Where Do Politicians Go In Their Afterlife?

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Where do politicians go after they leave office? Politicians and their staffs usually have career planning on their radar screen.
Liberal Republican Bob Franks was confronted with this issue during a heated New Jersey gubernatorial primary debate in 2001, and he responded by saying he would "never" become a drug company lobbyist. A few weeks after he was defeated, he reportedly became a $400,000-a-year lobbyist for the pharmaceutical industry.

Earlier this year, the Illinois legislature unanimously passed a good and sensible bill to prohibit conflicts of interest for those who serve on vaccine advisory panels. But the drug industry lobbyists held an ace in the hole: lame-duck Illinois Governor George Ryan, soon to be seeking new jobs for himself and his staff. He vetoed the bill.

The pharmaceutical corporations, whose generous political spending gives them unrivaled clout with public officials, now have big plans to capitalize on public fears after 9/11. The drug industry works closely with the federal agency called the Centers for Disease Control and Prevention (CDC), and conflicts of interest are customary on federal and state drug advisory panels.

The CDC has just released, and is urging state legislatures to pass, a Model State Emergency Health Powers Act (EHPA). It is an unprecedented assault on the constitutional rights of the American people, as well as on our fundamental principles of limited government and separation of powers.

EHPA's principal author is Lawrence O. Gostin, a former member of Clinton's discredited Task Force on Health Care Reform. Clinton's attempted takeover of the entire health industry failed and resulted instead in the Republican congressional victory of 1994.

The proposed EHPA would bring about government takeover of the health industry by the states instead of by the federal government. EHPA would give each governor sole discretion to grant himself far-reaching powers.

Under EHPA, the state legislature relinquishes its power to stop overreaching by the governor until at least 60 days after his actions. EHPA suggests requiring a two-thirds vote of the legislature declaring that the risk has disappeared before the governor could be restrained.

The bill wouldn't allow the governor to be reversed just because his actions are unwarranted, oppressive, or overreacting to the threat. The legislature would have to find that the risk doesn't exist any more, something many legislators would be reluctant to declare.

Here are some of the extraordinary powers EHPA would give to each governor. He could control, restrict or prohibit firearms, seize private property and even destroy it in many circumstances, and impose price controls and rationing.

He could order people out of their homes into dangerous quarantines where there would be no guarantee of safety from violence or contagious disease. Children could be taken from their parents and thrown into public quarantines managed by government officials.

The governor could demand that physicians administer certain drugs despite individuals' objections and with no provision for religious exemptions. Without any checks or balances, the governor would become both doctor and policeman.

Under EHPA, government authorities would have full access, without meaningful limitation, to everyone's medical records. If the alleged emergency turned out to be grossly exaggerated or even a hoax, government need not return the private records.

Remember how Bill and Hillary Clinton got shocking access to, and were able to use, hundreds of FBI files about their political opponents? EHPA would authorize similar intrusions by government officials through access to the personal medical files of their enemies.

No public health emergency justifies EHPA's draconian infringements on our liberties. EHPA would grant these powers to governors without any showing of a real emergency, and merely an isolated case of a serious disease, or even a misdiagnosis, could trigger the governor's seizure of power.

George Annas, chairman of the Health Law Department at Boston University School of Public Health, says that "this law treats American citizens as if they were the enemy."

Already, the drug company lobbyists have gotten 43 states to order mandatory vaccination of all schoolchildren against hepatitis B, even though the CDC reports only a tiny number of cases among children under age 14, and the disease is avoidable by lifestyle choices. Some schools are even refusing to recognize medical and religious exemptions.

Money is behind these laws, not logic or emergency. If you check out who is pushing these drug mandates, you will usually find pharmaceutical corporation "research" grants, political contributions, and layers of conflicts of interest.

The CDC and vaccine makers are pushing state legislatures to enact ever more far-reaching drug mandates and enforcement and to put EHPA on state legislative dockets starting in January. Secretary of Health and Human Services Tommy Thompson has called for EHPA's passage.

The Association of American Physicians and Surgeons (AAPS) opposes EHPA, and state legislatures should heed the physicians' advice. Governors should not be playing doctor nor should they be grabbing dictatorial powers.