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COMMITTEE ON OVERSIGHT AND
GOVERNMENT REFORM

COMMITTEE ON EDUCATION AND LABOR

Opening Statement of Rep. Dennis Kucinich
Chairman, Subcommittee on Domestic Policy
Committee on Oversight and Government Reform
Hearing on the Direction of NIEHS
September 25, 2007

Good afternoon.

Soon after becoming the Director of NIEHS on April 4, 2005, Dr. David Schwartz set in motion a new set of research priorities for NIEHS, which he articulated throughout his tenure in forums like his Director's Perspectives Columns in EHP as well as the NIEHS 2006-2011 Strategic Plan. A primary goal was to shift significant resources toward research that was clinical in nature and was focused on discoveries that would contribute to treating or curing disease once the patient was already afflicted. There was also an effort to shift resources away from projects or programs that represented anything other than scientific research.

The new plan was fairly well received in the scientific community. Legitimate environmental health research needs would be filled and innovative approaches would be embraced. Dr. Schwartz's own research was highly respected. His reputation as a top notch scientist was translated into a strong research agenda which few would argue with – unless the consequences of implementing it were too great. Unless the trade-off was too costly.

That is exactly the problem we're faced with today. NIEHS does not have unlimited resources, and Dr. Schwartz's new direction forced cuts in the traditional mission and role of NIEHS in researching and protecting public health.

It should be noted that Dr. Schwartz is not a witness today. Dr. Schwartz departed from NIEHS when it became known that an internal investigation was under way into significant charges against him for misconduct, conflict of interest, waste, and mismanagement. This Committee had opened an investigation into Dr. Schwartz's management practices months earlier, and several other Congressional investigations were also in their beginning stages.

Dr. Schwartz is officially on temporary leave, though I don't know if anybody seriously believes that he will return as Director. The hearing today does not concern his alleged misconduct, however important I

believe that is. Rather, it will explore the programmatic direction and policy choices Dr. Schwartz made as Director and try to ascertain whether NIEHS' new management intends to sustain them in Dr. Schwartz's absence.

The first question we will explore today is; At what cost has come Dr. Schwartz's new direction for NIEHS? What are we losing by shifting resources toward new endeavors and, in so doing, targeting other areas? Let me clear that this is not just a funding question – several management decisions have also reflected a devaluing of these key areas through restructuring and weakening leadership of certain initiatives. The second question is this; should the new NIEHS research direction and priorities, as set out by Dr. Schwartz, continue?

The Subcommittee has performed its own analysis on NIEHS' new research direction and priorities based on information provided by NIEHS at our request and from information provided by informants and verified by staff. We found the impact on public health to be significant, with tangible effects on people's health. As suspected, there were funding cuts to preventive research, to outreach and education, and to long-term research. There was also a neglect to fill leadership positions of programs representing those interests like in EHP and the NTP. There were efforts to change the direction of children's research by stacking a review panel. At the same time, there were several new initiatives, mostly clinical in nature that were expensive by comparison.

Today, we will hear from witnesses about the programs like community involvement, environmental justice, long-term research children's health, and information dissemination and education that have suffered. These are exactly the kinds of areas that are fundamental to public health. If we are to make the research translate into preventing disease instead of trying to treat or cure it after it has already struck, we will need to involve the communities that are affected using proven techniques like community based participatory research. We will need to make deliberate efforts to get the information out there using world class peer reviewed journals like *Environmental Health Perspectives*. We will need to focus on populations that are the most affected by chemicals and other hazards in our environment, like children and communities of color. And we will need to prioritize environmental hazards for regulatory action with programs like the National Toxicology Program.

With relatively meager funding, NIEHS is viewed as one of the most credible sources in the world of impartial information about health hazards in our environment. NIEHS work in the public interest is critical in a time when some malfeasant actors in the chemical industry or plastics industry have the funding to churn out their own pseudo-science, following in the footsteps of the tobacco industry. EHP alone is a pillar of truth. Consider the study released in January of this year showing that of all the studies looking for a possible relationship between mobile phone use and any health problem, those funded exclusively by the telecommunications industry were far less likely to find a link. You may also know that the National Toxicology Program is a target for those trying to use procedural monkey wrenching to slow the listing of certain chemicals as a cause of cancer or birth defects, which was made plain in an August report by OMB Watch.

Another reason for the importance of NIEHS and its mission to prevent disease from occurring is that prevention is far more cost effective than treatment or cure. The reason is a significant failing of the market system: there is little profit in prevention when compared to treatment. There is no Race for the Prevention of Breast Cancer – only for the cure. There are no public health professionals roaming hospital corridors pitching the latest techniques to reduce exposure to PBDEs (poly-brominated-di-

phenyl-ethers) – a flame retardant chemical -- in expecting mothers in the same way that there are drug industry reps selling the latest patented drug.

And yet the reach of NIEHS given this financial disadvantage is extraordinary. EHP is the number one journal in its field and in adjacent fields. Its Report on Carcinogens, the gold standard list of chemicals that cause birth defects and cancer, is relied upon by state, federal and international agencies whose mission is to help prevent exposure to toxic chemicals.

We must keep in mind that NIEHS is a world renowned agency which built its reputation on the excellent preventive and public health work it does. While the agency has not completely abandoned that priority, it has made significant first steps in that direction.

I want to thank each of the witnesses who has taken time out of their own busy schedules and the important work they do in protecting public health to be here today to help explore this topic. I'll note that each of them works with many others who also contribute every day to this noble cause. So I thank each of them for their work as well.