

hour to the passage of SALT II. Gary Hart, well groomed and garrulous, promises two computers in every garage. Only John Glenn keeps his peace, smiling his bashful smile, and offering a good grip with every handshake. Two decades ago he was strapped into a rocket and propelled around the Earth. Now he has buckled himself into the Democratic capsule and waits for the technicians to send him into a second orbit. Alas, he may wait in vain, for the technicians are not very technical. It is an easy thing to oppose the nuclear holocaust, or condemn poverty. It could be easy for the

Democrats and difficult for the country.

After all, it is the Republicans who provide the opportunity. Just as Richard Nixon and his minions squandered their electoral triumph, so Ronald Reagan will learn that the Democrats must profit from his mistakes. No one can now say whether that will come to pass, but the larger question is to judge the greater peril. It is true that Reagan might spoil the prospects for conservatism. But it is also true that the Democrats might prove a familiar

axiom; that is, that exploitation wins elections, even if it fails to govern. There is a danger in a Democratic resurgence; no one can imagine what they might do. And if our electoral process is condemned to a weary quadrennial trade, the range is too open, the standards too porous, for the safety of the Republic. Politics is the art of the probable, not the possible. We now know that anything is possible, and the challenge is to keep the improbable at arm's length.

A "Vigil for America" may seem capricious, but it is an ominous kind of caprice. The consent of the

governed should be not to mourn but to exalt, yet the Democrats will wail and lash themselves insensible if that is what power requires. A "veritable Woodstock" was injurious enough in its original form, but when mob law sets the agenda of a major political party, we should be blessed if Woodstock is all we get. Clearly, the two parties are headed into a kind of perverted competition. The Democrats are still wrestling with demons. And the Republicans—while they may not be on the side of the angels—nonetheless must behave like angels until the spell is lifted. □



BEDPAN HOSPITALITY (II)

by Ernest van den Haag

Recently fate offered me another unsought opportunity to serve as your involuntary hospital reporter.* As before, I found the medical services in the University-run hospital excellent, although there is an unexplained shortage of residents, the physicians who hang around twenty-four hours a day and are essential for emergencies and routine procedures. Since there are too few of them, routine procedures tend to be uncomfortably delayed, while they are busy dealing with emergencies, or in the operating room. Yet, there is no shortage of physicians available for residencies. The cost to the hospital is a negligible proportion of the total charged. Why not have a more adequate number of residents then? Nursing was competent though hard to get. When the bed-bound patient rings a bell (actually a light goes on at the nursing station), he must wait from five to twenty minutes for an electronic voice to inquire about "the problem." Often the delay does not matter, but in an emergency it might be costly. The knowledge that, whatever happens, there will be a delay, is not reassuring.

But it is the hotel and restaurant

part of hospitalization—room, food, furniture, and service—which remains beneath what a third-rate motel would dare to offer. In a hotel a maid comes in once a day to do the room. Simple, isn't it? Not in hospitals. They have found infinitely clever ways to complicate matters. The following separate operations were performed in my room every day: (1) An elderly gentleman came in around 9 a.m. to empty waste-paper baskets; (2) Around 10:30 a young man appeared with a mop. He gingerly caressed parts of the floor

for about two minutes; (3) Around noon another man appeared to do the same for the bathroom; (4) Two hours later a woman appeared to clean the wash basin and the bathroom shelf. (On parting each one left the door open.)

How can this irrational and disruptive procedure be explained? Did some demented administrator read too much about specialization in his college days? Or is it the unions? But why do hotels manage to resist the unions and hospitals do not? Are hospital administrators less in-

terested in the comfort of their guests than hotels are? Quite likely. I found that the ordinary sleeping habits of patients are systematically ignored. Procedures apt to prevent sleep, although ordered as a daily routine for me, were always performed at night. I never found out why.

To the eccentric ways of making up a room one must add other routine matters to realize that a patient cannot count on much undisturbed rest in a hospital. Someone comes in at unpredictable times to make the bed, nurses hand out medications, or check on infusions, several times every day. Three meals a day are brought in and removed; someone brings next day's menu, and picks it up later, after you have made your choices. And there are innumerable tests: hospitals are bloodthirsty. Not all of this is unavoidable. Is it really impossible to bring in next day's menu with the meal and pick it up with the dishes? Or to do the room in a single operation?

Hospital administrators act as prison wardens do, only more so. In hotels, and even in some prisons, one may receive "conjugal visitors." But hospital managers get heart attacks at the mere mention of such a possibility. Hospital rooms must be unlocked for the same reason that prison cells must be locked: to control inmates. Unlike the hotel guest, the patient cannot leave; unlike the prisoner he cannot rebel;



*See my article "Bedpan Hospitality" in the December 1981 issue of *The American Spectator*.

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The lamp over my bed was designed and placed with diabolical

cleverness so as to make reading almost impossible. Excellent goose-neck lamps are on the market. They can be clamped to the wall, and moved in any direction, illuminating anything. They are also quite cheap. Other hospitals have them. But this medically outstanding hospital shuns conveniences. The patient might be so comfortable he might never want to leave.

In the past doctors feared to treat the poor in the overcrowded and unsanitary hovels in which they lived. If lucky, they were admitted to hospitals and treated there for the sake of charity. The rich were treated in their homes. Modern medicine, however, depends on an extensive apparatus available only in hospitals which, therefore, must be used by rich (or insured) and poor alike.

Hospital administrators have not yet discovered this development. They continue to treat everybody patronizingly and punitively.

I know of no hotel that expects you to share a room with three or four other persons, or even with one other person, you have never met. Hospitals routinely do. Since hotels manage to make decent rooms available for less than \$40 why should a

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room as such be more expensive to a hospital? Why should sick people be expected to give up their privacy when sick, if they don't have to when healthy? I can see no reason why private rooms, as well-furnished as hotel rooms, should not be the rule in hospitals for all paying customers.

Which brings me to the bill. Granting that modern medicine with all its apparatus is costly, the size of the bill still remains a puzzle. Five factors contribute to inflating the cost. (1) Paperwork. This is largely caused by government regulations and can be reduced only by simplifying them. Meanwhile it is horrendous and costly. (2) Overstaffing and

overpaying. Whereas the professional staff barely is adequate in numbers and is far from overpaid, the nonprofessional staff is overpaid (I think there are too many of them, too). How do I know? There are far more people wanting these jobs than there are jobs to give them. They are paid more than is needed to attract them. (3) Hospitals take care of many people who cannot pay and are not insured. This expense should be borne by the community at large, but is not. So, hospitals shift the cost to paying patients and to their insurance carriers. Morally the practice is unjustifiable. That you happen to be hospitalized and are insured, or able to pay, is no reason to stick you, rather than the community, with the cost for all those

who are not. Yet the hospital must make ends meet somehow. The remedy here is legislation providing full reimbursement by taxpayers for those who cannot pay. (4) Medical care has become expensive because of the high and costly technology available to physicians, which has immensely improved care. Yet it is overdone. Rooms, underequipped for comfort, are medically overequipped. (a) Every bed has a costly electrical motor which permits it to be raised and lowered in segments. It's fun and makes it easier to make up the bed. Everything else could be as readily, and more comfortably, achieved by strategically placing pillows. Less fun but much cheaper. (b) Every room has oxygen outlets. But only a small proportion of patients need them. (c)

There is an intercom with loud-speaker in every room; needlessly, since there is a telephone. (5) The costs of hospitalization are paid largely by third parties now, insurance companies and taxpayers (via Medicare or Medicaid). This is one reason why they are so high. The simplest reform is to make sure that, however insured, the patient (except those below the poverty level) pays a percentage of the costs of hospitalization and thus retains an interest in minimizing the expense which no third party will, or can, pursue as readily as he can. Unless the patient regains an interest in minimizing costs, hospitalization will become ever more expensive—and, in the nature of things, ever more inhospitable. □



MEDIAZATION

by Fred Barnes

Harry Reasoner, who is a correspondent on "60 Minutes," was adamant. "I am certainly not left wing, and I am not a dupe," he told Stephan Leshner. "... I am aware of this new theory that Tet was a disaster for the Communists. I went to Vietnam first in 1953. I know Asia extremely well. I would not [disagree] for a minute that the United States armed forces responded very effectively in terrible circumstances in the Tet offensive. But to say that this was somehow an American *cum* South Vietnamese victory that the press concealed, I think is arrant nonsense."

Poor Reasoner, concludes Leshner in his trenchant new book, *Media Unbound*.^{*} Reasoner suffers from "a classic case of mediaization," which Leshner defines as "the disturbing process by which journalism befores memory and truth." Mediaization began, Leshner insists, with the American press coverage of the Tet attack in 1968 by the Vietcong and North Vietnamese. And for those like Reasoner, there may be no cure. "While characterizing as some 'new theory' the strikingly similar findings

on Tet by a diverse group of historians, Reasoner ascribes unassailable truth to contemporary reportage of those events," Leshner says.

But there is good news: if not for Reasoner, at least for others, the fog is lifting on Vietnam mediaization. And not just on the subject of the Tet offensive, which is now generally

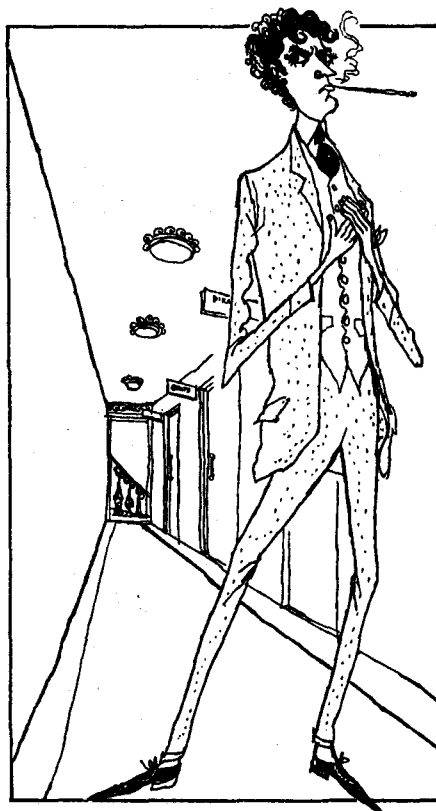
regarded as having been reported with breathtaking inaccuracy and misplaced emphasis. Rather, the quality of the coverage of the entire war itself has now become a matter of intense debate. The discussion, in fact, has already come so far that often the issue is not whether the American coverage was good or bad, but just how bad it really was and what resulted from it.

That, for instance, was the crux of the argument recently between Robert Elegant, the novelist and former Asian correspondent for the *Los Angeles Times*, and Peter Braestrup, who reported from Vietnam for the *New York Times* and *Washington Post* and has written a devastating critique, *Big Story*, of the press treatment of the Tet offensive. Elegant touched off the argument with his 1981 article in *Encounter* that unhesitatingly blamed the press for the American and South Vietnamese defeat. "Never before Vietnam had the collective policy of the media—no less stringent term will serve—sought by graphic and unremitting distortion the victory of the enemies of the correspondents' own side," Elegant wrote.

The American press, he said, "somehow felt obliged to be less objective than partisan, to take sides,

for it was inspired by the *engagé* 'investigative' reporting that burgeoned in the U.S. in these impassioned years. The press was instinctively 'agin the Government'—and, at least reflexively, for Saigon's enemies." And press hostility endured after American troops began to withdraw. "Political pressures built up by the media had made it quite impossible for Washington to maintain even the minimum material and moral support that would have enabled the Saigon regime to continue effective resistance," he wrote. In short, "for the first time in modern history, the outcome of a war was determined not on the battlefield, but on the printed page and, above all, on the television screen."

Braestrup, now the editor of the *Wilson Quarterly*, conceded that there were "gaping holes and changing fads" in the coverage of the war. "As Elegant states, many of the American newsmen in Vietnam—and their bosses at home—were singularly unprepared to cope with the complexities of the long, ever-changing Indo-China experience," Braestrup wrote. But "there was no consistent bias in the Saigon reporting... During my years in Vietnam, I found few reporters who, even as they criticized allied performance (or, more often, quarrelled with U.S.



^{*}Houghton-Mifflin, \$13.95.

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