INTERVIEW I

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INTERVIEWEE: GEORGE A. SILVER

INTERVIEWER: Molly Malone Chesney

PLACE: LBJ Library, Austin, Texas

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C: Dr. Silver, first I'd like to know about your background and how you came to be deputy assistant secretary for health and science affairs.

S: I had been working for fifteen years as the chief of social medicine at Montefiore
Hospital. In that capacity I had had the advantage of working within an institution, a
hospital, that wasn't ordinarily connected with policy efforts for the community. But
Montefiore was an unusual hospital for a lot of historic reasons that we needn't go into.
So in my capacity as chief of social medicine I had responsibility for a prepaid group
practice and for an extensive home-care program for the chronically ill. And for an
experimental program in social medicine called the Family Health Maintenance
Demonstration, whose aim was to identify those aspects of preventive services that would
be useful in addition to comprehensive medical care. Beside that, I was teaching and
trying to research on the side in community efforts with the prepaid group practice and
home care. So I was pretty busy and I published a great many things, and I was busy
speaking and working for Medicare and national health insurance and trying to exploit
the idea of a better system on a prepaid group practice base that might become a national

health insurance program. So I was pretty well known for my efforts in that direction then because I was essentially one of the speakers from the academic side who had experience with the development of programs and who had these policy interests in the health field. That's one of the reasons why I would be known.

The second reason was that when President Johnson appointed Mr. [John] Gardner as the secretary of Health, Education and Welfare [HEW], it was with the understanding that the department was going to try and become as significantly related to the problems in those fields and the exercise of developments in that field as the Department of Defense had been with respect to the development of the economy and efficiency of the defense. We would become as devoted to the idea of economy and efficiency in domestic affairs. That was Gardner's objective. So he had hired Bill Gorham from the Department of Defense to be an assistant secretary for evaluation and policy, and he had hired Phil Lee to be the assistant secretary for health and scientific affairs. There hadn't been any assistant secretary for health before, there had only been special assistants to the secretary who were really more or less advisers, but didn't have any line responsibility. Gardner was trying to put these together; you'd have a policy unit in his office under an assistant secretary--it would be related to the line, the surgeon general--and the two together would then develop programs and policies for health in the United States.

So Phil, as the first assistant, he had no help and he had very few slots, very few ways of getting into doing his job and he needed help. He needed someone who had both the academic background for theoretical concerns and some practical background in the

development of programs. So he invited me to leave Montefiore and to become his deputy as assistant secretary. I was glad to do it, despite the fact that it meant a substantial cut in salary and a move from a place where I had been established for fifteen years, where my children were going to school--and I still had one daughter in school. But the climate of the times was such that everybody was very excited about the possibilities. It looked like this, for the first time, was going to be an opening into a really national health policy, a national health program, and Phil persuaded me that we were going to be the leading edge of that and that I would fail to do it at peril of being judged never to have lived.

My wife was very uneasy about the need for a move, and we had a beautiful location. Anyhow, I did it. So that's the background on how I got to be there. When I went down to be interviewed by Wilbur Cohen, whom I had known more or less casually before that because of the Kennedy campaign--I had been co-chairman of the health plank group that was organizing for the Democratic platform. We met several times in Washington and I knew Wilbur. When I went to be interviewed, we just chatted casually about what he thought I was going to do and I told him that now we were going to change the world. And he said, "Well, slowly, but do it." So I said I would.

After that he used to tease me a lot about that conversation and say I was the resident intellectual. It was very flattering, and, of course, it wasn't even true because he was the resident intellectual who did most of the thinking and most of the very clever analysis of what needed to be done and how to do it.

C: Did you ever get to meet LBJ--to meet the President?

S:

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Yes. One of the first things that happened was that practically the first or second day I came to work, before we even moved down there, we had meetings in [Special Assistant to the President Douglass] Cater's office where we were working on aspects of program development because we were very concerned about what was going to happen when Medicare went into effect. The law had passed in 1965, and it was to become effective in July of 1966 and this was now Thanksgiving of 1965. There was a lot of worry and concern about whether the southern states would accept the dictum that they had to observe Title 6 of the Civil Rights Act and not discriminate any more about admissions and not discriminate anymore about staff privileges for doctors; there were suits pending and so forth. And the southern hospitals were saying, "We give medical care and if we can't do it the way in which we know best then we probably aren't going to be able to do it at all." There was a lot of question in everybody's mind. So we had meetings about getting this done, and I did a lot of traveling and meeting with organizations and so forth.

In consequence, we had a lot of ideas about what we were going to do and how we were going to do it. We never had to do it because they did eventually cave in and the hospitals did agree, and to a considerable extent it was mostly agonizing over the telephone and agonizing at the meeting, but in the event it turned out. So we had a session at the White House, an invitation for the signing of bills and so forth. Cater introduced me to the President and all he said was, "Welcome aboard." Then I met him at various other occasions at the White House after that, but I never had any opportunity to talk with him directly. We had a lot of conversations about what we were going to do about the black community. I was responsible for a long time within the department for

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what was called the Mississippi Project, which Vice President [Hubert] Humphrey had inaugurated where every cabinet office is going to put up a certain amount of money and some new policy directive in order for Mississippi to become a model state of what could be done. I guess you must have that somewhere.

- C: Well, we have done a series on the Head Start program.
- So I was put in charge of trying to move HEW and the health aspect of the Mississippi Project, and Lyle Carter was riding herd on me on that. So I got to make proposals, one of which was that the federal government should--in conjunction with the doctors organization, the black physicians organization, the National Medical Association--develop a variety of projects, one of which might be a group practice center and another of which we hoped might be a nursing home project. We had a meeting in the White House at which the black physicians, the representatives of the black community, representatives from the cabinet, HUD [Housing and Urban Development] and HEW met with the President. But that already was fairly late and of course with the war and the President's decision not to run again, that projected movement did not go very far. We did try to--we got some things going [inaudible].
- C: This is 1968 then after he had already announced--
- S: No, it was before he announced, but I think he was already preparing.

So I did meet him several times, but always in off-hand, official [ways], not any social conversation. I heard him make a lot of his comments and whatnot.

C: What was your impression of him?

S: Well, I was very impressed. We were all against the war, including those of us who were sitting around in the White House worrying about what was right. And at the same time we felt that the pressures on him were such that we wished he would do different but we understood why he couldn't do different, and very concerned about how this ought to be done properly. We were all in favor of raising taxes and he wasn't, and we were all in favor of putting a greater emphasis on what needed to be done to maintain the direction of the Great Society. It was a very tough period; you were torn between what you wanted to do, what you thought ought to be done, and what you felt you had to trust him to do.

My impressions of Johnson were all favorable. He was very earthy with his language, very knowledgeable and very acute and responsive, and all the things that I've read about later and learned later about the kind of person he was and so forth, they weren't obvious or evident in any of the contacts. I didn't have those feelings at the time. Whatever I have come to recognize as being a man who's made up of a lot of different parts, at that time he seemed to be a very giant figure with a lot of, not only power, but a powerful way of getting things done.

- C: Did you form a different impression being able to see him in the flesh, as it were, as opposed to what was being projected on television around the country?
- S: Yes. My wife would say the same thing. We'd go to the White House receptions and go through the line and meet with him, and when he shook hands with you, it wasn't just the diplomatic maneuver turning you on to the next person, he was glad to see you, he said.

- Whether it's true or not is another story. But that's the impression. He was a very warm person.
- C: Did you ever get to meet Mrs. Johnson?
- S: Only once, and that was in one of those lines, not in any other way.
- C: What was your main contact with the White House then? Was it through Cater?
- S: Well, Cater--I had to deal with Califano--
- C: With Joe Califano.
- S: --but basically most of the work was done through Cater. Then there was a young man, whose name escapes me now, who worked for Califano, with whom I had a lot of dealings--.
- C: Bowlen? Does that ring a bell?
- S: No. Maybe if I looked through here I'd find his name but I can't think of it right now.
- C: So you were brought in--
- S: I arrived at Thanksgiving of 1965.
- C: Did you come right as deputy assistant secretary? Or were you brought in as a consultant?
- S: I was brought in as a consultant because they had to go through a full field investigation and that took a little while.
- C: So you were working for Dr. Lee. Were you put right into designing legislation?
- S: Exactly. Immediately.

- C: So when you came in 1965, Califano had just gotten there in July or August, and I think that the task force had first been organized under Bill Moyers. Were you working with the task force on health? Did you have any relation--
- S: Input?
- C: Yes, into the task force?
- S: No. I had dealings with the people. When I came in there was a survey going on there.

 A consultant had been hired on organization and reorganization of the Public Health

 Service and I worked with that committee for a while. That was John Corson who was in

 charge of that. So I had contacts with the efforts to remodel the Public Health Service.

There was also Cater's effort to pull together people who would design some of the approaches to change in delivery of medical care services. So I became liaison with OEO [Office of Economic Opportunity] because OEO had this program of community health services. The Public Health Service itself was very concerned about whether this wasn't taking away into another department of government action that really belonged in PHS. So there was a lot of tension in the air and I was sort of in the middle trying to bridge it.

- C: Who was your main contact in OEO?
- S: Lee Schorr and Sandy Kravitz. In the Public Health Service I worked with the surgeon general's office, and that was Bill Stewart.
- C: We have had [an] interview with Dr. Guthrie, Eugene Guthrie. Did you know him?
- S: Well, he was deputy to--Guthrie was a very good man. He was very tough, an old-time commissioned officer who was Bill Stewart's deputy I think.

- C: So you were mostly involved in the design of the legislation and thinking up programs, the creative end of--?
- S: To an extent, yes. To another extent, I was also charged with carrying out some of the policies like, for example, with minorities. The Poor People's March was coming to Washington and we were alerted as to what kinds of problems there were going to be, what their plans were. Because of my relationship with OEO and Marion Wright Edelman at the time--she wasn't married yet--Marion Wright was busy with helping to organize and direct the Poor People's March. So the job was given to me with Wilbur's knowledge and consent to write or to prepare the questions that the representatives of the Poor People's Campaign--different representatives--when it came to different cabinet offices and make demands, which the cabinet office was then supposed to respond to. So Marion gave me the responsibility of writing and preparing the questions that the poor people were supposed to ask.
- C: The questions or the demands?
- S: Demands. I wrote them as questions; they became demands.

So I wrote the demands everybody asked, and then Wilbur said, "You wrote the demands, now write the answers." So then I was responsible for trying to prepare what would be our responses as well and [I had] to be very careful not to say we were going to spend a lot more money, because we weren't.

So in that connection I was responsible for discharging policy. With the Mississippi campaign I had to go to Jackson on a dozen occasions and organize the integrated group of doctors, black and white, who would then meet and make a decision

about what kind of program we were going to do. I brought with me a promise that we would spend X million dollars--it turned out to be a lot less in the event, but that was what I was supposed to do--and tell these doctors that if they would work together the money would go through them for patient care. We developed an extensive prenatal program by putting money into the Department of Obstetrics at the medical school and they trained midwives and brought the high risk patients into the hospital at Jackson.

Well, see, the pre-existing situation with respect to childbirth in the heavily black areas of Mississippi was that in counties like Leflore and Washington and Issaquena even if there was a hospital, that they wouldn't admit black patients. As far as delivery was concerned, mostly they were untrained black midwives, granny midwives, who were responsible for the births. The infant mortality rate in Mississippi was very high. What we did was prepare a program whereby we would train the midwives who would then make visits in the counties and encourage prenatal observations and care, and if they were high-risk, if they showed dangerous symptomatology in the prenatal services that they would be brought in and deliver in the hospital at Jackson. The obstetrician who was in charge of the program would train the midwives, look after the patients in the hospital and this program for Mississippi would pay the bills. And the physicians who participated in it would be paid, black or white.

So it turned out to be a very successful program. In the event, the state of Mississippi eventually took it over and the infant mortality rate was reduced even though the hospitals in Washington and Laflore County still refused to accept the black patients. I don't know whether they do to this day.

- C: Now what was the legislation under which that program became possible?
- S: Well, it was essentially the Public Health Service mandate for state cooperation. That there were funds available for grants to the states for specific projects under comprehensive health services.
- C: Was this part of the Partnership for Health?
- S: Partnership for Health. That's how the money could be made available to the states, for these special projects. There was a section of the act that permitted funds to be made available for special projects.
- C: Were you at all instrumental for lobbying for that bill to be passed?
- S: No.
- C: That wasn't your job at all? You just had to make it work when it came down.
- S: That's right. There were a number of bills that resulted from what had been a health plank in our platform in 1960 when Kennedy was running, and part of that was the idea of a planning action for comprehensive health and the regional medical programs, which was [Dr. Michael] DeBakey's contribution. He was co-chairman with me of the platform. So DeBakey's contribution was the regional medical programs part of it, and we had to implement both of them.

The comprehensive program was much easier to implement than the regional medical programs because there was a lot of resistance from medical schools, from people not in the medical schools but the medical schools were trying to take over.

Because they were run through region, there was very little that was being done at the national level. Mostly it was regional liaisons that did the job.

- C: Now when this was passed, the Partnership for Health legislation, they rearranged how they gave out the money, they started giving the states block grants--
- S: They didn't increase the money.
- C: They didn't increase the money; they just had consolidated all the small program grants and formula grants and put them into a big state block grants. Is that correct?
- S: Not exactly. But that was the intention. What happened was, there were many things, small things, for which states had been getting grants--TB [tuberculosis], VD [venereal disease], syphilis, nurse training, so forth--and this was put into a block. But maternal and child health still remained within Title 5; that wasn't part of what was given to the Public Health Service. See, at that time in 1965 the Public Health Service still did not have control of Child Health Services, which were the children's bureau. And the children's bureau funds came out of the Social Security Act, out of Title 5 and was mediated through the Ways and Means Committee, whereas the Public Health Service came through another section of the act and was mediated through the Interstate and Foreign Commerce [Committee]. So you had different secretaries, different congressmen--Wilbur Mills on the one hand made his own decision about child health grants and [Congressman Harley O.] Staggers, on the other hand, made his decisions about public health grants. So they weren't combined until Nixon's administration.

See, up until--Nixon was the one who abolished, actually, the children's bureau. I mean, he retained it, but he appointed an assistant secretary for child development and that was supposed to be where the children's bureau was; it was no longer part of HEW independently. The medical instrumentation for Title 5--there had been a medical

director as the assistant director in the children's bureau--was moved over into the Public Health Service under state services or whatever the organization was called by Nixon and then transformed it. It was moved down, actually, in the hierarchy another level so that children's interests and children's concerns became less visible.

- C: So the program you're talking about in Mississippi, the maternal and child health care where you would train the midwives, that was coming through Wilbur Mills' committee?
- S: No.
- C: No, that was coming through Staggers--
- S: That was the whole point. We were able to do that because we had the authority in a section of the comprehensive health planning act that would allow us to make grants to the states for whatever purpose. We just made it that purpose. They could then use their Title 5 money in addition if they chose to, or if they were already using other services that they wouldn't have to dilute their other services in order to carry out this plan.
- C: Now that was Staggers' committee then.
- S: Staggers was Interstate and Foreign Commerce. It was a very simple kind of law-making time. That's one of the reasons why we could get forty bills through the Congress in three years, because in order for us to come to terms with the department and the White House and the Congress to get a piece of legislation, there were really only half a dozen people that had to be involved. Lee and Silver and Cohen would have discussions with Cater and Califano, or Califano might not even get into it. You go through and Cohen would put his imprimatur to begin with and Phil would say, "Well, you know what we're going to do." So Cater would say, "Silver, write this up."

Then we would have a proposal as to what we wanted the law to be and then there would be two people in the Congress that you would have to talk to. You'd have to talk to Jim Menger, who was the legislative aide to Staggers or at least to that committee, and then you'd have to talk to Bob Barkley, who was the legislative aide or the administration assistant to Lister Hill for the Senate. And Menger would talk it over with his principals and Barkley would talk it over with his principals and then we would get together three or four us and we'd say, "You could do this. You can't do that." And you'd have a proposal; then you'd take it to Sidney Saperstein, the assistant secretary for legislation, and he would make a bill out of that. Then the other parts of HEW, Bill Gorham's shop--he had a health planner--and [inaudible] shop, and they would look it over and make some comments. That would be the law, see.

Now you can't do that anymore. Every congressman who is on a health committee or subcommittee has got a legislative aide for health and each of the committees has a committee on health, so there may be as many as two hundred people in the Congress who have to go over every piece of legislation. And then in HEW now, there are maybe fifty people who are in health planning and resource development who have to [be] concerned about what HEW would do. Then in the White House there's a whole domestic policy group. So there may be hundreds of people who have to look at every piece of paper and all of them are looking to see--someday they want to be college presidents or whatever, so they always have comments and they always have criticisms and you can't get anything done.

C: Did you deal--Ralph Hewitt, I believe, was--

- S: Wonderful man.
- C: He was the one in charge of legislation at HEW.
- S: Right. He was assistant secretary for HEW. Very good man.
- C: So did you ever testify before these committees?
- S: I did. I testified on a number of occasions. The most significant time was when I had to testify on hunger because OEO had published the booklet about how terrible the situation was in a thousand counties and there had been doctors from the northeast who had been through South Carolina and Georgia and had brought back terrifying stories of what it was like. We had information from the Indian Health Service that kids were being admitted to the hospital in [inaudible] city who were suffering from Kwashiorkor, diseases you only saw in Africa and so forth because they were such terrible nutritional deficiencies in various parts of the state.

So I was assigned to a liaison with the Department of Agriculture to see what could be done about improving nutritional status and what needed to be done. I worked on the proposals and projects and so forth. Of course, agriculture was under the same kind of restrictions as every other cabinet probably, not to spend any more money. The question was, what could you do? And for how little money would it take to do it in order not to have so much in the way of criticism about what was happening in the country? So I was responsible for pulling all that together. So then when Congressman [William Robert "Bob"] Poage, P-O-A-G-E--Texas--he was holding hearings on this. He was very skeptical about OEO's claims about hunger in America. So he wanted Secretary Gardner to testify and Gardner told Wilbur to take over and Wilbur told Phil, so Phil sent

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me. So I had to go. They all knew what sort of a person Poage was and they knew it was going to be a pretty drastic occasion, so they thought I should take the rap.

C: I see.

S: So I made my pitch and I told them what we had found and what we were trying to do and what the problems were and so forth. He said he didn't believe a word of it. He said, "What do you mean by hunger? My wife's hungry three times a day, is she going to be eligible for federal support?" He went through the whole bit about how you make all these things up and you guys stood up there-- And anyhow, he gave me a hard time. Then I had to come back a couple of times.

And I testified on other things. I testified on flammable garments and why it was necessary to impose restrictions on manufacturers. There were a lot of complaints about that, but we managed to get that. I testified on transfer of responsibility for drug abuse controls to the Department of Justice. Then I had a lot of interaction. I didn't actually have to testify, though, because Wilbur--the chairman of the House Foreign Affairs Committee demanded that Wilbur come; it was too important. Wilbur had wanted me to go but he was afraid of this congressman from Brooklyn who was looking every which way to assassinate the State Department and Wilbur couldn't afford to give him an opening. So I didn't go. But I wrote the material for it. It had to do with the transfer of funds to a hospital in Yugoslavia. They were trying to build a hospital with PL-480 money and there was no way that this money, which was supposed to be devoted to other purposes, could be used for capital constructions and cash.

At any rate, it's very complicated business. I had to be liaison with the State Department to get the material signed off because Gardner didn't want to give any money to this project, even though it was going to come out of PL-480 money and HEW, because Congress has to appropriate PL-480 money just like it appropriates other money. So this was HEW money and we had to justify using it abroad and Gardner didn't want to testify for that because he didn't want the department to have any kind of interest. He said, "We're a domestic department. Let State Department testify for it." The State Department said they didn't want to go before this particular congressman for whatever reason. So it took a bit of doing and eventually Wilbur testified and they got the money and they built the hospital.

- C: So you had liaison with OEO and the State Department--
- S: And agriculture, with Charlie Haar in HUD, because of group practice facilities, which we were trying to encourage. See, Wilbur was tireless in his campaigning for any goal but he was always satisfied to build a piece at a time, what he called his salami tactics. So we were hoping to develop a pre-paid group practice for the country as a model for organization and cost control, but the AMA [American Medical Association] was adamantly opposed, the Congress was not about to pick up that kind of legislation. They didn't until 1972, as a matter of fact.

But Wilbur said, "One piece at a time." The first piece was to make it possible for doctors who wanted to form pre-paid group practices to be able to borrow money at low cost for a long period and build facilities. That was the beginning. That's the way Wilbur started everything; he started with research facilities and then put money into the

medical schools for research. Hospital facilities and then money to the medical schools for education. So this was to be money for facilities and then eventually it would become money for support of group practices. So I worked with Charlie Harwin and Brownstein, the HUD people; I worked on that.

So I had all kinds of interesting experiences.

- C: You certainly did.
- S: I didn't work with transportation, I didn't work with commerce, but I did work with HUD and I did work with OEO. I enjoyed it very much.
- C: What do you consider your biggest triumph when you were at HEW? What do you consider as the most important contribution?
- S: I haven't thought of that. I'd have to give it some thought. I think that mostly we were so anxious for it to be a kind of teamwork--Phil and I were like two faces of the coin, and I never felt that I did anything; I felt that we did it. I think that--I don't know, I can't say that I thought anything was a real triumph. I feel that there were things that I feel were defeats that we didn't have enough time--1965 to 1968, didn't give us enough time. We tried to break down old barriers, the way in which the commission service worked in PHS and we succeeded, but we never quite got to building it up because we weren't there to build it up.

So we may have made a hole where there shouldn't have been a hole. We wanted to promote greater liaison between the Medicaid program and Title 5, the children's program, crippled children, and OEO and neighborhood health centers and the Public Health Service to try and make a unified approach where there'd be just one government

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- office. One program office that would be responsible for all the things that go into the provision and we never quite succeeded in doing that. But you know, if you consider it a triumph, we laid out a path or a direction. That's about all I would want to lay claim to.
- C: Looking back after twenty-five years or so, what has remained? Do you see any traces of what you all did back then?
- S: Well, I see a lot of bad things remaining because we weren't tough enough in maintaining a lack of compromise. We allowed the Medicare-Medicaid legislation to carry with it an explicit and implicit requirement that medical practice should not be changed and we want to leave everything the way it is. Well, we left everything the way it is and that's part of the reason there's so much inflation now. We should have been tougher and meaner and fought it out without a compromise and transform medical practice so that doctors would be paid on a fee schedule and that there would be a limit on how these sums were paid and so forth. We didn't do that and I think we're paying that price now.
- C: I read, I think, in one of your articles that I found about how you had focused instead of on delivery, on cost.
- S: That was a big mistake.
- C: You were talking about Wilbur Cohen's attempt to get this second deputy secretary.
- S: You know that story?
- C: No. You were telling me. I knew you were asking and I was wondering if you would like to tell your version of it, what you think was going on.
- S: I had no access to the documents so I can only tell you what I understand to have been the case. There was a lot of discussion and argument, actually, within the department and

with our consultants, various liberal, radical and conservative consultants, about whether it wouldn't be worthwhile to have a secretary of health, an independent department of health. Gardner said that he thought it would be a good idea, but Wilbur thought that it wasn't a time to take Congress on this way because it would lead to a very exacerbating debate. He thought that there might be something you could do now in part, in his usual tactic, to put off the eventual development to a time when it wouldn't be so contentious. So his thought was that he would ask the Congress for an additional under secretary so that he, Wilbur, would be administrative under secretary and then there'd be an under secretary for health. And that wouldn't be in the legislation; the amendment that he would add to some piece of legislation was going through because this was the typical way of hiding something that you didn't want to have a lot of discussion about.

So we had just asked for another slot for an under secretary. There'd be two people, because it's a big job and so forth. There probably won't be any objection to it. So there was a bill--and I don't know which one it was--that had already been considered by the House and passed, but which was not being considered by the Senate. So he wrote the amendment, he talked with Barkley; Hill agreed and it was submitted as part of a bill into the Congress. Now somebody found out about it or maybe somebody leaked it deliberately. Whatever it was, the fact that such a piece of legislation was in process and that it would lead to the creation of an under secretary of health who would have all the power that Gardner had but for the Health Department came to the ears of people who had a great interest in whether this passed or not, including the AMA. But two people particularly took issue or attempted to use their knowledge as leverage for getting

something that they had wanted for a long time. The lobbyists for the National Association for Mental Health, Mary Lasker's outfit--the lobbyist was a very charming reporter from Kansas who's name was Mike, and I can't remember his last name now.

- C: It begins with a G.
- S: Yes.
- C: I can't think of it either. I want to say Goram, or--
- S: No, not Goram. You never interviewed him?
- C: No, I don't think so. But I know I've run across his name in research on Mrs. Lasker.
- S: Gorman, here it is.
- C: Mike Gorman.
- S: So Mike heard about this and he came to the Secretary and made his demand which was that if there was an under secretary he wanted an assistant secretary for mental health.

 This would take them out from under the NIH and put them on a level with all the other people--and put mental health on a level with all the other activities in government. And Gardner said to him, as I understand it, that he wasn't [in a] bartering position, that he wasn't going to make any promises in advance because this made for enormous difficulty in the future. Every piece of legislation would then be challenged that way. He said, "No, you'll just have to take your chances that you can depend on me to do what's right."

Then Noble Swearingen who was the PR [public relations] man for the APHA [American Public Health Association], he came and demanded that the under secretary for health should have a public health degree, and the AMA wanted him to be sure he

was an MD. And Gardner said the same thing to each of them, "I'm not going to promise you anything and I don't see that it would be useful for the future of the department if it were known that anytime we wanted a piece of legislation passed we promised somebody in advance." So the AMA apparently didn't take any action at that, but Swearingen and Gorman made common cause and they went to the chairman of the House Committee on Government Operations, whose name also escapes me, but he was sort of a miserable conservative from Michigan. They told him that Wilbur Cohen was pulling a fast one, that he was running a piece of legislation through the Congress that had already been through the House so they wouldn't even have a chance to observe it--and it was his bailiwick, government operations. Here they were going to transform government operations and he didn't even know about it. So he called Lister Hill and he told Lister Hill that there was going to be hell to pay if he tried to pass a piece of legislation that had not been considered by government operations. Then he called Staggers and told Staggers that they had bypassed him as well. Staggers, of course, went up in smoke.

So between the three of them, they called Gardner and Hill said, "That bill is never going to go through the Congress." And Staggers said, "If you don't withdraw it, there isn't going to be any appropriation for HEW next year." So the bill died and there was no under secretary. The real question is whether this was one of Wilbur's clever maneuvers knowing that it wasn't going to get through and knowing that he didn't want any argument about an under secretary of health at this time, whether he didn't leak the information himself. That's what I want to know from the correspondence.

C: That's a great story.

- S: Well, he was very capable of doing it and politically it was a perfectly understandable move. He wasn't going to fight it out. That's what I'd like to know. Now it may very well be that he was taken by surprise like the rest of us were; we were really banking on it. We were so admiring Wilbur because he was so clever at getting it through the Congress this way, and very angry then--Gorman was very offensive about it. To Swearingen it was all in a day's work.
- C: Just business.
- S: He really wasn't mad at anybody, but Gorman was really furious.
- C: Did you have any other run-ins with the health lobbyists? Were they helpful to you?
 Mary Lasker and Florence Mahoney and that bunch?
- S: No. Well, Florence became a personal friend. I spent a lot of time at her house, and she and my wife had a lot in common about blue and white china. Well, I had met Florence, you see, because that's where the meetings for the health plank were in 1960. So I had known her from then on and she was very friendly with Phil and with me, and we spent a lot of time at her house. But, no, they weren't really helpful; they were busy with more important things than dealing with deputy assistant secretaries. They had a lot on their agenda. They had senators and congressmen. Florence was a very gifted manipulator. I haven't seen her in a couple of years.
- C: I hear she's doing really well. I think we had an interview with her last year and she's still holding her own.
- S: They were interesting people.

- C: About Secretary Gardner's leaving HEW--and I know you followed him about six months later to the National Urban Coalition. Do you have anything--?
- S: Well, I had promised to go with him earlier than that, but Wilbur wouldn't let me leave.

 He said, "No more rats deserting a sinking ship. You stay until election [day]."
- C: Why do you think Secretary Gardner did decide to leave?
- S: I don't know. You know, there was a day--I guess it was in February of 1968. We had had a meeting in the White House with the black physicians again and Johnson had been very jolly and saying it was the first time he ever saw a doctor put a hand in his pocket to take money out, because they were promising to put up money. And the black doctors were very jovial and so pleased to be in the White House with the President. Gardner was sitting off to one side. Afterward when we were all set to go and he said, "Do you want to ride back with me?" I said, "Sure."

Tape 1, Side 2

So we got in the car and he told John, "Just drive around Washington a while." So we sat in the car while we drove around and he talked a lot about what needed to be done and sort of encouraged me to think in terms of doing things when this was over. He told me that he was going to do something different now and would I be interested, and I said yes. So not long after that I was visited by representatives from Milbank and the Commonwealth Fund. I had known Milbank because I had been on the board there for so many years.

C: What exactly was Milbank?

- S: Milbank Memorial Fund is a foundation in New York, very prestigious though relatively small. The president at the time was someone whom I had known as a student and whom I had been instrumental in getting involved with the foundation and so and so. He sent a representative and Lyle Carter's assistant, and they talked with me about what could be done if we were going to work on community services directly. So I wrote a paper for them and then they asked me whether I would like to do that job, and I said yes. So I became the health executive of the Urban Coalition when I left HEW. That had been agreed upon six months before.
- C: But Milbank was funding the National Urban Coalition?
- S: No. They funded different aspects of it. We did a research project--Commonwealth Fund did most of it. Commonwealth put up about fifty thousand a year for three years, and that was a lot of money in those days. I know it's hard to think of that now.

Milbank paid my salary, and then in about a year Gardner said that he didn't think the Urban Coalition had too long to live anyway and he was going on to do some other things and what did I want to do when the coalition's job was over. Did I want to do administration? Or did I want to do teaching? Did I want to stay in Washington? Did I want to go someplace else? I told him I wanted to go back into a teaching job and that I didn't want to stay in Washington. Potomac Fever is a sad thing to observe in other people and I didn't want it to happen to me. I got invitations from a number of universities. The Yale people were very persistent, so I took that job.

- C: He discussed this with you first in February of 1968.
- S: Yes.

- C: There is some speculation that he was--a lot about--
- S: He had resigned then.
- C: He had resigned already then?
- S: Well, I imagine so. He was talking about it as if he had.
- C: I've read somewhere that that might have had to do with the fact that his budget was so severely cut in 1967. That when he'd gone down to the Ranch and they were making proposals about the budget that he had just been told he couldn't do this and he couldn't do that, and that might have had some influence on him and his decision.
- S: Well, he was a pretty good soldier, and Wilbur, too. I think that in the discussions that they had and however they must have done it, I don't think that a budget cut was--I think that Gardner had to be disenchanted for other reasons. Among them would be not so much that the budget was cut but that there was less to the education thing than he had been promised and that he felt that more could be done for education even if no more was being done for other aspects. I think it was the education thing that turned him off. For another thing he may have felt that the war had gone beyond where he thought it was worth being involved with. I don't know. He never came right out and said why he had resigned. Did he talk about that?
- C: In his interview he says that it just--I guess it was about January 1968 or so--came to him that as he was attending meetings that people were starting to talk about the reelection campaign and everybody's roles in it, that he had come to the feeling that he--
- S: Couldn't support him.

- C: --couldn't support LBJ for another term. He just didn't think LBJ could hold it all together, is how he put it.
- S: Well, I think that's probably it. I think the budget played a part, but it was because he thought that it was what had been promised that wasn't gong to be kept. It wasn't so much that things were going to be cut. And I think he didn't want to go out and campaign for Johnson. It may have been a personal thing too about how Johnson may have been rougher on him than you can be to a man like Gardner, where there's a very aristocratic approach to relationships. Did that come through in the interview with him?
- C: He just sounds terribly noble to me. At the end I almost cried when I read it because he just comes across on such a plane of optimism, as you said, looking for the good, as you said earlier--"We could do this." And he talked about you all fighting in the trenches together--
- S: Very admirable person.
- C: --and all these bonds he'd formed and everything.
- S: I had a lot of affection for him.
- C: So he had approached you then to go with him to the coalition?
- S: He didn't ask me to go with him. He told me he would be leaving, but he asked whether I would be interested. It was after that the people came to interview me from the foundation. Then it turned out that that's what I was being interviewed by the foundation about. "Would you be interested in going to the Urban Coalition to do this health job?"

 And I said, "Under what circumstances? What would I be doing?" I developed a program for them, which they liked and then we tried to implement it. We had some

good results. The Urban Coalition's project, in one city at least, was a fantastic success--in New Orleans. Jim Singleton, the guy we picked out to run the program for us in New Orleans is now on the city council and he may be the mayor some day. A good man.

Anyhow, Gardner was a great man, and Wilbur was a delight to work for. Even when he was cutting you off, he did it in such a nice way. We had a project--I wrote a project with one of Bill Gorham's deputies, Joe Holey. We wrote a project for comprehensive health centers for children, to be different from the M&I [Maternal and Infant?] and the C&Y [Child and Youth] programs that were already in existence, but [they] would be comprehensive service centers for children. We would do this through a combination of all the monies that were being spent for children in the community in a unified program. We would select sixteen programs, sixteen places in the country--urban, rural, large states, small states, North, South--a little bit everywhere in the country.

We wanted a million dollars a project, so Wilbur was very high on the idea. Then after a while it was submitted as part of the department's proposals for the year and after his discussion with Mills, he said he thought sixteen million was too much; what was the least that we could get along with? So we got together and huddled and talked about any number of things and we decided we could get along with six. So he said, "All right." We went ahead, we had the hearings and everything was going along smoothly. Then came to what they call the marking up of the bill and they went into executive session. When he came out--and we had been waiting for a long time to find out what the results

were going to be--and he threw his arm around my shoulder with a big smile and says, "George, we saved your clinics but you're only going to get three of them." So I was delighted to hear that.

Well, it turned out he hadn't done a damn thing about saving the clinics. The money went for the ordinary--he had saved money for three more M&I clinics and so forth. But he felt in his mind that he had done something more. You know, for a long time I felt real good about that. I felt he had really saved it.

So how are we now?

- C: We're doing great. Some of these stories are just marvelous. Secretary Gardner talks a little bit in his interview about one of the reasons he wanted to go to the coalition was because he'd seen how powerful outside groups could be in getting things done. That he thought maybe--I guess it was compared to what you could actually get done within the government. So I got the feeling that from that he wanted to see exactly what you could do as an outside group really lobbying heavily for something.
- S: Well, that isn't the way it was explained to me. It wasn't the idea of lobbying. The idea was that you would mobilize this constituency of people outside of government to come to some sort of agreement among themselves as to what needed to be done and then, because of popular pressures, do it within the community and get the public purse to help support it. But it wouldn't be so much to use it as a lobby as much as it was to get it to produce an idea which could-- For example, the six projects that I attempted to organize were in six different cities and they were to represent a unified effort by the public and the private sector in the community and by the industrialists and the public officials and

the popular groups in the community, those people represented a consumer interest. But they would all be represented in a coalition that would make a decision about what needed to be done. I wrote a pamphlet with the help of a committee that I brought together called the Prescription for Action, which would give communities ideas in areas that they might be interested in, you want more access to medical care, you want more services and medical care, you want environmental control, we want to train more people for the profession. What are the things you're interested in doing? You select one of these things, set up a coalition, devise a way of meeting that need and then go and do it, and ask for federal money to support it.

- C: Well, lobbying was probably a poor choice of words, but maybe he meant just be more effective than he could be--
- S: What we were thinking--at the time, this was about empowerment, get local communities to make their own decisions, get the trade unions and everybody else, the churches and so forth. When it was possible it really worked, and you can't do that anymore because there's so much hostility among the various groupings that you can't get that kind of cooperation. But at that time it was quite feasible; everybody thought you could do it. They thought you could do it with making for employment, you could do it with housing, you could do it with education and you could do it with health.

And I was supposed to do it with health, and we had good success in El Paso and in New Orleans. We had no success in Providence, Rhode Island; we had no success in Winston-Salem, North Carolina; we had no success in San Diego. We had moderate success in Tacoma. But the big success was New Orleans and El Paso; it really worked.

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I don't know why it worked in those two places. Now I know it was very worthwhile. To me, it was a worthwhile experiment because it demonstrated what Gardner says, "You can mobilize popular action; you have to give it a chance to work." And I still think--and the thing I'm writing down asking for the same things.

- C: Do it on a community level?
- S: Local, state--
- C: I was just wondering if you had had enough or if there's anything you would like to state for the record about this period?
- S: Well, I would like to tell you about Wilbur Cohen's brother. Do you know that story?
- C: No, I don't.
- S: Well, you know, they both grew up in Milwaukee. His younger brother was a stationary engineer in a meat-packing plant in Milwaukee and he decided early on that anybody with the name of Cohen wasn't going to get very far in the United States because of religious prejudice. So he changed his name to Darwin Huxley, believe it or not.
- C: That's great.
- S: And so he's still a stationary engineer in Milwaukee, or at least he was until recently, and he has kids named Huxley. But his brother, named Cohen, became secretary of HEW.
- C: That's a wonderful story.
- S: You like that?
- C: Yes, I do. I like that a lot.
- S: We went to the White House for Wilbur's swearing in at the end of 1968 when Gardner had left and we rode in a car from HEW with Huxley's son. And when he said his name

- was Huxley, everybody said, "Well, what are you doing here?" He said, "I'm Wilbur's nephew." That's pretty great isn't it.
- C: I wish we had more time to talk about some of these programs in greater detail, especiallyMississippi and some of the civil rights aspects.
- S: Well, right after I left, I wrote a book about HEW. I tried to get it published, but nobody was really interested. But all that stuff is--
- C: Do you still have the manuscript?
- S: I don't know; I'll have to look. It's a long time ago.
- C: We'd love to see it.
- S: I've written a lot of books that never were published. I'm working on one now that Yale doesn't want to publish. If I find it, I'll be glad to send it to you.
- C: I'd really be interested to read that.

End of Tape 1 of 1 and Interview I

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