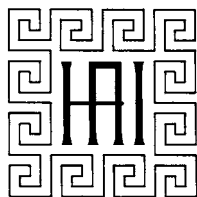


**ORAL HISTORY INTERVIEW SYNOPSES  
REGARDING THE EMPLOYMENT AND PROMOTION  
OF WOMEN AND MINORITIES  
AT THE NATIONAL INSTITUTES OF HEALTH:  
A REPORT TO THE *ADARAND* WORKING GROUP**

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by

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## Introduction

This report contains synopses of five oral history interviews conducted in August and September of 1998 with five current or retired high-level administrators at the National Institutes of Health. They are Dr. Wendy Baldwin, Deputy Director for Extramural Research, OD, NIH; Dr. Philip Chen, Senior Advisor to Deputy Director for Intramural Research, NIH; Dr. Hortencia Hornbeak, Director of the Scientific Review Program, Division of Extramural Activities, NIAID; Dr. Ruth Kirschstein, Deputy Director, NIH; and Dr. Thomas Malone, retired Deputy Director, NIH.

History Associates Incorporated conducted this research project to help the NIH *Adarand* Working Group demonstrate whether the NIH affirmative action process adheres to the Department of Justice post-*Adarand* guidelines of February 29, 1996, pertaining to Federal employment. Each of the above-mentioned administrators was interviewed by Dr. Peggy Dillon, Senior Historian at History Associates, and was asked to share his or her recollections of experiences connected with the employment and promotion of women and minorities at the NIH. What follow are synopses of those interviews.

**Wendy H. Baldwin, Ph.D.**

**Deputy Director for Extramural Research, NIH**

**Interview conducted September 10, 1998, at NIH in Bethesda, MD**

Since she began working at NIH in 1973, Dr. Baldwin said, she has enjoyed a lot of freedom to develop projects, conduct her scientific research as a demographer, and be an administrator as well. Until the past five years, when she moved to the main administration at NIH to start her current position, she worked at the National Institute of Child Health and Human Development (NICHD, where she became Deputy Director), which was just a wonderful place to be. "They were very supportive of me," she said of her colleagues and administrators. "They gave me a lot of latitude. They respected my judgment." For instance, even if her superiors didn't approve one of her research requests the first time, they were willing to hear further arguments and finally approved them. One example was that she wanted to conduct behavioral research on sexually transmitted diseases and was told there were no interesting issues. This was in the early 1980s, before AIDS became a major health problem, and at the time this kind of research was considered somewhat radical, though it turned out to be a good judgment call. One accomplishment from that research was big behavioral research projects on AIDS risk behaviors, which were controversial but ultimately successful. And NICHD backed her all the way, not only in that case but with all the work she did.

Other high-level women and minorities have been hired and promoted at NIH while Dr. Baldwin has worked there. Her predecessor as Deputy Director at NICHD, who later became surgeon general, was Antonia Novello. Dr. Baldwin said she always thought NICHD had a tolerance for and interest in having women in leadership positions, and that the administration knew that women who reached leadership positions were probably going to be pretty outspoken. Speaking for herself, she said she has never felt that being a woman was a handicap or that people didn't pay attention to the issues she raised.

At one point, several women in leadership positions at various Health and Human Services agencies tried to recruit Dr. Baldwin for a monthly coffee klatch to discuss issues about women in leadership positions. She realized she didn't want to participate because the Friday morning staff meetings in Building 1 already met her need to meet with other high-level women (in addition to the men present), including Deputy Director Ruth Kirschstein; Vita Beaven, NIH Director Harold Varmus' assistant; Ann Thomas, Associate Director of Communications; Diane Wax, Associate Director, Legislation and Policy Analysis; Francine Little, Director, Office of Financial Management; Tonietta Lang, management deputy; and Lana Skirboll, Associate Director, Science Policy. Another example is her successor as Deputy Director at NICHD, Yvonne Maddox, who is completely empowered within the Institute. Dr. Baldwin said she didn't know of any women holding high positions at the NIH who are doing so as "window dressing." At NICHD women have always reached leadership positions, possibly because the Institute studies child development, reproduction, and other areas that have historically had more senior women involved. NICHD was probably therefore a little ahead of the curve compared to other institutes.

When Dr. Baldwin was pregnant with her daughter, she worked throughout her pregnancy and told her supervisor, Phil Corfman, a progressive and encouraging supervisor, that she would like to work half-time after the birth of her child in 1977 and wanted to bring her baby to work with her. He replied that of course she could. "If you can't do this here at the Child Health Institute," she recalled him saying, "where can you do it?" So Dr. Baldwin had a crib in her office and nursed her daughter at staff meetings, though doing so was somewhat controversial because some other women wondered why she got such privileges when they had not. Part of the answer, Dr. Baldwin said, is that times had changed since others had their children, and part of the answer was that she had a good working environment--her own office rather than an open or public area--that allowed for such an arrangement.

She said that, historically, the NIH Office of Extramural Research has shown strong support for women and minorities and has provided mentoring to ensure that if, say, a person is in a program where she's the only woman, she has access to other networks within the institutes. One such program was the now-defunct Grants Associates Program, which has been replaced by the broader and more democratic Extramural Staff Training program. Another program has been the STEP forum, a series of open sessions around hot issues that NIH personnel ought to be informed about. If a person is in an institute that doesn't do a lot of mentoring, that's one of the ways to meet people.

In terms of administrators who have helped hire and promote women and minorities, "Ruth Kirschstein is probably the archetypal conscience of us all," Dr. Baldwin said. Dr. Kirschstein's presence as NIH Deputy Director means that women and minorities in leadership positions have always had someone to go to for high-level mentoring. She did the same when she was Director of the National Institute of General Medical Science, helped a lot of very successful administrators there, and has continued to do so. She is probably the key person who stands out. Another such person is retired NIH Deputy Director Thomas Malone. And Naomi Churchill has been wonderful heading the Equal Employment Office because she's brought a good level of intellectual engagement to diversity issues.

Dr. Baldwin said that, based on search committees she has been on, NIH personnel have been very attentive to making outreach efforts to ensure that female and minority candidates knew there were opportunities. Of course, then those candidates have to compete with everyone else for a given position. "I've not seen any reluctance to bring women and minorities onto teams as long as people can say, 'They can really cut it,'" she said.

**Philip S. Chen, Jr., Ph.D.**

**Senior Advisor to the Deputy Director for Intramural Research, NIH**

**Interviewed August 25, 1998, at the NIH in Bethesda, Maryland**

Women and minorities who have risen to leadership positions during Dr. Chen's career at NIH include Ruth Kirschstein, Kathryn Bick, lab chief Martha Vaughan, Luz Froelich, and DRG Executive Secretary Pacita Pronove. There were efforts made to recruit scientists into various administrative positions, but it probably wasn't a broad effort specifically targeted at minorities and women, but rather "catch as catch can." "I don't think there was a great effort made to cast the net very widely," Dr. Chen recalled.

Dr. Chen said he didn't recall exactly when efforts to hire and promote women became more formalized in the form of affirmative action and other policies. He said that Thomas Malone (former NIH Deputy Director) at one point chaired a committee called ECCRA, the Executive Committee for Civil Rights Activities. And Dr. Chen began a Visiting Professor Program to encourage intramural scientists to go out and give lectures at minority or women's institutions. That program was active for several years in the late 1970s or early 1980s, then gradually diminished in usage because NIH received fewer requests for such speakers.

Another program was, through initiation by Dr. Malone, contacts with the Chinese Hospital in San Francisco. There was also an Asian American Health Forum that Dr. Chen was active in for several years. A still-active national minority organization is SACNAS, the Society for Advancement of Chicanos and Native Americans in Science, whose members are very active in promoting advancement in science. Dr. Chen's first significant awareness of the presence of programs to attract female and minority candidates was in 1972, when he was at the National Institute of General Medical Sciences and there were several proactive programs going on. One was the MARC program, Minority Access to Research Careers, and he was able to go on a number of site visits to minority institutions. Another was the M.D./Ph.D. program (MSTP) that was making efforts to bring in more minorities. One NIGMS advisor who was a very active promoter in the hiring and promotion of women and minorities to conduct medical research was Geraldine Woods, who knew a lot of officials at minority institutions.

Ruth Kirschstein has also been a strong proponent of advancement of women in positions of leadership at the NIH, starting with her becoming the director of NIGMS. Since being Deputy Director of NIH, she's been very proactive and she has served on many search committees, in which there has been a concerted effort to seek women and minority applicants. So she's been a very "strong, vigorous, and forward-looking" administrator in this respect.

Also, Dr. Chen's first supervisor after he finished the Grants Associates program was a woman, the late Dr. Marjorie Wilson, who was Assistant Director for Program Planning and Evaluation. She had a great influence on his career because he worked with her

while a Grants Associate, and she later hired him after he finished the program. He worked for her from 1968 to about 1970.

Among the challenges and problems in hiring and promoting minorities was trying to interest minority students in entering science as opposed to some other kind of career. How do you get the information out to them? How do you encourage them to stick with it once they develop an interest? The concept of summer programs, financial incentives, mentors, and developing an infrastructure at, say, the historically black institutions was recognized as something that needed to be developed. So administrators visited colleges such as Tuskegee and Pan American University, which had minority populations. Some of the problem with hiring minorities involves overcoming these cultural barriers, which is less of a problem with women. A lot of minority college students have not thought of going into medical research. In fact, it was an accident that Dr. Chen got into it--he majored in Physics in college and thought he'd go on for a Ph.D. in Physics but was persuaded to study pharmacology after hearing a talk from a professor who taught at the University of Rochester.

**Hortencia M. Hornbeak, Ph.D.**

**Director, Scientific Review Program, Division of Extramural Activities, NIAID**

**Interview conducted August 27, 1998, at NIH in Bethesda, MD**

Dr. Hornbeak said there is an increasing realization at NIH that different perspectives and approaches from a diverse workforce lead to better decisions and consequently better results. Efforts are being made by NIH management to recruit qualified women and minority candidates into senior positions. However, the stability of senior management positions at the NIH precludes numerous opportunities for promoting women and minorities to these positions. The turnover in senior positions is similar to that of comparable research organizations such as medical schools.

When senior leadership positions do become available, they are widely advertised both internally and externally. The vehicles of dissemination of information include the World Wide Web, professional and affirmative action publications and web sites, and functional committees within the NIH.

Vacant senior positions within the NIH have been filled with internal candidates as well as those from the outside. Examples of women and minorities hired from outside the NIH include: Dr. Elvera Ehronfeld, Director, Center for Scientific Review (CSR); Dr. Kenneth Olden, Director, National Institute of Environmental Health Sciences (NIEHS); Dr. Maria Freire, Director of the Office of Technology Transfer, NIH; Dr. Vivian Pinn, Office of Research on Women's Health, NIH; Dr. John Ruffin, Associate Director, Office of Research on Minority Health, NIH; Dr. Margaret Johnson, Associate Director for Vaccine and Prevention Research, NIAID; Dr. Ricardo Martinez, Director of Extramural Activities, NIDR; and Mr. Walter Jones Jr., Deputy Director for Management and Operations, Clinical Center, NIH. Examples of women and minorities promoted from within include: Dr. Patricia Brady, Director, National Institute of Nursing Research (NINR); Dr. Yvonne Maddox, Deputy Director for NICHD; the late Dr. John Diggs, former Director, Division of Extramural Activities (DEA), NIAID, and former Deputy Director of Extramural Research, NIH; Dr. Antonia Novello, former Deputy Director of NICHD and Surgeon General; Dr. Carole Heilman, Deputy Director, Division of AIDS, NIAID; and Ms. Linda Engle, Associate Director for Planning and Outreach, CSR.

Affirmative action requirements have increased the awareness of NIH managers to the value of a diversified workforce. In order to achieve diverse perspectives and approaches, administrators are increasingly taking into consideration the composition of their staff in hiring decisions. Senior managers at the NIH are increasing their efforts to publicize senior positions and to fairly and openly consider women and minority candidates. The results have been positive. Several women and minorities have been hired for senior positions that have become available. Dr. Hornbeak said that from where she sits, the upper management of the NIH is getting the objectives of affirmative action addressed within the organization.

**Ruth L. Kirschstein, M.D.**

**Deputy Director, NIH**

**Interviewed August 24, 1998, at NIH in Bethesda, Maryland**

Dr. Kirschstein recalled that when she first came to the NIH in 1957, she was hired as a pathologist to read slides so as to study and assess the test in monkeys regarding the safety of polio vaccine, at which time she was assigned a civil service grade. The then-Deputy Director for Science at NIH told the man who subsequently hired her that "No woman pathologist was worth that grade." In response, she sent back word to the Deputy Director that she would not work for him, which prompted him to give in (she had another job offer awaiting her, so she could afford to call his bluff). So she did start at the grade at which she was rated by the Civil Service Commission. As for the initial reaction of the Deputy Director toward her being paid at such a high grade, she said, "that's not an uncommon attitude and has not been an uncommon attitude for a long time."

In another instance, when Dr. Kirschstein saw the advertised position for Director of the National Institute of General Medical Sciences in 1974, she mentioned it to an NIH official who said, "Oh, I hadn't thought of you for that [position]." She responded by giving him her curriculum vitae and telling him to think about her application. Two weeks later she got a call from the search committee, was hired for the job, and became the first woman director of an NIH institute in September 1974, a position she held until 1993.

Dr. Kirschstein said minority scientists were almost nonexistent when she arrived at NIH in 1957. One of the factors contributing to the success of her research was the work of a group of highly dedicated animal caretakers and lower-graded technicians (mostly GS-2), all of whom were minority, primarily African American, and all of whom were very dedicated and skilled. One in particular, George Rusten, performed all the inoculations of the brains and spinal cords of monkeys with remarkable precision and taught her most of what she learned about doing that test. Rusten started working at NIH--as a gardener--in the early 1940s and became an animal caretaker who was mostly self-taught. She eventually got him promoted to a GS-11 rank, and said that, although most administrators didn't bother training technicians, she spent hours doing so. She also arranged for promotions for many of her technical staff.

However, Dr. Kirschstein noted, "there had not been much of an attitude at NIH of concern for equal opportunity probably as late as the late sixties and perhaps even early seventies" at all levels of hiring, she said. Consequently, the possibility for advancement among minorities was "limited." That was probably true for women as well in those early days, with some exceptions. For instance, back in the 1930s there were several notable female scientists, including Sara Branham and her protégé, Margaret Pittman. Pittman, who Dr. Kirschstein said was the most amazing person she has ever met, was the first female laboratory chief at NIH (for whom an NIH lectureship has been named). When Dr. Kirschstein arrived, there were several women in other



Institutes, most of whom were biochemists. One was Maxine Singer, now president of the Carnegie Institution, and another was Martha Vaughan, now a laboratory chief. And though there are certainly more women at NIH now, back then they were few and far between and were also slow to be promoted. Dr. Kirschstein said she was turned down twice for a promotion to become a GS-15 during the late 1960s (she got the promotion the third time) because administrators thought at the time that she and her husband combined made plenty of money and so she didn't need the raise.

When she became Deputy Director in 1993, the female scientists within NIH began to meet and exchange information and found that, even with the same amount of post-doctoral experience as their male colleagues, their salaries were considerably below those of their male colleagues. She said she discussed it with NIH Director Harold Varmus and other officials at the Department of Health and Human Services, and those women got retroactive pay to equalize their incomes with those of their male colleagues. Subsequent salaries were equalized as well. Though she doesn't condone such inequities, she sees how they might have occurred, because most of the female scientists arriving at NIH during the 1960s and 1970s were of post-doctoral status and accompanied husbands who were serving their medical draft time. And one could argue at the time that administrators believed that the women's scientific experience was insufficient compared to the men's, though when this perception became pervasive, the argument became a moot point.

Also, this climate of underestimating women has changed since the seventies, and the change has been remarkable. Since Dr. Kirschstein became the first Institute director, there have been three more women to hold that position; a moderate number of laboratory chiefs; and two scientific directors. Administrators at NIH are looking for, and are conscious of searching for, women scientists. One is Susan Gottesman of the National Cancer Institute. Laboratory chiefs and Institute Directors now think about this issue. A moderate number of Institute Deputy Directors are women, two of whom are African American. But finding minorities in the professional group is very difficult, at both the leadership and non-leadership level. Dr. Kirschstein said that during her nineteen years as director of NIGMS, she cultivated two programs targeted at helping minorities become scientists: the Minority Access to Research Careers program (MARC) and the Minority Biomedical Research Support program (MBRS).

Both programs were initiated shortly before her arrival at NIGMS by a remarkable woman, Dr. Geraldine Woods, an African American who attended Radcliffe College, earned a Ph.D. in biology, and devoted the rest of her career to ensuring that there were opportunities for, in particular, students who attended Historically Black Colleges and Universities (HBCUs). Nevertheless, it was a very difficult problem because the best minority students beginning in the seventies and certainly in the eighties were not going to HBCUs. Also, many minority college students go on to become teachers, ministers, or physicians, which are needed in minority communities and which guarantee an income, whereas historically minorities haven't been encouraged to enter scientific fields. So it's been hard--and it's still very hard--to fill the enormous gap.

This has led top NIH officials to continue to try harder. NIH now has a group that includes Dr. Kirschstein that's headed by the Director of NIDR, Harold Slavkin, which is looking to see if NIH can establish an academy on the campus with students who could live in and learn in the laboratories. But filling that gap is going to take a long time. These efforts, which went back to the seventies, have increased the numbers. Yet though the numbers have increased, so have the numbers of non-minority scientists, so that the percentage of all biological scientists who are minority scientists is at most 3 percent. And it's largest for the Blacks, next for the Hispanics, and almost nonexistent for American Indians. Now if one considers Asian Americans as minorities, they do much better. But NIH is still going to work on improving hiring minorities, and it's too important not to continue working on it.

Notable minorities who have achieved leadership positions include Kenneth Olden, Director of the National Institute of Environmental Health Sciences; Dr. Kirschstein chaired the search committee. Others are Jorge Cusequedilla, a Hispanic senior Nuclear Medicine scientist in the Clinical Center; and Griffin Rodgers, an African American scientist (who in 1998 was appointed Branch Chief of the Molecular Hematology section). Notable women include Maxine Singer, a lab chief in NCI and replaced by another woman, Claude Klee; Lynette Nieman, a Clinical Director in the Child Health Institute; and Maria Freire, Hispanic, Director of the Office of Technology Transfer. Also there are two minorities in the Senior Executive Service: John Ruffin, who heads the Office of Research on Minority Health; and Vivian Pinn, Director of the Office of Research on Women's Health.

Women in higher positions have been recruited the same way anybody else is, but whether or not they would be specifically recruited if it were not for some sense of affirmative action is hard to say. NIH now has a policy that all search committees must have adequate representation of women and minorities, and a policy that Institute Directors as well as Associate, Assistant, and Deputy Directors are responsible for Equal Employment Opportunities. So that's part of affirmative action. But in these cases, persons recruited and hired are the best persons for the job. The Deputy Director of the Neurology Institute, Dr. Audrey Penn, was an outstanding Neurologist at Presbyterian Hospital at Columbia University Medical School. The Deputy Director of the Child Health Institute, Yvonne Maddox, was a person who Dr. Kirschstein recruited--and later mentored--as a Ph.D. physiologist from Georgetown University.

**Thomas E. Malone, Ph.D.**  
**Retired Deputy Director, NIH**  
**Interviewed August 24, 1998, at HAI in Rockville, Maryland**

Dr. Malone said that his promotion to leadership positions at NIH was a fairly smooth pathway. "I think that the element of race might have been important in the minds of some people, but I'm absolutely certain that it was based upon my qualifications for these various jobs," he said. "All the way through. I didn't have any problems." He felt that being African American was not an issue in his career--that it neither contributed to nor detracted from his career progress. "I was simply a fellow colleague with everybody else." He believed that much of this success could be attributed to his attitude that, "except for color, I never felt that I was different from anybody else. And I think that has a positive impact on people you come in contact with."

When asked what other minorities and women at NIH have attained high-level positions during his career there, Dr. Malone said there had been many. Among them have been George Brooks, an African American who started with Malone in the Grants Administration Program (a one-year program for researchers shifting into science administration) in the program's first class in 1962, and former Associate Director for Extramural Research at NEI; Marie Ussing Nylen, former NIDR Intramural Program Director and Extramural Program Director; Lois Cohen, former NIDR Director of Extramural Research; Dushanka Kleinman, NIDR Deputy Director; Bernadine Healy, former NIH Director; Ruth Kirschstein, NIH Deputy Director; John Diggs, the late African American Deputy Director of Extramural Research at NIH; Kathryn Bick, former Deputy Director for Extramural Research at NIH; Kenneth Olden, the first African American Director of NIEHS; Ruth Kirschstein, Deputy Director of NIH; Ernestine Thurman, a parasitologist who took Malone under her wing while he was a Grants Associate and taught him all about study sections; and Dr. Ethel Jackson, former African American study section chair. Ethel Jackson applied and got the job; Marie Nylen, Lois Cohen, and Dushanka Kleinman were already working at NIH and when higher positions became available they expressed interest, applied, competed, and were hired.

Others include Judith Vaitukaitis, Director of the National Center for Research Resources (NCRR); Elke Jordan, Deputy Director of the National Human Genome Research Institute (NHGRI); Dr. Bettie Graham (African American), Program Director of Genomic Analysis, NHGRI; Ruth Hegyeli, Director of the Office of International Programs, NHLBI; Patrice Desvigne-Nickens (African American), Program Director of the Heart Research Program, NHLBI; Suzanne Hurd, Division of Lung Diseases, NHLBI; Clarice Reid (African American), Director of the Division of Blood Diseases and Resources, NHLBI; Sue Shafer, Associate Director for Extramural Activities, NIGMS; Clifton Poodry (Native American), Director of the Division of Minority Opportunities for Research; Adolphus Toliver, Chief of Minority Access to Research Centers Branch; Yvonne Maddox (African American), Deputy Director, NICHD; Florence Haseltine, Director of the Center for Population Research, NICHD; and Jane Henry, current head of the Food and Drug Administration and former Deputy Director of NCI.

Dr. Malone said that administrators such as Seymour Kreshover, NIDR Director from 1966 to 1975, were interested in having a representative staff of women and minorities though Kreshover was primarily interested in one's capacity to do the job. He recalled that not once did Kreshover say to Malone that he wanted Malone for a particular position because he was African American. Another NIH administrator, John Sherman (former Deputy Director of NIH), was a champion for inclusive hiring and was the person who spoke with Malone about applying for the now-defunct Grants Associate program. That program always had a fairly good representation of minorities, and there was almost always a minority or female in the group. Because each annual class only had approximately a dozen people, it wasn't an effective way to achieve broad representation at NIH, but it was one of the early programs to bring diversity to NIH, and allowed grants associates to rotate through various institutes. Later on, a program called Extramural Associates brought in women and minorities from colleges and universities for training at NIH; they would return to their institutions with a better understanding of how NIH operates and sometimes became employees or grantees later on. Another important program, started in the 1970s, has been the Minority Biomedical Research Support Program. Many minorities staffed the program, which has prepared a large number of minorities for research careers.

Dr. Malone said he was always very sensitive and committed to the need for NIH to hire more women and minorities in both research and administration. His door was always open to those needing help and he worked closely with those in charge of EEO programs. He was routinely invited to EEO retreats and, in addition to contributing to their deliberations, he would remind them that first and foremost he had to carry out all of the responsibilities of his job as NIH Deputy Director. The group accepted his reminder that he was not the NIH EEO officer.

While Donald Fredrickson was NIH Director (1975-1981), Dr. Malone said, the two men discussed the fact that there weren't enough blacks or women on study sections; Malone suggested drafting a policy for Dr. Fredrickson's signature stating that when new members of study sections were being appointed, Dr. Malone's office would review the paperwork, especially if there were no women or minorities on the slate over a period of time. And if there weren't any, Malone and his colleagues wanted to know why. He said that that initiative alone resulted in a dramatic increase in the number of women and minorities over the years, without sacrificing excellence on the job. Consequently, study sections looked for minority and female candidates where they didn't necessarily do so in the past.

Dr. Malone said that the education and training of black scientists in general, from which to draw on to hire for NIH, has not been as plentiful as he would like for it to be. And that is because "the pipeline is not full." He believes everybody at NIH would like for there to be greater representation of women and minorities and that there's been a strong commitment on the part of people in positions to hire. That has to be tempered with the availability of people who are well trained and have made inroads into research. All these factors have to be looked at when you examine why NIH hasn't had

greater inclusion. But overall NIH has been very sensitive to the problem, and he has seen more and more effort over the years. In general, he said, at NIH the possibilities for the advancement of women and minorities are good.