Poland, Romania, and Yugoslavia, offers 1- to 12-month visits during the 1969–70 academic year to American scientists interested in current scientific research in Eastern Europe and the Soviet Union. Applications may be filed before 25 November with the Office of the Foreign Secretary, National Academy of Sciences, Washington, D.C. 20418.

● GOVERNMENT-UNIVERSITY RESEARCH:

A cooperative agreement to share university scientific personnel and government research facilities in advanced materials science has been signed by the National Bureau of Standards (NBS) and the University of Maryland. In exchange for use of NBS research equipment and laboratory facilities, the University of Maryland will provide a research and training program for NBS employees. A similar program has existed since 1962 at Boulder with the University of Colorado and four more programs are contemplated with other universities.

● **MEDICAL SCHOOLS:** Five new medical schools will admit their first classes this fall, providing places for 220 of the estimated national total of 9630 first-year medical students. The new schools are the University of California at Davis, University of California San Diego School of Medicine, University of Connecticut School of Medicine in Hartford, Mount Sinai School of Medicine of the City University of New York, and the University of Texas Medical School at San Antonio.

● **MATERIAL VALUES:** Congress has passed a law intended to make information on the properties of materials readily available to engineers and scientists. The National Bureau of Standards, which will coordinate the new program, indicates that scientists and engineers do not have adequate access to materials data such as melting points,

electrical resistance, and strength. Under the new program, a group of experts from the National Academy of Sciences will review available data and make a compendium of the most reliable values.

● BRANDEIS MEDICAL CENTER:

Brandeis University will establish a medical services research center with \$19 million—the largest gift in its history—from Lewis S. Rosenstiel, retiring chairman of Schenley Industries. The new center will coordinate basic research in the life sciences with social sciences research and will offer research programs such as the economics of medical aid and problems of the aging. The center is expected to offer about 100 rotating fellowships to visiting researchers.

● CORNELL ELECTRON SYNCHROTRON:

The world's largest 10-Gev electron synchrotron, built with National Science Foundation support at a total cost of \$11.5 million, has been completed, and will be dedicated this fall as the Robert Rathbun Wilson Synchrotron Laboratory; the circular particle accelerator is located at Cornell University.

● ARTIFICIAL HEART RESEARCH:

Grants totaling \$7 million in research contracts have been awarded for the development of heart-assist devices by the Artificial Heart Program of the National Heart Institute. In all, \$19 million has been awarded in grants for the development of artificial heart aids since the Artificial Heart Program began its operations in 1964.

● MARINE SCIENCE SURVEYS:

Five surveys of marine science activities in 99 nations have been published by the National Council on Marine Resources and Engineering Development. The surveys include a description of the economic importance of marine activities, the nature and scope of marine research, and the organizations involved in marine sciences programs. *Marine Science Activities of the Nations of the Near East and South Asia* (30¢); *East Asia* (35¢); *Latin America* (35¢); *Africa* (35¢); and *Canada and Europe* (55¢) may be obtained from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C.

dean at UCLA, who was not reappointed; and Arthur E. Varden, a hospital administrator who was considered to have a strong public health background, but who was not reappointed. Reagan's five appointees to the board, according to Egeberg, consist of "a sanitarian who keeps our minds in the sewers and gutters every meeting, a pathologist who doesn't believe in the pasteurization of milk, an orthopedist who doesn't know beans about public health, and two other doctors in private practice." Egeberg asserts that private practitioners, no matter how competent in their own specialties, often have a limited view of public health needs and problems.

In defense of the appointments, Spencer Williams, Reagan's health and welfare administrator, says the governor may have made "a different kind of appointment, but they are not necessarily worse." He says there are "cases where a private practitioner has more to offer than the dean of public health at a university because he is perhaps more aware of problems in the community." Williams says the state health department "certainly has enough expertise in public health" to respond to the board's need for a public health viewpoint, and that it is thus not absolutely necessary to have public health professionals sitting on the board.

However, some prominent private practitioners disagree. Alex A. Roger, one of the doctors whom Reagan appointed to the board, told *Science* he hopes future appointments will include "people with a public health background." And Malcolm C. Todd, president of the California Medical Association, believes that "Egeberg's got a pretty good case" in his complaints about Reagan's appointments. Todd believes "both sides are to blame" for the public health controversy, but he believes the conflict is on the verge of being settled because it's "too big a thing not to get resolved."

A third cause of controversy—and the source of the greatest friction of all—has been a confidential survey of the health department prepared by one of Reagan's task forces on efficiency and cost control. The task force groups, consisting mostly of people from private enterprise, were assigned the job of surveying state operations to find ways to make them more economical and businesslike. The group that examined the health department made 107 recommendations. Some are sound, in Egeberg's opinion, but others are "destructive," "punitive," "go into ridicu-



Photo by E. L. Daggett

Louis F. Saylor

lous detail," and, if implemented, would "scuttle" the department.

Egeberg and his colleagues were particularly upset at the secrecy surrounding the task force report. Though the report was being circulated within the Reagan administration and among health department personnel as early as November 1967, it was not made available to board members until many months later, and then only after the board started complaining publicly.

The health leaders were also critical of the composition of the task force group that surveyed the department. The group had no public health representative, but consisted of an orthopedic surgeon, a hospital administrator, and an engineering company official. Egeberg charged publicly that the physician member of the team "has had a chip on his shoulder about public health for a long time."

The most controversial parts of the report are a proposal to reduce the board of health from nine members to five—a dentist, a representative of the public, and three practicing physicians—thus eliminating a public health voice on the board; a suggestion that the department should downgrade its research activities and stick to providing services; numerous recommendations that programs be shifted from state to local jurisdiction, a move which public health professionals feared would result in savings at the state level accompanied by a diminution of services if localities were unable to finance the programs; and various recommendations for internal reorganization of the department, with the implication that personnel could be cut, but, in the eyes of the professionals, with no guarantee that the level of services would be maintained.

In an effort to nullify the task force

recommendations, the public health leadership—notably Egeberg, Mrs. Florence Wyckoff, vice president of the board, Lawrence Arnstein, an 87-year-old layman who has been dubbed "Mr. Public Health" by California papers, and W. H. Aufranc, director of the western regional office of the American Public Health Association (APHA)—launched a vigorous pressure campaign. Newspapers were encouraged to write editorials, professional and civic groups were coaxed into making statements, and Egeberg used his position as board president to sound off frequently.

The big weapon in the campaign was an analysis of the task force survey made by three public health specialists. The analysis, which was commissioned by the board and financed by the APHA, agreed with 20 of the 107 task force recommendations, disagreed with 33, recommended further study of 40, found that ten were already implemented, and considered four inapplicable. The analysis concluded:

"A businessman's approach is not necessarily inappropriate as long as it is recognized that the business of public health is to prevent disease, promote health, and prolong life. We find the suggestion unbelievable that the best way to reach this goal would be to curtail operations, eliminate staff, abolish research, and lower scientific standards."

Amazement Over Uproar

The Reagan administration expresses amazement at the uproar caused by the task force report. Spencer Williams told *Science* the complaints are "premature." He points out that the report is only advisory, and that it was held in abeyance while the administration searched for a new health director to fill the vacancy created by Breslow's resignation. Williams says that not all the task force recommendations will be put into effect and that the views of the public health community will be given full consideration. The task force report is currently being reviewed within the administration.

The chief hope of resolving the controversy, according to many observers, lies with the state's new director of public health, Louis F. Saylor, who was appointed by Reagan on 1 July. The Reagan administration had a difficult time filling the job, partly because the \$26,000 salary is less than top public health officers can make elsewhere, partly because the circumstances surrounding Breslow's departure and the ensuing controversies had given California a

bad name in public health circles. After eight men had been officially approached and turned the job down, according to one source who was active in the search, the administration reached into its own health department and elevated Saylor from his post as assistant chief of the division of research.

Though Saylor is less well known in the public health world than Breslow, he is considered a strong administrator. He served 21 years in the U.S. Army Medical Corps, including a stint as chief medical officer of the Eighth Army in Korea. He is also a Democrat, which takes some of the sting out of charges that Reagan is playing politics with public health. And, perhaps most important, he seems to have the confidence of both sides in the controversy.

Confidence, in many ways, is at the root of the conflict. The task force report, for example, is subject to more than one interpretation. Some observers point out that it contains statements stressing the need for "continuity of service" when changes are made. Others regard such statements as mere "lip service" thrown in to make a downgrading of public health programs more palatable.

Saylor himself believes the fight over the task force report is a "tempest in a teapot." He believes there is "no substantive disagreement" between the public health community and the Reagan administration. "If we could get people to stop shouting they'd realize they're in agreement," he says. Saylor assured *Science* that "public health in California

is not going to revert to some antedeluvian era. We're going to get a bigger bang for our buck, but we're not going to make cuts from the standpoint of reducing services. If we cut personnel, it will be because we are utilizing our resources more effectively."

Saylor's ability to carry out his pledge, and his success in retaining the confidence of the disputants, will determine whether the controversy dies down forever or blazes up anew. At this point it's not completely clear whether California's public health programs really are in mortal danger, or whether a nervous public health profession has feared the worst from a conservative administration and conjured up a lot of imaginary threats.

—PHILIP M. BOFFEY

Making of a President: Stanford Students Decry Lack of Voice

Last spring, several hundred students at the University of Oregon occupied an administration building in pressing their demand for equal representation on the university's committee to select a new president. The sit-in ended after students were promised, if not an equal voice on the committee, at least a larger one than they had previously been offered. The Oregon incident and similar incidents at other institutions indicate that, in their demands for participation in university affairs, students are not going to overlook the important business of selecting a president.

In recent weeks some student leaders at Columbia have criticized the selection of Andrew W. Cordier, dean of the School of International Affairs, as Columbia's acting president, and have charged the university trustees with failure to consult the student body on the appointment. And, at Stanford, the head of the student body and the editor of the *Stanford Daily* have attacked the recent action of the Stanford trustees in choosing a successor to President J. E. Wallace Sterling, who has retired, without giving students a part in the selection process. The new president is Kenneth S. Pitzer, a distinguished chemist, member of the

National Academy of Sciences, and member of the President's Science Advisory Committee. Although he now seems to have dropped the idea, Denis Hayes, president of the student body, reacted initially to the appointment by saying that a referendum would be held this fall in order that students and faculty might judge whether Pitzer was the man for the job.

The situation at Stanford is worth examining in greater detail, for it illustrates how, when a conflict develops between students and trustees over the process of presidential selection, a new president can be placed in an awkward position even before he takes office—and even though, from past performance, he might seem to merit student confidence. Pitzer, as president of Rice University at Houston, Texas, during the past 7 years, has built a record recently praised by two past presidents of the Rice student body. For example, he pushed through a charter change, over the opposition of some alumni, which allowed Rice to admit its first black students; he strengthened departments in the humanities and the social sciences; and he encouraged greater student participation in university affairs.

But when Pitzer's appointment to the

presidency of Stanford was announced on 19 August (he takes office 1 December), Hayes referred to him as an "unknown entity." "I am not impressed with his record at Rice on racial matters," Hayes said. "I am worried by his association with the Rand Corporation [Pitzer is a Rand trustee]; and I have doubts about his capacity to establish a much needed rapport with the student body." Daniel C. Snell, editor of the *Stanford Daily*, expressed similar doubts.

Following a recent meeting with Pitzer, Hayes spoke more sympathetically of the new president, praising him for candor and indicating that he had found Pitzer's views on university affairs closer to his own than he had expected. Nevertheless, Hayes says his feeling toward Pitzer remains "ambivalent." What may be more important, the fact that Pitzer was appointed without significant involvement by Hayes or other elected student leaders does nothing to strengthen the hand of responsible student government against those students who would get their way by disruptive tactics.

Hayes won election last May over Miss Vicky Drake, a topless dancer who ran on her measurements (38-22-36) and her appeal to those campus activists and others who think student government is not for real. In the same election, on referendum issues, students condemned campus sit-ins and other disruptive demonstrations, of which Stanford has had its share. Now, Hayes's failure to gain a significant voice for students in the selection of a new president may, in future elections, make the topless dancer (or her equivalent) look more attractive. And it