

# PROBE

David Zimmerman's newsletter on science, media, public policy, and health.

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\$5

## Out of Africa:

# Genital Mutilation of Women Now Is a Challenge in the U.S.

The American military intervention in Somalia is focusing attention on some of East Africa's less salubrious cultural practices. Besides clan violence, these include the chewing of the amphetamine-like leaf drug called *khat*, and the horrific ritual mutilation of most young girls' genitals — a practice that is called, euphemistically, *female circumcision*.

This it definitely is not (See Box, p. 5).

The U.S. intervention, and the social chaos that has occasioned it, also are transforming some of these African practices into American problems — not just in Mogadishu, but right here at home:

*Khat*, it turns out, can be purchased in Manhattan shops and clubs that cater to East African refugees (*N.Y. Times*, Jan. 11). Much worse, the problems and very likely also the practice of *female genital mutilation (FGM)* — which is the name used by the World Health Organization (WHO) and other health agencies to describe this ritual disfigurement — are arriving in North America.

They are coming with the tens of thousands of Somalian, Ethiopian, and Sudanese immigrant women who already have suffered these practices. Many African parents believe FGM is essential to their daughters' chances of marriage and well-being.

But the opposite appears to be true: FGM irrevocably damages or destroys women's ability to enjoy genital sexual pleasure, women's health experts say. They add that FGM has no known health benefits.

## Problems Found in Schools

In Canada, where the East African migrant wave arrived earlier than it has in the U.S., school teachers and nurses have been among the first to detect FGM problems: Some African girls spend longer in the toilet than other girls because only a tiny opening is left in the scar tissue for urination and menstruation after their labia are cut away and the raw edges stitched crudely together. African women, who may only have been dimly aware of what they had lost while living in their

native, sexually repressed societies, well may feel that loss more keenly in North America — where women are sexually freer and sex is pop culture's coin of the realm.

Many thousands of "high risk" East African women now reside in the U.S., and more are coming, according to psychologist Catherine A. Hogan, M.S., of Ashton, Md. She said by phone that she has started an advocacy group, the Washington Metro Alliance Against FGM.

"This is not just a problem overseas," Hogan says. "This problem is on our doorsteps — it's in the U.S."

## Problems Listed

FGM can have multiple ill effects:

It frustrates penile penetration. It causes pain and suffering  
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## *A Victim's Account*

How does FGM affect a woman's feelings? When social psychologist Hanny Lightfoot-Klein, M.A., asked a well-educated, severely mutilated Sudanese professional woman this question, she elicited this reply:

"[A woman] will have been so scarred psychologically that she is full of repressed rage. I think that you would find that she is unable to feel any pleasure at all, that she accepts intercourse without any desire or feelings. She goes to bed with her husband out of a sense of duty, and tries to keep from him the fact that she really hates the whole business and gets nothing out of it ....

"Some women who are very, very strong live with their ... rage and their inability to love .... Do you want to know what happens to the rage? Perhaps when they get to be older they exercise power over young people's lives. They deprive their daughters and their granddaughters of what they themselves have been deprived of. When they inflict these things on their children, they make another man suffer for what they have suffered with their own husbands."

— from *Prisoners of Ritual*, pp. 122-23.

# Scientific Medicine Found Wanting In Upcoming PBS 'Healing' Special

"Oh, East is East, and West is West ..."

— Rudyard Kipling

A major public television event this season is Bill Moyers' five-part series "Healing and the Mind." It will air Monday through Wednesday, February 22 to 24 (Check local PBS listings.)

We think PROBE readers should sample this series. Parts are vivid. Parts are informative and amusing, particularly a Monday night dialogue in which neuroscientist Candace Pert, Ph.D., of Peptide Research, in Rockville, Md., explains to a quizzical Moyers that our emotions, mediated by neuropeptides, may be the link between mind and body.

But the more important reason to watch the series is because it is seductively anti-medical, anti-scientific, and anti-

rational: The wisdom of the East will heal the West.

*Orientalism* of this sort becomes faddish occasionally when Americans fear they have lost their own way. Some Eastern practices — such as yoga, *tai chi*, and perhaps even acupuncture — may in fact prove usefully adaptable to some limited Western needs. But their driving force, out of ancient and alien cultures, remains inaccessible — and so they are basically useless for most Americans.

A Chinese *tai chi* master tells Moyers (Monday night) that it took him 10 years to find his vital energy *chi*, and 30 years to learn to use it. He demonstrates, dramatically, that he can, with a touch of his hand, jolt a line of his disciples off their feet with his *chi*.

Moyers expresses wonderment at this mastery of a mysterious force, which he suggests is outside science's realm. But he fails to say that medical science has identified vital energy as *electricity* — as manifest in the electrocardiogram.

Finding one's *chi* — the 10-year task — thus appears to this observer, to be a physiological self-manipulation to mobilize, and perhaps even enhance one's innate electrical energy. The 30-year task is to learn to do what an electric eel does routinely, without thought or practice: deploy one's energy in a useful way.

## Cures Doubted

Can *chi* cure illness any more than ordinary electricity might? "The Moyers series suggests that it can. But David Eisenberg, M.D., a Harvard internist who is Moyers' on-camera guide, says: "I wonder."

Does it work?

Says Eisenberg:

"I don't know."

In the first episode, Moyers says sarcastically, that Western medicine denies the link between psyche and soma.

That, simply, is untrue.

"Science more or less wrote mental states out," Moyers

## Is TV Series Journalism?

In the credits for "Healing," the first "major funder" is the Fetzer Institute (FI), of Kalamazoo, Mich.

Bill Moyers and "Healing" producer David Grubin are on FI's 1991 list of "adjunct faculty and advisors."

Its mission statement says FI is a nonprofit, educational organization "that promotes the research and dissemination of lower-cost, scientifically-tested health care methods that utilize the principles of mind-body phenomena."

The statement adds:

"FI believes that the study of energy — the energy of a living being — is a critical element in the interactions between mind and body. Virtually every medical system other than the medical system of the West maintains that health cannot be understood apart from the energy of the body."

FI was founded by the late John E. Fetzer, a pioneer in radio, a long time owner of the Detroit Tigers, and a health visionary. He hoped to illuminate the "integral relationships" among "physical, mental, emotional and spiritual dimensions of experience" to improve the human condition.

The Institute, its 1991 report says, also believes the body contains a "powerful system of energy, which is a key to physical health" — a view derived partly from the achievements of Eastern medicine, "which for thousands of years has used healing practices based on the manipulation of the body's energies."

The PBS series "Healing" expresses these beliefs.

# # #

Is "Healing" journalism? Or is it an expostulation of Fetzer's spiritual point of view?

## TV Preview

# PROBE

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reiterates in another place. He then comes full circle, acknowledging that Freud and psychosomatic illness wrote this link back in (if it ever was absent) almost a century ago. Later, a doctor declares that "all physicians know the will to live influences physical health," thus undercutting again Moyers' assertion that this link is ignored.

It's all very confusing.

## Surgery Shown

This bias against Western medicine — or perhaps it would be better to call it the pre-eminent sponsor's philosophical viewpoint (See Box, p. 2) — sometimes seems to get in the way of the facts. The most dramatic segment in the first show is a brain tumor operation, performed at "one of the finest Western-oriented neurological hospitals in China." Moyers, nervously, and the camera peer down into the surgical wound.

The patient is receiving both Western and Eastern supportive therapy, and a press release, echoing the narration, says:

"But, remarkably, acupuncture permits less than half of the usual amount of Western sedatives ... to be used — and the woman is conscious during the operation."

## Drugs Will Suffice

Unfortunately, no data are given that would allow one to test the dosage claim, and of course little anesthesia is needed, anyway, since the brain lacks sensory receptors. Worse — since Dr. Eisenberg, for one, certainly knows better — is the insinuation that the acupuncture allows the patient to remain conscious. In U.S. hospitals that would not let an acupuncture needle inside the door, sedated patients are routinely kept awake during brain operations so that surgeons can gauge their progress by the patients' responses.

We phoned Dr. Eisenberg, in Boston. He did not return our calls.

Are we a bit paranoid about "Healing"?

Maybe — or maybe not. We don't object to the relaxation techniques, group therapy, or meditation shown in the series, not at all!

We do, however, object to the not-so-subtle denigration of scientific medicine and its unparalleled life saving achievements, in favor of unproven mystical alternatives. Illness usually is not due to an unbalanced *yin* and *yang*.

"Healing" proposes a synthesis of Eastern spiritualism and Western medicine. For cultural and psychological reasons, this is a dubious enterprise. We think Kipling had it right, a century ago, when he wrote:

"... and never the twain shall meet ..."

Answering a question at a media briefing last fall, Moyers said there is "absolutely nothing new" in "Healing." That being so, instead of wonderment, he might have provided the available scientific understanding of some of the Oriental practices he witnessed. "Healing" then might have been news: journalism instead of propaganda.

Instead, the series is preachy. A flyer for the tie-in book (Doubleday) says:

"*Healing and the Mind* is ... destined to change the way America thinks about sickness and health."

We hope not.

February 1, 1993

# Attack on Gallo Still Escalating

The thoroughly politicized attack on AIDS virus researcher Robert Gallo, M.D. — and by innuendo the attack on science that he is seen to represent — continues apace. It soon may worsen.

Rep. John Dingell (D-Mich.) charges that Gallo committed widespread scientific misconduct in his research and claims. Dingell charges, too, that the National Institutes of Health (NIH), Gallo's employer, encouraged and then covered up this misconduct.

On the administrative side, at NIH and the Department of Health and Human Services (HSS), the misconduct charge against Gallo now has been narrowed to cover just a single sentence in one key research report: Gallo is accused of lying about the progress he made in growing a French isolate of the putative AIDS virus in a continuous cell culture. This cell line was needed so enough of the virus could be obtained to develop the current AIDS blood test and for research.

## Fraud Alleged

Initially, an NIH investigation focused on allegations of gross misconduct that were contained in a massive (55,000 word) investigative article "The Great AIDS Quest" by *Chicago Tribune* reporter John Crewdson (Nov. 19, 1989); Crewdson has now been working on the story for more than four years. The NIH concluded, earlier this year, that the one clearly incriminating statement in the paper — "the virus [LAV] has not yet been transmitted to a permanently growing cell line" — was, in the agency's words: "technically incorrect, ambiguous, and misleading."

The paper had been drafted by one of Gallo's associates, and NIH concluded that Gallo had breached his responsibility as lab chief and senior investigator by failing to ensure the paper's accuracy, as well as by inserting the incorrect statement into it.

While this behavior could not be condoned, NIH said, it did not constitute scientific misconduct. In the scale of things, NIH said in effect that Gallo's misdeed was more in the nature of a misdemeanor than a felony.

## Dingell Rankled

This slap-on-the-wrist finding enraged Dingell and Crewdson, who charged cover-up. Dingell declared his displeasure in a November 24 letter to then NIH chief Bernadine Healy, M.D., and his anger certainly was heard higher up in HHS. The NIH

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## PROBE Index Published

An Index for the first 14 issues of PROBE, through October 1992, is published as a supplement to this issue. We are very grateful to our colleague, Lynne Lamberg, of Baltimore, for preparing this Index!

# Mutilation . . .

continued from page 1

during woman's urination, menstruation, sexual intercourse, and childbirth. Infections, massive scarring (keloids), and fissures in the tissue between vagina and anus can result. These women may have both physical and emotional scarring, for which they may need professional help as they adjust to a Western society that wholly devalues their sacrifice.

But: Little is being done to help them. A PROBE survey of several U.S. and Canadian cities has found few mainstream health-care providers who are as yet aware of these women's presence or special problems. Alternative, culturally sensitive health centers are being set up in East African communities here to serve them — but lack funding and outreach services.

The FGM problem also has come to North America via East African men: Following tradition, they seek FGM for their daughters.

In Africa, the cutting and tearing often is done with crude and unsanitary instruments, and without antibiotics or anesthesia. It almost always is performed by women — grandmothers, aunts, or midwives — before girls are 10 years old.

## Expert Is Worried

Thousands of young African girls are being brought here by their parents. Some are being "done" hurriedly, before their families enplane for the West, according to Hawa A. Mohamed, the longtime head of women's education in the Somalian ministry of education, who emigrated to Toronto in 1991. But other girls almost certainly will be mutilated in Canada and the U.S. by older women, by midwives brought from Africa, or possibly even by African or other doctors, according to Mohamed and other experts on women's health and torture interviewed by phone in the U.S. and Canada.

"We suspect that it is happening," Mohamed said recently from the Women's Health in Women's Hands center in Toronto, where she is FGM coordinator. "But I don't have any proof."

## Millions of Women Involved

The major concentration of East Africans in Canada is in the metropolitan Toronto area, she said. In the U.S., she and other opponents of FGM said, in interviews, major communities of

### Why They Do It

The rationale for FGM, experts say, is to make young women marriageable by keeping them virgins, and to discourage them from straying thereafter. Non-infibulated women are regarded as whores, so young men won't wed them. But sex with these women isn't much fun for the men — who then seek out the prostitutes they shun in marriage.

An Eritrean man, living near Atlanta, told reporters his wife experienced no pleasure in sex.

"They cut it and she don't feel anything," he said. "They have love in them, but it kills the woman and then the heart is dead."

East Africans are growing up in Atlanta, Denver, Washington, D.C., and New York City.

What once was a distant evil — some 80 to 100 million women, most in Africa and the Middle East are estimated by WHO and others to have suffered FGM — thus is becoming a congeries of cross-cultural problems in Europe, Canada, and now the U.S.

A midwife from Mali, working in France, was sentenced to eight years in prison last year after three babies upon whom she performed the procedure bled to death. Last month, for the first time, a mother from Gambia was convicted by a French court and jailed for a year for having her two baby daughters circumcised (*Boston Globe*, Jan. 9).

Physicians face an ethical dilemma with FGM, and in Africa, and perhaps even here, may perform it when pressed by the family to do so. Obstetrician-gynecologist Joseph Tate, M.D., of Norcross, Ga, who has devised methods to repair

## 'Re-infibulation' Requests Test Western Doctors

Ritual FGM usually is performed by midwives or other unlicensed practitioners, and is unlikely to come immediately to doctors' attention unless badly botched. But most mutilated women, like others in the West, deliver their babies in hospitals. Obstetricians face major dilemmas:

Should they cut through the scar tissue to deliver these women vaginally? Some do. Others, according to Hawa Mohamed, sidestep the problem by performing a cesarean delivery which, however, denies the woman normal childbirth.

A second dilemma is whether to re-sew, or *re-infibulate*, the woman, as she was before — which many request. In the U.S., there does not yet appear to be any legal or medical rule governing this matter.

At Atlanta's Grady Hospital, where one or two of these women deliver each year, obstetrics chief Luella Klein, M.D., told the *Atlanta Journal-Constitution* (Nov. 15, '92), that she tries to be "supportive" when the women ask to be re-closed.

"Some of our young doctors are very surprised, and they don't want to do that," Klein explained. "We say, 'You must talk to the patient, and if she really wants to have this done, you need to support [her] choice, even if you don't agree with it.'"

The American Medical Association and American College of Obstetricians and Gynecologists have discussed re-infibulation and other FGM practices, and oppose them, but have not issued policies forbidding them, the Atlanta paper reported.

In Canada, by contrast, the College of Physicians and Surgeons of Ontario has explicitly forbidden members to perform any form of FGM, including re-infibulation. In a statement issued a year ago, the College declared:

"The physician, at the conclusion of the delivery, must not endeavor to reconstruct the infibulation."

# Ritual Procedures Vary in Severity

The forms of FGM differ from place to place — and the descriptions are not for the queasy. As defined by social psychologist Hanny Lightfoot-Klein, M.A., in her carefully researched *Prisoners of Ritual* (Binghamton, N.Y.: Haworth, 1989):

• *Modified sunna* (traditional) is partial or total excision of the body of the clitoris. It is practiced widely in Egypt and across much of the Sahel, and is one of the least damaging methods.

• *Clitoridectomy/excision* entails removal of part or all of the clitoris as well as part or all of the labia minora. "This operation often results in scar tissue that is so extensive that it occludes the vaginal opening," Lightfoot-Klein writes. This form, too, is widely practiced across the Sahel, and most women,

of all social strata, have been subjected to it, she reports.

• *Infibulation* is clitoridectomy plus excision of the labia minora and the inner layers of the labia majora. "The raw edges are then sewn together with cat gut or made to adhere to each other by means of thorns.

"The suturing ... is done so that the remaining skin of the labia majora will heal together and form a bridge of scar tissue over the vaginal opening. A small sliver of wood or straw is inserted into the vagina to prevent complete occlusion, and to leave a passage for urine and menstrual flow." *Infibulation* is practiced in southern Egypt, Sudan, Somalia and Ethiopia. This form also is called *pharonic circumcision*.

these women's "terribly disfigured" genitalia, said late last year by phone:

"One lady I opened up I thought was done by a physician — on the premise that if he didn't, then some untrained woman out in the bush would!"

## Rights Are Violated

In the U.S., one key issue may be the conflict between the culturally-based claim to a practice that deprives an individual girl, surgically — and without informed consent — of much if not most genital sexual pleasure, and the Bill of Rights premise that *each* person has an inalienable right to "the pursuit of happiness." A complete and intact clitoris and vulva certainly must be protected as part of that right.

FGM is a social and cultural practice, but apparently *not* a religious one.

"It is a cultural thing that has nothing to do with religion," Mohamed said. Other experts agree.

The overwhelming majority of FGM practitioners — and victims — are Moslems. But, it has been practiced in the Middle East by Jews, and, elsewhere, by Christians and American Indians, according to standard sources.

## Legal View Offered

In Europe, the practice is banned in some countries. In Canada, too, it appears to be illegal: An official, in a written statement last year, said:

"The Department of Justice has examined this issue and has

concluded that the practice, if it occurred in Canada, would be bound to violate several existing Criminal Code provisions. No amendment to Canadian law is necessary ..."

If a person performed FGM in Canada, according to the official, R.G. Mosley, he or she could be charged with assault causing bodily harm (up to 10 years imprisonment), or aggravated assault (up to 14 years). If the girl died, criminal negligence causing death could be charged (up to life imprisonment). The girl's parents could be charged as accessories. But, Mosley cautioned, the decision to bring charges in such cases would rest with the provincial attorneys-general, not with the federal government.

The medical profession in Canada already has acted: The College of Physicians and Surgeons of Ontario issued a statement last year saying: "The performance by an Ontario physician of female circumcision, excision, or infibulation will be banned."

## New Law Sought

Reformer Mohamed said, however, she thinks these bans are being flouted. She favors legislation that would explicitly ban FGM.

In the U.S., one or two cases were prosecuted years ago, and local authorities well might bring charges of child abuse or assault and battery. But FGM's legal status in the U.S. remains unclear; PROBE has been unable to locate any legal review of it, albeit a human rights group in Washington, D.C., is considering doing one, a staff person there said by phone.

FGM can be limited in the U.S. by legal and health authorities, and by information and educational programs in high risk communities. But what of the rest of the world, where reform efforts, through WHO, are lagging?

East African women living in Canada and the U.S. will be traveling back and forth to Africa in the years ahead, Mohamed said, and "can become agents of change" to help curtail FGM in their native lands.

# # #

Note: Two dozen knowledgeable individuals have been interviewed, over several years, in preparing this PROBE report.

## Question

Many East African women are radiantly beautiful.

Somalian women are the most beautiful, according to psychologist Lightfoot-Klein, in an interview near New York City, and also have been subjected to the most severe, *pharonic*, form of genital mutilation.

Are these two observations connected?

Could it be that the eroticism in these genitally deprived women has been redirected to their faces and other body features, and so — tragically — might account for their luminescent beauty?

# Animal Activists Hassle The Blind,

In a spate of incidents across the country, blind people who rely on guide dogs for getting around say they have been accosted and threatened — loudly — on the streets by animal rights advocates. The blind people say the activists accuse them unjustly of abusing their dogs.

In published material and in written statements, animal rights spokespersons take a dim view of dogs working for people. But they do not flatly oppose it.

Trouble starts, blind people say, when animal rightsers see them “correcting” their dogs, using choker collars, which are standard equipment, in the way they have been taught by guide dog trainers (See Box, p. 7). Tight control is necessary, they add, because the human user’s life depends on the dog’s behavior.

In a *leash correction*, the blind person drops the dog’s

harness, and pulls back sharply on the leash, which is attached to a choker collar. One tug is supposed to suffice to refocus the dog’s attention.

One bellwether harassment case started on a Sunday evening in 1991, in Los Angeles: Steven Hazzard, a data processor, and his dog Starsky were going home from a restaurant when they encountered a construction barricade blocking the sidewalk. Hazzard tried to step into the roadway to go around it, he said recently by phone. Starsky, trained to keep Hazzard out of traffic, balked.

## Trouble Starts

Hazzard tried to correct Starsky. Man and dog squabbled.

At this point, according to schoolteacher Robert J. Acosta, who is president of the California Council of the Blind, a man

## Attack . . .

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finding had been sent there for final review by a newly-constituted Office of Research Integrity (ORI).

The ORI, like the OSI, dismissed most of Crewdson’s charges. But in its report, released late in December, it upgraded OSI’s mild rebuke on the statement in question to *misconduct*:

“ORI find[s] that] Dr. Gallo falsely reported the status of LAV research when he wrote the statement, and this constitutes scientific misconduct.”

The ORI report continues:

The explanations that Dr. Gallo proffered for the statement are neither credible when the evidence is considered, nor do they vitiate the impropriety of falsely reporting the status of LAV research .... Even if the statement can be technically interpreted to refer to the accomplishments of the French researcher [as Gallo alleges], an interpretation that ORI disputes, ORI believes ... Gallo ... impeded potential AIDS research with LAV.

The ORI conclusion that Gallo’s action impeded research has been challenged. Nobel Prize-winning virologist Howard Temin, Ph.D., of the University of Wisconsin, has said that since the U.S. and French isolates are the same, it “couldn’t have made any difference in the world” whether other researchers got their samples from Gallo’s lab or the competing one in France (*Science*, Jan. 8).

## Gallo Ahead on Cultures

The Gallo lab, by all accounts, was clearly ahead of the French lab in producing these samples.

In fact, neither Gallo’s group, nor the French researchers from whom Gallo allegedly stole credit for discovery of the AIDS virus, was using LAV; the cultures in both places apparently were contaminated by another viral strain, LAI. It was that strain both labs were working with, the French reported more than a year ago. While this does not exonerate Gallo —

who has given conflicting accounts of why he interpolated the offending statement — it does indicate that even after five years of investigations, these matters are not wholly clearcut. (Much of the NIH investigative record remains sealed.)

Writing in *Nature* (Jan. 7), Barbara Culliton suggests that the ORI reversal on the one count against Gallo was a sop to Dingell: Healy, she explains, had endorsed the OSI finding of no misconduct — but Dingell insisted that the NIH document is “deeply flawed.”

Culliton writes:

“This posed a dilemma for ORI. If it rejected Healy’s endorsement of the report, ORI would be criticizing her judgment and that of other NIH officials who also stood behind Gallo. But if [ORI] supported Healy, it would have to explain itself to Dingell.”

Hence, ORI issued its one-count judgment.

## Guilt Denied

Gallo immediately said he was not guilty, and would appeal ORI’s “utterly unwarranted” decision.

“After reviewing everything that I and my colleagues have ever published on the discovery of the AIDS virus and the development of the AIDS blood test,” he told the *New York Times* (Dec. 31), “the ORI could only take issue with a few trivial mistakes and a single sentence written by me.”

The *Times* writer, Philip J. Hilts, whose reporting on issues of alleged scientific misconduct has been very favorable to Dingell, takes a somewhat wider view in his story on the ORI findings:

“In the great public health catastrophe of AIDS, the story of how the virus ... was isolated and a test ... developed might be of only historical interest,” Hilts says, were it not for the researchers’ “pride” and the “royalties,” now shared equally between France and America, for the blood test.

Crewdson, the *Tribune*, and Dingell — each having made an enormous commitment to prove Gallo, NIH, and the science establishment corrupt — remain wholly unrelenting. Crewdson, in a new 7,500 word broadside (*Chicago Tribune*,

# Claiming Guide Dogs Are Abused

emerged from a building and screamed at Hazzard, saying he was hurting his dog. The man struck Hazzard in the jaw, kicked him in the groin, then disappeared.

Two women, whom Hazzard identifies as animal activists, then started to yell at him. The police were called. They

## 'Lease Correction' Defined

The Seeing Eye, the oldest guide-dog training school in the country, defines leash correction as "a jerk on the leash [that] will draw the dog's attention away from [a] distracting influence, and bring it back to the work at hand."

This definition is in an instruction sheet for blind people who are starting out working with dogs. "When properly given, the corrections are in no way harmful to the dog except, perhaps, to his pride," the Seeing Eye memo says.

Dec. 6), says that in the Gallo case, "20th-century medicine remains polluted by official deceptions, half-truths, exaggerations and outright lies." However, deep in the story, he shifts from research to its fiscal rewards, and says — astonishingly — that "the real scientific world [is] the world of patents and lawyers."

## Gallo's Eye is on The Prize

But the scientific issue is research, not patents, and our reading is that the motive driving Gallo in 1983-84 almost certainly was not patents, but the Nobel Prize for Medicine. He and his French counterpart, Luc Montagnier, have been co-nominated for it at least once, we have been reliably told.

They are now unlikely to receive the Nobel gold, given that the Royal Caroline Institute, in Stockholm, which picks the winners, hates even the hint of scandal.

# # #

We do not yet have a final opinion on the Gallo case.

Dr. Gallo does not always tell the truth. But lying is not incompatible with doing prize-winning research that also serves human needs. Most scientists, like most people, including members of Congress, sometimes tell lies.

We think the more important issue now is the vehemence with which Dingell and Crewdson are pursuing a case that *Times* reporter Hilts acknowledges is essentially "of only historical interest."

Dingell's entire attack on alleged fraud, misconduct, and corruption in science is based on a tiny handful of presumably signal cases. The "Gallo case" is the main thrust of this attack. (The David Baltimore/Imanishi-Kari case, as we have reported, has not stood up to prosecutorial scrutiny [PROBE, Aug., 1992].)

If the Gallo case is reduced to a single ORI indictment — which Gallo plans to appeal — the Dingell/Crewdson attack could dissolve into smoke.

We think that is what is happening — which may be why Dingell and Crewdson are huffing and puffing as hard as they are.

identified Hazzard as the victim of an attack, and reported that Starsky was okay, according to Acosta. A vet later concurred.

The incident nevertheless was reported to a local humane officer, Barbara Fabricant, who tried to have Hazzard booked on a felony charge of animal abuse. She failed.

Abuse of an animal, even if it did occur, is not a felony in California, according to Acosta, who led Hazzard's defense.

Fabricant insisted, in a recent phone interview, that Hazzard "absolutely should go to jail." Although she was not present at the scene, Fabricant said witnesses told her that Hazzard was "brutally beating" the dog.

"Anybody who beats a dog should go to jail," Fabricant said.

Because of her complaint, Hazzard twice had to surrender Starsky back to the school that trained him, Guide Dogs for the Blind, in San Rafael, Cal. Acosta said, by phone, that on one occasion when Starsky was back with Hazzard, working with a trainer from the school, two women approached the trainer. Speaking over Hazzard's head, one said:

"How dare you give this man back his dog. He shouldn't have a guide dog."

After several months, and much aggravation, charges against Hazzard were dropped after Fabricant failed to show up for an arbitration hearing. Acosta said the arbiter ruled that no abuse had occurred. Starsky is back with Hazzard. The cost in legal fees and expenses for the Council of the Blind: \$15,000.

Acosta and other leaders of the blind still are upset, however, because there appear to be other cases in which animal activists — who sometimes call themselves "humaniacs" — have harassed blind people working with their dogs in an appropriate way.

In the tape recorded newsletter *Happy Tails* (Summer, '92), issued by the Guide Dog Users of Massachusetts, the organization's president, Kim Charlson, of Watertown, described one such case: Bill Farrell gave his dog Cookie a "strong correction" when she became distracted, as he had been taught to do. Farrell was accosted by a bus driver, who "came running across the street to yell at Bill that he was abusing his dog, and she wasn't going to stand still for it." Farrell, reports Charlson, was supported by the Seeing Eye, the dog guide school in Morristown, N.J., and the case against him was dismissed.

## Wider Threat Seen

"I think that Bill's situation is only the beginning of what appears to be a trend nationally, of animal rights activists making complaints against blind persons using guide dogs," Charlson says. "Organizations such as People for the Ethical Treatment of Animals (PETA) have platforms in their literature specifically stating that they are against the imprisonment of dogs for the use of the blind as guides."

PETA's position, as explained in a letter to a California official last year in the wake of the Hazzard case, is that there is

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# Hassle Cont'd ...

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significant possibility for abuse in any circumstance that involves working animals. The letter, signed by a PETA staff person in Washington, D.C., says working dogs often are employed in tasks too dangerous for humans or for animals, and may be abused during their lives of "servitude."

A similar view is contained in a recent book for children, *Animals in Society*, by Zoe Weil, published by the American Anti-Vivisection Society, in Jenkintown, Pa. It says that most blind people "treat their helper animals with love and kindness." But, Weil says:

"While many feel that there is no abuse involved" in the use of guide dogs by the blind and the deaf, "others are concerned that the dogs may be denied opportunities to run and play and

to be free from constant service to humans."

About 30,000 Americans use guide dogs, Acosta says. He and others say they are prepared to do battle to keep their dogs.

## *Dogs Will Be Dogs*

"Guide dogs are not perfect, and certainly make mistakes which call for corrections. I have had many people look at me very angrily when I have needed to give my dog a leash correction. Many even interfere, and say, 'Oh, that's not necessary!'"

"I explain that they should keep watching while I back up and rework the problem ... [Then] I stop and praise my dog, and she gets all excited and happy, because she knows she 'did good.'"

"People usually then say, 'Oh, isn't that sweet!'"

— Kim Charlson, in *Happy Tails*

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