Gingrich feels he is facing fire from his own troops.

His voice rising, the speaker pointed to journalists at the table and said they were acting like, well, like journalists. He was "infuriated," he said, by my column on affirmative action and asserted that I was wrong in saying his book, "To Renew America," does not mention the subject. (He cited a two-page chapter on "Individual Versus Group Rights" that never mentions affirmative action or quotas or proposes a specific solution.)

Gingrich went on to repeat what Jack Kemp said: that Republicans will rue a race-based campaign for president in 1996. He angrily lamented that black Republicans feel they are losing a golden opportunity to bring African Americans into the party. He described fears of such blacks as his Georgia congressional colleague and fighter for civil rights in the '60s, Rep. John Lewis, and warned against instilling apprehension about 'resegregation.'

Warming to his subject, Gingrich complained about conservatives bringing the party to ruin by opposing a rape-and-incest exception to federally financed abortions (another subject he avoids confronting directly in his book). He did not say so, but word has spread that he will cast a rare vote (the speaker usually does not vote) on the rape-and-incest exception.

In less than eight months, Gingrich has established himself potentially as one of the most powerful and effective speakers in the nation's history. He is unquestionably the most visionary and charismatic figure in the Republican Party. But the strain of "renew-

ing America'' is showing.

He seems more tolerant of the 25 or so House Republican moderates who oppose key elements of the party program than of some 200 conservatives who feel deeply about reverse discrimination and abortion on demand. That is not how the Republican majority was built, and it is not how it can be maintained.

HONORING DR. LONNIE BRISTOW ON HIS ASCENSION TO PRESI-DENT OF THE AMERICAN MEDI-CAL ASSOCIATION

## HON. GEORGE MILLER

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Friday, August 4, 1995

Mr. MILLER of California. Mr. Speaker, I rise today to pay tribute to Dr. Lonnie Bristow, a concerned physician, a constituent from San Pablo, CA., and a man with a heavy responsibility as we close out this century. Dr. Bristow was recently elected president of the American Medical Association. Dr. Bristow is also the first black president of the powerful medical organization.

I have worked with Dr. Bristow over the years as we have tried to find a solution to the many health insurance problems facing our country. Dr. Bristow and the AMA will be at the center of this critical and ongoing debate.

I wish Dr. Bristow many successes in his new position and I look forward to continuing to work together. I believe the article attached here from the Los Angeles Times captures the commitment Dr. Bristow has to his new position as president of the AMA and to pursuing health care policies that will benefit the entire Nation.

Attached, article from the Los Angeles Times, Tuesday, July 18, 1995 "He Might Have the Cure for Medicine's Ills".

HE MIGHT HAVE THE CURE FOR MEDICINE'S ILLS

(By Bettijane Levine)

It is oddly reassuring to spend time with Dr. Lonnie Bristow, small-town doctor and newly elected president of the American Medical Assn.—the first black president in the AMA's 148-year history.

During those moments, you bathe in the aura of a kindly, assertive man who believes that the current crisis in American medicine is not a fatal condition, and that in his new capacity he can help to make it better.

If Bristow can be believed—and he admits it might require a leap of faith for some familiar with AMA history—the way to start curing medicine's ills is for doctors to rejoin the organization that a majority of them have abandoned in recent years. Only 40% of U.S. doctors now belong to the AMA, down from 70% two decades ago.

We are in an era when doctors are losing control of the care of their patients. Bristow says; when patients sense that the quality of care is diminishing; when some of the country's great medical institutions are endangered because of lack of funds and drastic cutbacks.

"We now have health care being controlled by MBAs rather than by physicians committed to the Hippocratic oath." Bristow says, referring to the corporations from which most Americans receive health insurance. "And once health care becomes corporatized, as it has, and once it goes on the open stock market, then its major commitment is to Wall Street and the stockholders to maximize profits, rather than to give the best possible patient care. Business principles are introduced that unfortunately put patient care second to corporate profits."

It is an uncharacteristically direct outburst for Bristow, 65, who has worked his way up through the ranks of the AMA, who appears to be the consummate organization man, and who speaks sincerely but cautiously during an interview.

His discretion has apparently been honed to a fine point during 30 years of participation in the AMA, considered by many to have been a racist organization.

For much of the AMA's history, black doctors were not allowed to join. Unit 1968, the organization permitted state and local branches to deny membership to black doctors simply because they were black.

The AMA also backed South Africa's medical society in international medical meetings, although the group supported apartheid until 1989.

Bristow, who has practiced internal medicine for 30 years in San Pablo, Calif., speaks in a soft voice unmarked by anger or agitation.

He acknowledges that when he joined the organization in 1958, after finishing his internship at San Francisco City and County Hospital, "There were parts of the country where black Americans could not join." But in San Francisco, he says, "there was nothing to it."

His philosophy regarding many tough issues, including racism, he says, "is that if you want to change something, you do it from the inside. You don't stand outside and complain about it."

He applies that reasoning to doctors who have broken away from what Bristow calls "the mother group," preferring to belong only to associations related to their own medical specialties. Cardiologists, radiologists, urologists and others have begun to think of themselves as specialists above all else, Bristow says.

Many have splintered into even smaller subgroups, he says, preferring to associate with those who are like them in the sense

that they support or oppose abortion rights, are Republican or Democratic, are fee-for-service or salaried.

Bristow's goal as president will be to "make all these doctors understand that we have much more to unify us than to divide us. What we have in common is much more meaningful than that which might pull us apart."

If the defecting doctors can be persuaded to "come back under the umbrella of the AMA," he believes, "we will have more leverage and a better chance to get the kind of medical care for our patients that most of us want.

"The entire profession of medicine, and the doctor-patient relationship we all respect and love, has sailed into harm's way," he says. "We have to pull together the way any family would in a time of trouble," to get medicine back on the right track.

Bristow, a tall, imposing figure in a charcoal gray suit, stops to ponder for a moment.

"It's hard for me to explain just how exhilarating and personally satisfying it is to make an impact on another human being's life in a positive way. Doctors share that, above all else. It is the reason we became doctors in the first place.

"That ability to make an impact, to help improve patients' lives" is being eroded by corporatized health care that is not run by doctors but by business people and that dictates what treatment, and how much treatment, doctors can prescribe, Bristow says. "It intimidates doctors into acquiescing," he says

"That is a major reason for doctors to band together, no matter what their specialties or political beliefs.

"I don't expect all doctors to agree on everything. But on certain key issues, such as the sanctity of the doctor-patient relationship, the importance of freedom to choose which doctor to see, the importance of physicians being able to practice medicine the way they think is appropriate—those are issues which all doctors should be able to rally around."

He says that AMA will support a Patient Protection Act in Congress at the end of summer. It would guarantee, he says, full disclosure about all insurance programs, so potential subscribers will know the program's track record, whether previous users have been satisfied, and how much of the premium they pay actually is spent on patient care as opposed to dividends to stockholders and salaries for corporate managers.

The act would also mandate that physicians who contract with an insurance program may "not be fired without case and without due process." Physicians are being threatened by insurance companies who vow to fire them from the group if they do not practice medicine the way the insurance company directs them to. Bristow says.

The AMA, he says, is working to get universal health-care coverage, to make health care portable, and to make it available to people with pre-existing conditions.

Bristow was born in Harlem to a Baptist minister father and a mother who was a nurse at nearby Sydenham hospital.

His interest in medicine began, he says, when as a boy he would go to the hospital emergency room to pick up his mother and accompany her on the walk home. There were medical workers of all races pulling together there, he recalls, and they were saving people's lives.

Bristow received his bachelor's degree from City College in New York in 1953, and his medical degree from the New York University College of Medicine in 1957.

He went to Northern California for his internship and residency, and has specialized in occupational health there since.

He began cutting back on his practice a few years ago, he says as he became more involved in organizational work and travels on behalf of the AMA.

"As a physician, I was helping one person at a time. I became evident that if I really wanted to improve medical care for my patients, for my community, perhaps even for the whole country, I would have to have some sort of advantage, some greater power than I had as one lone doctor. That's what organized medicine provides.'

he became the AMA's first black member of the Board of Trustees in 1985, and the first black chairman of the board in 1993. He spent about half of last year on AMA business, for which he reportedly received \$278,000 in com-

Bristow and his wife, Marilyn (a former nurse who has been his office manager for 30 years), were in Los Angeles recently to help their son, Robert, settle into a Westwood apartment. He is an obstetrician/gynecologist starting a fellowship at UCLA in gynecologic oncology.

Their daughter; Lisa, runs a day-care cen-

ter in Northern California.

Bristow says he hopes to "get away from the stereotypes" once associated with the group over which he now presides. He would like the nation's doctors as well as the general public to come to think of it as meaning that it's a group that has the public's health as its major concern, and that it "takes good care of America."

WORKING FOR EDUCATION: IM-PACT AID, VOCATIONAL EDU-CATION, AND PROFESSIONAL DE-VELOPMENT ΙN THE LABOR-HHS-EDUCATION BILL

## HON. RANDY "DUKE" CUNNINGHAM

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Friday, August 4, 1995

Mr. CUNNINGHAM. Mr. Speaker, throughout the day yesterday, during House consideration of H.R. 2127, the fiscal year 1996 Labor-HHS-Education Appropriations bill, several Members and I worked together to transfer resources from lower priority spending to education. As chairman of the House Subcommittee on Early Childhood, Youth and Families, as a former teacher and coach, and most importantly as the father of three, I believe we must continue to invest in education and in our Nation's future. Federal authority over local education should and will be transferred appropriately to the States.

After several weeks of work, and with the cooperation of a great number of Members from both sides of the aisle, we successfully increased vocational education funding by \$100 million and Chapter 2-Eisenhower Professional Development by \$50 million, insured that Impact Aid funds could be provided to schools serving children of military families, and agreed to work through the authorization process so that \$35 million provided in the House version of fiscal year 1996 National Security Appropriations could be used for Impact Aid Basic Grants.

First, the House approved by voice vote a Cunningham amendment to H.R. 2127. As reported by the Appropriations Committee, H.R. 2127 prohibited Impact Aid funds to schools based on children of military parents who do not reside on base. It also prohibited Impact Aid funds to schools based upon the number

of such children with disabilities. These children used to be known as "military B's," before the Impact Aid reforms enacted in the 103d Congress. The Cunningham amendment simply struck that legislative language. It insures that Impact Aid funding can be provided to schools based upon the number of children of military parents who reside off base, and the number of such children with disabilities.

Second, the House approved by voice vote Johnson of Texas-Cunningham-Riggs amendment to H.R. 2127. This amendment cut appropriations for the Agency for Health Care Policy Research [AHCPR] by half, generating savings of \$60 million. Owing to the peculiarities of the congressional appropriations process, we successfully parleved that savings into significant funding for education: \$50 million for the Chapter 2-Eisenhower Professional Development program, and \$100 million for Carl Perkins Vocational Education Basic State Grants. The funds for Chapter 2 contribute to an Education Reform Block Grant under development in my Youth Subcommittee. And the Vocational Education resources boost funding for the Youth Training portion of the CAREERS Act, a major reform, consolidation, simplification and decentralization of Federal job training programs. The CAREERS Act has been reported out of the House Opportunities Committee and awaits House consideration.

As a bonus, the Johnson-Cunningham-Riggs amendment prohibited AHCPR from continuing to receive \$8 million annually from Medicare, effectively making that money available to provide health care services for our "chronologically gifted" citizens.

Third, an agreement has been made such that \$35 million in Impact Aid funds provided in the House version of National Security Appropriations legislation for fiscal year 1996 will be disbursed in a manner agreeable to the National Security Committee authorizers. As Youth Subcommittee chairman and as a member of the National Security Committee and a likely conferee for the fiscal year 1996 National Security Authorization bill, I will work with Members to direct that \$35 million to Impact Aid Basic State Grants. I should note further that H.R. 2127, the fiscal year 1996 Labor-HHS-Education Appropriations bill, provided \$50 million in Impact Aid for "heavily impacted" districts, an increase of \$10 million over fiscal year 1995.

Last, a colloquy was conducted among several Members and the leadership, in which there was agreement that gross Impact Aid funding for fiscal year 1996 would be at least 96 percent, and perhaps as much as 98 percent, of the amount provided in fiscal year

Upon this agreement, if the Impact Aid "hold harmless" funding is not allowed, and if we successfully hold this plan together through the Senate and the conferences on these various bills, public schools are likely to receive in fiscal year 1996 about 100 percent of their funding for what used to be called "A" and "military B" students.

I assure my colleagues that we will not rest on this issue. I know many Members are in this for the long haul. Thus, I wish to thank the many Members who worked together closely to make it possible to direct savings from lower-priority spending to education, specifically: Mr. GOODLING, Mr. LIVINGSTON, Mr. POR-TER, Mr. RIGGS, Mr. JOHNSON of Texas, Mr. METCALF, Mr. WATTS, Mr. EDWARDS, Ms. MINK, Mr. CLAY, Mr. CHRISTENSEN, Mr. ARMEY, Speaker GINGRICH, plus several additional Members whose contributions and support are appreciated, and numerous staff.

TRIBUTE TO NATIONAL GUARDS-MAN LTC (P) RICHARD MC CALLUM

## HON. IKE SKELTON

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Friday, August 4, 1995

Mr. SKELTON. Mr. Speaker, today I wish to recognize a great Missourian as well as a great American.

LTC Richard J. McCallum is a recent graduate from the class of 1995 at the U.S. Army War College. He is a member of the Missouri National Guard and just completed a leave of absence from the University of Missouri-Columbia. He received his OCS commission in 1973 as an Infantry Officer and he has completed more than 24 years of military duty which includes both active duty assignments and National Guard membership within the Missouri and Nebraska Army National Guard.

As a captain, he served for 2 years as the Commander of a Mechanized Infantry Company in the Nebraska Army National Guard from 1978 to 1980. Subsequently, in 1980, he transferred into the Missouri Army National Guard where he has continued to serve to the present date. He was promoted to the rank of lieutenant colonel in 1990 while serving as the deputy chief of staff, MoARNG. His most recent National Guard assignment was the Deputy Commander for Plans, Operations and Intelligence, Troop Command Headquarters, Kansas City, MO. Prior to that, he completed 3 years of command with the 35th R.A.O.C.. Rear Area Operations Center, and the newly organized 135th R.T.O.C., Rear Tactical Operations Center. During these 3 years years of command as a lieutenant colonel, he served 8 months of active duty in the northern desert of Saudi Arabia while his unit was mobilized in support of Operation Desert Shield/Desert Storm.

LTC McCallum had the distribution of being the senior commander from the Missouri National Guard who was mobilized for the gulf war. Upon his return, he was decorated with five individual awards including the Bronze Star for his performance as a commander. Additionally, his unit was the only Missouri Guard unit that earned the Meritorious Unit Commendation Award while serving on active duty in Saudi Arabia.

He has a MA and a PhD from the University of Nebraska-Lincoln in the field of adult and continuing education. The past 18 years, he has worked in various administrative and teaching assignments at the University of Missouri-Columbia.

Last fall he was selected to represent the War College as the only student from the Class of 1995 who was given the opportunity to conduct a Senior Officer Oral History Interview [SOOHI]. This year's SOOHI was conducted with General, U.S. Army, retired, Frederick M. Franks, Jr. The SOOHI Program is the Army's organized effort to select a retired four-star officer each year and develop a series of taped interviews which are transcribed and deposited at the Military History Institute and the Center.