INTERVIEW I

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INTERVIEWEE: GEORGE PAZIANOS

INTERVIEWER: Michael L. Gillette

PLACE: Washington, D.C.

Tape 1 of 1, Side 1

P: Basically my background is I did my undergraduate work at Cornell University and graduated in 1956. [I] spent two years in the U.S. Army and then went back to Cornell Law School and have a jurist doctor degree in law. [I] came to Washington in 1961 and worked in the House side for--

(Interruption)

P: [I] worked for a congressman at large from Connecticut named Frank Kowalski. When he was not reelected I was employed by Senator [Claiborne] Pell on his personal staff as a legislative assistant. That was in 1963. I think it was in mid- to late-1964 I went over on [the] Labor and Public Welfare staff basically as counsel to the Railroad Retirement Subcommittee, but in practice handling all of Senator Pell's work on [the] committee, which included all the health, the education, [and the] poverty programs.

G: Describe the committee at the time you went there, in terms of the--

P: The staff itself was very small. There were approximately six or seven professionals on staff, each one of us had one subcommittee. I had Railroad Retirement; John [inaudible] had labor. Jack Forsythe was general counsel of the entire committee. Charlie Lee

handled education. Bob Barclay handled health. I'm trying to remember Bill's last name--but Senator [Joseph S.] Clark who handled the OEO [Office of Economic Opportunity] program.

By specific design Senator [Pat] McNamara was designated to handle the entire committee minus Lister Hill to handle the OEO legislation. I think that the design behind this was that it would have been politically difficult for Lister Hill to chair the committee and hold hearings on all the poverty legislation.

G: Had the administration asked Hill to carry the legislation?

P: He agreed that it would go through committee and that he would let it go through the committee, but that he had to really divorce himself from handling any part of it. So basically Jennings Randolph--McNamara had the entire committee, minus Lister Hill, acting as a subcommittee [inaudible] on all the legislation.

(Interruption)

P: --who was his administrative assistant on his personal staff.

G: In terms of the senators on the committee, did Lister Hill tend to dominate or was it--?

P: Lister Hill ran a committee in very adroit fashion. He really would allow the subcommittee chairmen to handle things pretty much the way they wanted to. The difficult areas for him of course were labor, the OEO legislation. That's basically why he opted to handle health as being very non-controversial. Education would have been fairly controversial for him. I would say he gave very, very strong support to his co-senators in everything.

G: Did Hill also have a particular interest in health legislation in terms of his own background?

P: Yes. And I think he had an interest in education once Sputnik went up. Lister Hill was probably one of the key people in getting very expanded federal involvement in education, in the programs. I think going back to Hill-Burton, probably the genesis of his real interest of health--I'm trying to think of Mary's last name--Lasker. Mary Lasker was probably one of the most formidable lobbyists for health issues going and she readily had Mr. Hill's ear.

G: Why was that?

P: Because he was a perfect gentleman and he would always have the door open to the woman who wanted to talk with him. He's a true southern gentleman. A woman lobbyist has a much better shot at Lister Hill than a man.

G: To what extent was there a bipartisan equity in the committee? The Democrats controlled the committee, but--

P: I think what occurred was--I'm trying to remember. It must have been in 1964 when the--or was it 1966--I'm trying to remember when the Republicans took over the Senate. It was only for a two-year period.

G: It wasn't during this time?

P: I don't remember. Because [Barry] Goldwater was the head of the committee, I think.

G: This was later.

P: It was later. Was it around 1968?

Basically there was good deal of bipartisanship on the committee. Even as conservative as Goldwater was at the time, he--I remember what happened. Goldwater left the committee and Jack [Jacob K.] Javits became the ranking minority member. When Goldwater left, there were a number of staff positions that his people had filled and now all of a sudden were up for grabs. The Democratic staff on the committee placed every single one of the Republican's staffers.

G: Replaced them?

P: Placed them with jobs. We contacted our friends over on the House side and got three jobs for them over there, and I think that really solidified the bipartisan nature of the committee because it was the Democrats who pitched. I know [inaudible] and I were just working nights trying to get these guys placed. It worked. Javits and his people saw this and said, "They're human beings. Let's work with them." No problem at all. If it became political, everybody recognized that they'd just vote party lines and that would be it, but there was an amazing amount of cooperation both between the senators and on the staff level.

G: Of the Republican members of the committee, who took the lead on health legislation?

P: My recollection was Javits, but I'm not sure.

G: Did Pell have a particular specialization?

P: Not really. Pell was interested in both the health issues and also very much in education. A good deal of his focus was on education. He was chairman of the Railroad Retirement Subcommittee. But that only involved legislative action maybe every two years. It was not a very active robust [inaudible] at all.

(Interruption)

G: All right. You were talking generally about the committee and its members. How receptive was the committee to the social legislation of the Great Society of 1964 and 1965?

P: I would say initially it really depends on the subcommittee area.

(Interruption)

P: I think the Sputnik incident obviously promoted an awful lot of education legislation earlier on in the late 1950s and early 1960s. And I think that the committee overall felt that there was a lot of catching up to do in the health field as well as moving forward in the education field, and I think very receptive to federal involvement in, because things weren't happening at the state level. I think the statistics we were seeing on talented high school graduates who never went on to higher education, that's one of the reasons that Pell got so interested in the concept of a national test for excellence. When we looked at the statistics and then we looked at the figures that we had on G.I.s who had taken advantage of the G.I. Bill and the additional income that they would generate over their lifetime, just the economics made very practical sense. When you figured overall a veteran who had taken advantage of the G.I. Bill and probably garnered five thousand dollars in benefits to go to college would generate something between $125,000 and $150,000 more over his working lifetime. The return on investment demonstrated that this was a program we could do and reap the benefits.

In good part I think that the White House under President [Lyndon] Johnson recognized an awful lot of the social problems that were not being met and had not been

met in the past and decided that we have a very affluent society; we can afford to do these things. The states are not moving forward; therefore, it's going to be up to us to do it.

G: Was there any difference between the way the administration's legislative liaison operation worked under Presidents Johnson and [John F.] Kennedy? Had it changed?

P: It became a lot more--it had changed. But the thing that Lyndon Johnson had going for him initially, obviously, was inheriting the legacy, as it were. But being the politician he was, recognizing that he could do a lot more--Jack Kennedy was a product of the Hill, but he wasn't an artist and Lyndon Johnson was. He really knew how to maximize that kind of situation. When he clearly saw a need--and his staff were quite innovative and it wasn't just his staff.

Throughout the administration and on the Hill there were a lot of things that had been brewing, but no one really got behind them and pushed. When the statistics were coming out on poverty--and that was really appalling to a lot of people--things started getting born to address these issues. I think a fair amount of thought went into them. Now the implementation and the end results sometimes were not as bright as we might have hoped, but certainly all of the increase in health programs, the education programs, these clearly demonstrated that they did help, I think. I think when you made health care more readily accessible to people, whether it be through Medicare or whatever, you are meeting a true social need and doing it in a very productive manner.

G: To what extent was the Congress, either through the senators and house members or through the professional staff on the Hill, involved in the shaping of administration programs before they came to the Hill?

P: I think a lot of the programs that wound up being legislation and being enacted had been around for some time. It's just no one really got behind them. I can't think of specific pieces of legislation, but a lot of the concepts were not brand new. They weren't fresh off the tree or anything like that. They had been around for some time. I think that the administration felt that it had the clout; it had the majority in both houses. The 1964 election seemed to indicate a very clear mandate, "This our guy, go. Do what needs to be done." And then a lot of things just started flowing. There was an awful lot of cooperation, but when you had the kind of majorities in both houses that the Democrats enjoyed, it wasn't exactly difficult.

G: Was it largely a question of amending the legislation after it came up on the Hill or did, let's say, the staff and the senators have a role in helping devise the--

P: I think there was consultation prior to--

G: Okay.

P: Yes. The thing is that Johnson had a tendency to play the Senate courtesy role to the *n*th degree. Legislation would be introduced by the chairman of the committee, the poverty legislation by the ranking Democrat because Lister Hill couldn't do it. Obviously they worked the co-sponsorship bit to a very, very good degree. Looking at it from a very practical point of view, if you have sixty co-sponsors on a bill in the Senate the probability of it passing seems to be pretty well a foregone conclusion. So a lot of that

kind of legislative approach was used. There was a lot of consultation between Hill and the administration.

G: Let's talk specifically about health legislation. Did you have consistent opponents of the health legislation as offered in the--

P: I think what it tended to boil down to was the political philosophy, conservative/liberal. And, yes--although I did see Goldwater, in the early days when he was still on the committee, go along with some of the more liberal legislation based on a conviction that it was needed. I don't think he was ever one to slight the elderly in any way. If he thought he could help the elderly then he was pretty much for it, even though it might have a liberal stamp on the legislation. When he departed the committee to run for president and Javits took over, the cast of the committee was predominately liberal. With Javits swinging the minority to a pretty good extent behind legislation, quite often you would find the sponsorship of legislation very unusual.

The social health legislation--Pell had been a leader in the fight against venereal disease and the American Social Health Association is the private sector group that was pressing this on a national basis, the programs to alleviate or eradicate venereal diseases. They're into the AIDS program now. The legislation that was enacted would be introduced by Javits and co-sponsored by Pell. The reason for that--and this is very unique, to have a Republican in a Democratic-controlled senate be the chief sponsor of a bill and actually having it pass. But this was an agreement that Pell and Javits had worked out where Javits could get some credit for this and in turn would push like hell to fund it. It worked out very nicely and we always had good funding. Lister Hill was very

instrumental on appropriations and making sure we got the money for the legislation. So the venereal disease programs were quite well-funded every year.

G: To what extent was the AMA [American Medical Association] a constant adversary in this particular field of health legislation?

P: Very honestly, I saw very little of them. I don't remember any AMA lobbyists trying to lobby Pell against. Now that's from my limited sphere of activity, but I don't remember anyone from AMA ever tagging us. If there was any kind of a hard push once I joined committee staff I would have been aware of it, I think. They were pretty quiescent. But I'd defer to some of my other colleagues who might have gotten hit harder.

G: Family planning is a health issue in the 1960s. Did the committee become involved with this?

P: I don't remember us being very involved in family planning *per se*. I really don't. I don't remember any particular discussions on it.

G: Did birth control come up as a tangential issue, let's say, in other health-related legislation?

P: Mike, I'm trying to remember. I don't remember birth control as having been an issue then. I think that what was occurring was that very quietly funds were being made available for people in need but I don't remember it. I think it really didn't blossom until the late 1960s as a real issue.

G: How about the whole initiative to place caution labels on cigarette packages and just sort of the rise of this anti-smoking perspective in the 1960s?

P: Yes, that was just starting. At that time I was a fairly heavy smoker and I remember coming out of the surgeon general's office--there was a push on. I think Middleton was down at HEW [Health, Education, and Welfare] at the time. He was heading up the air pollution effort and it seemed to me that he had some influence in that field with the surgeon general. I don't think it became a major issue while I was still working up there. I think it came just a little bit after I departed.

G: The Heart-Cancer-Stroke legislation in 1965 had a three-year program of federal grants. Do you recall this?

P: Yes, I remember Hill was very, very solid on this. I think he was a principal sponsor of it. I think the way the committee viewed it as sort of landmark legislation and there was a very strong push behind it. I'm not sure what the final vote was but I don't think there was too much opposition.

G: To what extent was that legislation a result of lobbying, of Mary Lasker and others--Florence Mahoney [inaudible]?

P: I really don't recall. When Lasker lobbied something, she generally would just go directly to Lister Hill and she had a pretty good nose count on the committee. She knew that if Hill would sponsor it that she didn't really have to go and lobby individual senators in order to get something done. I'm not sure if she was directly behind this but she never approached Pell. She may have done it socially.

G: Any insights on the implementation of the program and how well it worked?

P: Not really, no.

G: The Community Mental Health Centers Act, do you remember that?

P: Yes. And I think--again, I don't remember too many of the details, but I remember discussing it several times with Pell, who is very supportive of the concept. Part of the reasoning was that I think it was becoming known within the medical fraternity or within medical practice that the quicker you could return someone to the home atmosphere, or if you could keep them in the home atmosphere and treat them in that atmosphere, that your success rate would improve substantially, it was felt. Also I think there was a certain humanitarian aspect to it, that the concept of the mental institution was sort of draconian, and I think a lot of people, whether rightfully or wrongfully, felt that way. These institutions are horrors and anything we can do to devise a program that would keep people out of these institutions--or at least not have them in for very long. So I think there was an awful lot of human compassion that underlined that legislative initiative.

Speaking personally, I can remember my aunt being in an institution in Connecticut. I was a very young kid at the time and I was horrified. I saw what that institution was like and it probably was a fairly exemplary institution but it looked to me like it was out of the Middle Ages. So my sympathy would have been automatic on something like that.

G: Was there any particular senator that took the lead on that legislation?

P: I really can't recall.

G: How about the health research facilities amendments, do you recall that, in 1965? Construction grants.

P: I do remember the construction grants aspect of it. I'm not sure if this was directed more toward a nationwide effort or the NIH [National Institutes of Health] facilities, I really don't recall.

G: Did you get involved at all in this whole tug-of-war regarding the focus of the NIH and to what extent it would be pure research versus applied treatments?

P: Through the venereal disease legislation, part of our attempt in the area was to get more applied research initiated. Working with the American Social Health Association, we started by funding the program, and Lister Hill was very, very helpful and instrumental in that. ASHA would develop the kind of program and would go out and solicit researchers and would get the funding through the federal government. It was really very much applied research. I didn't get involved too much more beyond that, but in that particular narrow area, yes.

G: The Health Profession Educational Assistance Act, do you remember that one?

P: I remember it by title, but refresh my recollection.

G: That was one designed to increase the number of students in medicine and dentistry and other health-related professions through scholarships and student loans, things of this nature. So based on the shortage of people in the health professions--one that the AMA apparently opposed.

P: I remember it now that you're reviewing it a little bit. Again, their opposition must have been rather indirect. Quite often the style that evolved with regard to that particular committee would be to lobby Lister Hill, and if you could get him in opposition then your

chances were pretty good that you could knock it off. But if you couldn't get by Lister Hill then it wasn't worth pursuing with anyone else on the committee. But that's--

G: Drug abuse, some 1965 amendments that expanded the federal control over drugs.

P: I don't remember that as having been a very broad issue at the time. I know that the linkage was with alcoholism and Javits was very instrumental in pressing programs to treat alcoholism as a medical problem, rather than as a social problem. I think--I don't know if this was done legislatively. I think probably it was. I think alcoholism was wrapped into one of the health bills where funding would be available through HEW to treat alcoholism as a medical problem. I just vaguely remember drug abuse sort of falling into being linked in that same category.

G: To what extent was the FDA [Federal Drug Administration] a--

P: An active participant?

G: Yes.

P: I'm trying to think of who the administrator was at that time.

G: Jim Goddard.

P: Yes. I really don't remember them as being that active. The activity really stemmed out of the White House. Phil Lee was quite active. Of course he was down at HEW.

G: Do you want to talk about the administration's effort to consolidate some of the VA hospitals and close them?

P: Well, there was very strenuous opposition up on the Hill and a lot of this was just pure politics. I think every member of the House and Senate, if they had a VA hospital in the state or in their district, was going to keep that damn thing no matter what. It's just like

trying to close post offices. There's a really vested interest and you have a constituency and you're going to defend it to the very end. My recollection when that came up was that this was [Ralph] Yarborough's constituency, he was chairman of that subcommittee, and, by damn, there weren't going to be any closings unless there's openly an abuse of the system. I know Pell's attitude about it because there were several facilities in Rhode Island; [he] would defend them until the last drop of blood.

G: Did the administration press for this--

P: I think they started to. I think they floated it as a balloon and started to take a little initiative and then all of a sudden met this mountain of resistance. I'm sure if this were called to President Johnson's attention he would have immediately said, "Can it. It's not going to fly."

G: In terms of the years that you were there, I guess through the Johnson Administration, 1964-65 and the duration of 1966--

P: Early 1966. I left the committee staff I think in March or April of 1966.

G: What was the biggest legislative battle that came up in the Senate committee?

P: It wasn't really a battle *per se*. The whole poverty legislation. There were a lot of days spent in hearings, a lot of grilling, an awful lot of doubt about the Job Corps camps when Sarg Shriver was testifying on that and was being asked, "What will it cost to support each individual at a Job Corps camp?" And he was coming up with something like eight thousand dollars a year. I'm not sure which senator it was, "I can send somebody to Harvard for a hell of a lot less than that," that kind of thing. There's a lot of skepticism about the various aspects of the poverty program. I think the reason it passed at all, in all

aspects was that Lister Hill employed benign neglect and would not stop it although he had certainly the power to do it. I think that Lyndon Johnson most certainly had talked with Lister Hill about it because I couldn't quite imagine the chairman doing exactly what he did without somebody suggesting how it should be handled.

G: He in effect agreed that McNamara would carry--

P: Yes. He basically gave the chairmanship of the committee to McNamara and it was literally the full committee minus Lister Hill. It was called a subcommittee, but in essence it was the full committee. So what could have been a legislative battle--but there was a lot of opposition on the minority's part, not Javits', but [Peter] Dominick and a senator from Kansas. What's his name? Probably is still there. No, I guess I'm thinking of Winston Prouty, Vermont.

That's very funny because Senator [George] Murphy was on the committee at that time, and there was a little bill called Captioned Films for the Deaf and Murphy was the star witness on that in support of the bill. Pell had introduced it and Pell was very strongly behind it. The people of Gallaudet College would always be called on to come and testify. Then the hidden support blossomed forth in Murphy who was slightly deaf and had seen one of these machines at one point using captioned films and thought it was a great idea and just came out in strong public support of it. And the thing went through like a greased pig.

I've been trying to think of any--and what I will do is I have a couple of old files to check out.

End of Tape 1 of 1 and Interview I

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