

B. Institutionalized Children's Protection From Medical Experimentation

CDF is engaged in a number of specific projects in this area. We are participating in the drafting of HEW Guidelines for the Protection of Children Used as Subjects of Medical Experimentation. These will affect the rights of fetuses, abortuses, pregnant women, prisoners and the institutionalized mentally disabled.

CDF will monitor a National Commission established by the National Research Act in 1974 to identify the requirements for informed consent to determine how to protect people not covered under HEW regulations, to investigate research involving living fetuses, and to review the use of psychosurgery.

CDF plans to launch a major study of the use of Ritalin and similar drugs in public schools. Investigations in several school districts will seek to determine (1) the extent to which drugs are prescribed for school children with behavior problems; (2) the adequacy of full medical diagnosis before drugs are prescribed; and (3) the relative impact of teachers, parents and physicians on the use of such drugs.

III. The Right to Health Care

A. Early and Periodic Screening, Diagnosis and Treatment (EPSDT)*, enacted by Congress in 1967, would provide more extensive diagnostic and health services for eligible children. Seven years later, it still has not been implemented in many states. CDF has provided assistance to attorneys filing suits for compliance in several states. It has reviewed and monitored HEW regulations for EPSDT since its inception and sought to inform, and to organize, local groups and individuals about their rights to service under EPSDT.

B. *Child Health*** Although CDF recognizes that the disparities in health care available to rich and poor, black and white, children are caused by many social factors, closing that gap by providing adequate health care for all children is an important CDF goal. Two handbooks are currently being prepared to address the delivery of health services for children and expectant mothers. One will be for policy makers, planners and administrators. It will evaluate health care policies for children, comparing relative effectiveness and costs. A second handbook, aimed primarily at consumers, will collect examples of successful child health care programs. CDF hopes to aid the replication of services that improve the physical and psychological access to services (by providing, for example, transportation, neighborhood clinics and bilingual personnel) as well as their preventive and ongoing quality.

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