THE DAILY CLIPS

August 20, 2009

News, commentary, and opinion
compiled by the East Carolina University News Bureau from:

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Ballard: Executive costs are in check

By Josh Humphries
The Daily Reflector

Wednesday, August 19, 2009

East Carolina University’s executive and administrative positions have grown slower than the growth rate of the student population over the last 20 years, university officials said this week.

Responding to recent media coverage that indicated administrative ranks across the University of North Carolina system had grown by 28 percent over the last five years, ECU Chancellor Steve Ballard wrote a letter of clarification to the ECU Board of Trustees and UNC President Erskine Bowles.

A chart that accompanied coverage in the Raleigh News and Observer showed that associate vice chancellor positions at ECU increased from 11 to 21 from 2004 to 2008.

“The articles used selected snapshots or time frames when the full data that was available often showed a different picture,” Ballard wrote. “Over the five-year period from 2004-2008, ECU’s administrative costs have been well controlled if not reduced.”

Executive and administrative jobs have decreased by 35 percent since Ballard became chancellor five years ago, he said. In the same time period, total employment has increased by 18 percent and student head count has increased by 22 percent.

Ballard wrote that expenditures directly contributing to the academic core — budget items such as instruction, research, academic support and financial aid — have increased by 42 percent.

“ECU has never had the luxury of administrative bloat,” wrote Ballard. “In my time at ECU, not even counting the significant administrative reductions this past fiscal year, we reduced administrative expenditures by over one third.”

Many administrative positions at ECU have been combined.

For example, John Durham serves as secretary to the ECU Board of Trustees and chief public relations officer. Phillip Rogers covers three jobs as chief of staff, policy analyst and legislative liaison.

The administrative structure at ECU is constantly under review, officials say. Administrative positions were the first priority for budget cuts this year. However, exact figures on how many cuts ECU has made for the upcoming year are unavailable at this time.

With the presence of a medical school and a medical practice plan at ECU, some positions may seem like one thing when they are in fact another, said Rick Niswander, dean of the College of Business at ECU.

It gets complicated when clinicians are classified one way, instructors another way, he said.

Niswander has been independently reviewing ECU’s administrative structure for the past six months. He said it was something that interested him on a personal level.

“ECU has for years been pretty darn lean when it comes to non-classroom infrastructure that we need to make this place run,” Niswander said. “We don’t have zillions of vice chancellors. There is a certain amount of administrative structure needed just to make the place go.”
The university has to have accountants to pay the bills, someone in financial aid to help students and someone in the admissions office to review the thousands of applications ECU gets every year, Niswander said.

“You are always going to have some amount of them and the challenge is to make sure the amount is reasonable given the size of the university and the number of faculty members we have.”

Contact Josh Humphries at jhumphries@coxn.com or (252) 329-9565.

Personnel and student growth percentage at ECU 2004-2008

Executive/administrative -36
Total personnel 18
Student head count 22

Personnel and student growth percentage at ECU 1988-2008

Executive/administrative 10
Total personnel 74
Student head count 78

ECU growth patterns

Personnel and student growth percentage at ECU 2004-2008

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Total personnel 18
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Personnel and student growth percentage at ECU 1988-2008

Executive/administrative 10
Total personnel 74
Student head count 78

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Residence halls open to ECU students today

The Daily Reflector

Wednesday, August 19, 2009

The invasion begins today. Keep an eye out, Greenville citizens, for young people — and weepy parents — hauling boxes of belongings and books around East Carolina University's campus.

Approximately 5,000 students are expected to move into residence halls beginning today, bringing on-campus housing close to capacity, a news release stated. Two or three beds remain available for men, with close to 40 beds for women. Those numbers may change if walk-ins and cancellations occur, said Director of Housing Operations Aaron Lucier.

Last year, housing was over capacity and ECU had to rent apartments in the surrounding area to accommodate student needs. Lucier said even with one residence hall unavailable this year — Scott Hall is undergoing renovations — overall university policy helped trim the number of students living on campus. ECU lowered the number of freshmen accepted this year.

Lucier said his department did say no to a few students requesting housing, primarily returning students and freshman men. He said housing was worried slots wouldn't be available and didn't want to keep the students in limbo.

A number of social events are planned beginning this weekend to welcome new and returning students to Pirate life:

Friday: 3-6 p.m., Sigma Phi Epsilon house reopening, corner of Fifth and Summit streets; program begins at 5 p.m. After a fire in January, the Sigma Phi Epsilon house will reopen for students with new safety features. Contact: Keith Tingley, ECU Office of Greek Life, 328-4235.

Saturday: Million Meals Event, 8:30 a.m. to 6:30 p.m., Boys & Girls Club on Fire Tower Road. Organized by Stop Hunger Now and the Volunteer and Service-Learning Center, the University Million Meals Event is designed to package meals to feed the hungry around the world. Contact: Mike Loeffelman, 328-2735.

Saturday: Meet The Pirates, 6-8 p.m., Dowdy-Ficklen Stadium. Pirate football fans are invited to bring the whole family out to get to know the 2009 ECU football team. For this free event, fans will be able to take photos and receive autographs from players, coaches, and cheerleaders. The new ECU 18-wheel equipment truck that will accompany ECU on all away football games will be on display. Activities include the opportunity to walk on the field, pirate temporary tattoos and inflatable rides and games.

Sunday: New Student Convocation, 3-4 p.m., Wright Auditorium. Panel discussion with Chancellor Steve Ballard, football Head Coach Skip Holtz, Faculty Chair Marianna Walker and SGA President Brad Congleton speaking about university life.

Sunday: "ECU Stars," 7-9 p.m., in Wright Auditorium for ECU's version of "American Idol" with cash prizes. Auditions will be earlier that day, noon to 2 p.m. in Wright Auditorium.

Monday: ninth annual Pirate Palooza, 6:30-9:30 p.m., Dowdy-Ficklen Stadium. This free event is for ECU students and will feature live music, inflatable attractions, giveaways, food and the opportunity to meet ECU coaches.
Aug. 27: P3 = Pirates, Pool and Professors, 3:30-5:30 p.m., Student Recreation Center. Students will meet ECU faculty members and then, at 6 p.m., head to Grainger Stadium for a Kinston Indians game.
U.S. Rep. Walter Jones visit ECU Dialysis Center

By Ginger Livingston
The Daily Reflector The Associated Press

Wednesday, August 19, 2009

U.S. Rep. Walter Jones, R-N.C., learned about the physical, emotional and financial toll of kidney disease on Wednesday during a tour of the ECU Dialysis Center.

Mary Blick, the center's area manager, invited Jones earlier this year when she met the congressman during a meeting about health care reform.

"I try to make myself available because this is the only way I can learn about what is happening in the lives of my constituents," Jones said.

The center, located on West Arlington Boulevard, is operated by Fresenius Medical Care North Carolina, the world's largest provider of dialysis care due to kidney failure. Fresenius handles patient care for ECU Physicians, the medical practice associated with the Brody School of Medicine at East Carolina University.

About 85 percent of individuals treated at the center are Medicare and Medicaid recipients, Blick said.

In 2006, North Carolina ranked 10th in the nation for the number of people being treated for kidney failure.

The American Association of Kidney Patients reports that dialysis treatment costs $30,000 a year. That does not include the drug costs.

ECU Physicians' nephrology and hypertension division treats 160 people in Greenville and across the region, said Dr. Susan Gerkin. Money is needed to educate people and their doctors about preventative care through better nutrition and routine medical exams. It's also needed for research, she said.

The kidneys filter waste out of the blood stream. When disease damages the kidneys, waste isn't filtered and dialysis is needed to drain blood out of a person, cleanse it and pump it back in the body.

Blick said most of the center's patients receive treatment three times a week for an average of four hours a day.

Gerkin said in recent years the local medical community has provided free medical screenings for more than 300 people at risk of kidney disease but have had to cut back because of reduced financial resources.

Gerkin said medical screening is key to detecting and treating the main causes of kidney disease, high blood pressure and diabetes. Both are often symptomless until damage occurs.

Michael Priddy, a physician's assistant, said for many local dialysis patients the biggest hurdle to treatment is the cost of prescriptions and treatment but getting reliable transportation to their appointments and paying for treatment and medicine of other medical conditions is also challenging.

Jones talked with Stanley Robinson of Ayden, who has undergone dialysis treatment for eight years. Robinson, who just turned 50, said his kidney failure was caused by high blood pressure, which was first diagnosed in his late 20s.

Robinson said he didn't take the medicine his doctor prescribed at the time. He said he was never told high blood pressure could damage his kidneys. The kidney disease appeared in his late 30s.
Jones asked Robinson how much he spent on medication. Robinson said his costs are covered by Medicaid, but would range between $600-$700 if he had to pay out of pocket.

“There has to be some type of change from the present system we have now because there are so many people out here without any coverage at all,” Robinson said.

Jones said he believed the health care debate needed to slow down. He said the most pressing issue — assisting people without medical insurance — should be addressed before tackling widespread change.

Jones said he wants to see the United States less involved in international affairs and more involved in finding solutions to health care coverage. He said he wants to United States to disengage from Iraq and Afghanistan and redirect money spent on those operations into medical research and education.

A man, who identified himself as a local pastor, queried Jones about supporting President Obama's health care reforms. The man said government should provide health insurance for all and people should be willing to pay more taxes to cover the costs.

Jones disagreed.

"We can't pay for it, the United States is a debtor nation, we're borrowing money from China," he said. "We don't have the money to pay the bill."

Contact Ginger Livingston at glivingston@coxnc.com and (252) 329-0570.

ATLANTA — Four years after the government severely restricted its use, the lung cancer drug Iressa may be poised to make a comeback: A study concludes it can slow the deadly disease better than standard chemotherapy in certain patients.

The research released Wednesday is the first to show Iressa can be more effective than chemotherapy as a first-line treatment, and some experts are hopeful it will prompt the Food and Drug Administration to allow wide use of the drug, made by AstraZeneca PLC.

Others are doubtful.

Though the study shows an effect on cancer growth over one year, the drug's impact on long-term survival is still in question. Also, the study was done in Asia, and the drug seems to work best with specific patients — Asians, women and nonsmokers who carry a specific gene mutation.

"I'd venture to say that additional studies will be requested in the United States population," said Dr. Len Lichtenfeld, the American Cancer Society's deputy chief medical officer.

AstraZeneca, which funded the study, is not planning a new push for expanded FDA approval of the drug, a company spokeswoman said. But the company is continuing to share data about the drug with federal health officials, she added.

Iressa is a daily pill that more precisely targets cancer rather than healthy cells. It's an attractive alternative to standard chemotherapy, which involves trips to a hospital or clinic for infusions of poisonous chemicals that cause nausea and hair loss.

In 2003, the FDA approved Iressa as a last-resort treatment for patients with the most common form of lung cancer, called non-small-cell lung cancer. The market was significant: Lung cancer kills more Americans than any other kind of tumor, and the Cancer Society estimates it will cause nearly 160,000 U.S. deaths this year. Non-small-cell lung cancer represents 85 percent of lung cancer cases.

But in 2005, the FDA stopped allowing new patients to go on Iressa after early results from a federally sponsored study failed to show it improved lung cancer patients' survival rates.

Another lung cancer pill, Roche Group's Tarceva, acts in a way similar to Iressa and remained on the market as a treatment for patients not helped by chemotherapy. There wasn't widespread outcry at the loss of Iressa because Tarceva remained available, said Dr. Edward Kim, a lung cancer specialist at the University of Texas M.D. Anderson Cancer Center.
Interest in Iressa continued, though, as doctors have become increasingly interested in personalized approaches to cancer treatment. Studies have shown some drugs work better in certain breast and colon cancer patients than others, and earlier studies have found that Iressa dramatically shrunk tumors in patients who had lung cancers with a specific genetic mutation.

That kind of case is seen in only a small fraction of U.S. lung cancer patients, but is much more common in Asia, scientists say.

The latest study was led by Dr. Tony Mok of the Chinese University of Hong Kong, and involved about 1,200 patients throughout southeast Asia.

The study group included the kind of people most likely to have the mutation, said Dr. Pasi Janne, a Dana-Farber Cancer Institute lung cancer specialist.

The study measured cancer growth within a year after treatment, comparing patients who got Iressa to others who got chemotherapy. After one year, 25 percent on Iressa were alive without their cancer getting worse, as compared to 7 percent of those on chemo.

Results were even better in those with the mutation. In those without the mutation, chemotherapy was more effective.

The study was published online Wednesday by the New England Journal of Medicine. A second study released by the journal concluded that large-scale screening of lung cancer patients for the genetic mutation is feasible and can lead to wiser treatment.

Mok and several of his fellow researchers received consulting and lecture fees from AstraZeneca, Roche and other drug companies.

On the Net:

fundraiser

Former House Majority Leader Dick Armey will be the guest at a Sept. 25 fundraiser for U.S. Rep. Walter Jones, R-N.C.

WHEN: 5-7 p.m. Sept. 25
WHERE: Parker’s Barbecue, 3109 S. Memorial Drive
COST: Tickets are $20 per person, $10 for students.
HOW: Tickets can be purchased through Jones’ campaign Web site, www.walterjonesforcongress.com, or call 413-9934.

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Task force explores ideas to make city bicycle friendly

By Michael Abramowitz
The Daily Reflector

Wednesday, August 19, 2009

Greenville government has a vision of growth that includes a bicycle-friendly community.

The city stands poised to create a bicycle and pedestrian commission for the development of more thoroughfares for bicycles and other non-engine-driven means of mobility.

Before they make it official, though, City Council members appointed a Bicycle Friendly Task Force to explore avenues to pursue those goals. The task force conducted a public forum Wednesday evening at City Hall to share its vision and get community feedback.

Herb Garrison, professor of emergency medicine at the Brody School of Medicine, director of the Eastern Carolina Injury Prevention Program and associate director of medical services for the N.C. Highway Patrol has another position now: task force chairman.

In addition to Garrison, the task force is comprised of city government officials, including Thomas Moton, assistant city manager, Sgt. Robert Brewington, head of the Greenville Police Department traffic division, James Rhodes, city planning director, as well as business people and non-government residents who belong to bicycle clubs such as EC Velo.

Before the public forum, the task force met to consider two new proposals.

It agreed to present a draft to the council that, if approved, would create a permanent bicycle and pedestrian commission.

The task force also will submit a draft to the council requesting that it change an existing city ordinance that forbids bicycle traffic on sidewalks to allow it except for the downtown section of the city bordered by the Town Common, Pitt Street and Reade Circle.

There would be rules for riding on sidewalks, including a 7 mph speed limit, Garrison said.

The task force was not unanimous about changing the ordinance. Several members who are avid bicyclists strongly disagreed with the recommendation, saying the change would make the sidewalks more dangerous if shared among cyclists and walkers. They also feared that allowing bicyclists to ride on sidewalks would give motorists the mistaken impression that bicycle riders are no longer allowed on the roads. That law would not change, however, and bicyclists would still be free to ride the roads, subject to the same traffic laws as cars and other motor vehicles.

“There is one line of thinking that says pedestrians are at risk where bicyclists ride, especially commuters, but we’ve found that most bicycle-friendly communities allow bikes to ride on sidewalks where traffic is not congested,” Garrison said.

While acknowledging the riders’ concerns about sharing sidewalks, Moton said he saw the change as a transition toward the future.
"Sidewalks change the culture of a neighborhood as people get out and use them. This intermediate step would not replace the idea of (separate) bikeways, though. The city is committed to improving the quality of life here," he said.

But bikeways would be at least five years away, Moton said, while allowing cyclists to ride on sidewalks is something the city can do now.

Brewington and Bill Bagnell of East Carolina University Facilities Services agreed that decriminalizing bicycling on sidewalks would not be much of a change from the status quo because there is almost no enforcement of the ordinance.

"We need to do something, and there have been only a handful of collisions on sidewalks in my 25 years here," Brewington said.

Garrison sees the changes as timely with the new sidewalks that have been cropping up along some of Greenville’s major roadways.

"Greenville Boulevard is a good example," Garrison said. "A lot of people will not ride in traffic, but say they will ride on the sidewalks. Right now, though, city code says it's illegal to ride a bicycle on the sidewalk."

Ken MacLeod is a business professor at East Carolina University and an avid cyclist who has been commuting the length of Evans Street for 18 years. He disagrees with the idea of bicycles on sidewalks, even though he's been a victim of a hit-and-run collision at the intersection of Evans and Greenville Boulevard.

After he was struck, Mac-Leod sustained a separated shoulder, however, from which he is still recovering. Even so, he does not favor allowing sidewalks for bicycle traffic for two reasons, he said.

"They move far too fast and are unsafe for pedestrians, and you can't see a car coming down a driveway and get out of the way in time because you're too close when you're on the sidewalk. Bikes are vehicles and belong in the roads," he said.

The ordinance changes and the new ideas about bikeways and sidewalks were compiled from information provided by other bicycle-friendly cities around the state and country, Garrison said.

"Before taking the changes to the city council, we decided it would be a good idea to first take them to the community," he said.

Input at the public forum echoed that of the task force meeting. Most of the 50 or more people there favored a permanent commission to further the cause of recreational growth and more environmentally friendly transportation routes, as well as safer passage for mobility devices such as wheelchairs.

There were concerns about the wisdom of mingling bicycles and pedestrians on sidewalks, which are narrower than bikeways, but attendees saw the proposal as a move toward more robust changes in the future.

After some changes in the wording of its draft proposals to accommodate ideas from the meeting, the task force will present the proposals for a permanent commission and amendment of the bicycle ordinance to the council for action.

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Swine flu may cripple businesses

U.S. issues a stern warning

BY KIMBERLY GEIGER, Chicago Tribune

WASHINGTON - Federal officials urged businesses and other employers Wednesday to prepare for a widespread outbreak of swine flu this fall that could result in high rates of sustained absenteeism and leave crucial posts vacant.

Employers should cross-train workers so that vital functions are covered and must take active steps to ensure that the H1N1 virus that causes the flu does not spread, officials said.

Such steps include aggressively cleaning work areas, encouraging hand-washing and sending employees home at the first hint of flu.

"We like to praise the Puritan work ethic," said Commerce Secretary Gary Locke, who appeared at a news conference with other top federal officials. But "common sense" would be a better response to the likely outbreak of the flu, he said.

At the same time, federal officials are not sure how bad the outbreak will be.

"In some areas, there may be a lot of flu; in other areas, very little," Health and Human Services Secretary Kathleen Sebelius said.

Employers should consider curtailing face-to-face meetings and even limit company travel to prevent the possible spread of the disease, Locke said.

Federal officials are urging a "hands and home" approach -- keeping hands clean by washing and sanitizing them, and keeping ill workers at home.

"Be responsible and understanding for the absenteeism that needs to occur with this strain of the flu," said Homeland Security Secretary Janet Napolitano, joining Locke and Sebelius at the news conference.

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Two billion hit?

The pandemic: The World Health Organization has estimated that up to 2 billion people could be sickened during the swine flu pandemic, which already is known to be responsible for more than 1,400 deaths.

The vaccine: About 45 million doses of swine flu vaccine from GlaxoSmithKline, Novartis and several other companies are expected to be available by mid-October. Federal officials plan to begin shipping vaccines out to the states when they become available.

How to fight it
According to the U.S. government, businesses should help fight swine flu by:

- Allowing sick workers to stay home without fear of losing their jobs.
- Allowing workers to stay home to care for sick family members.
- Encouraging employees who are at risk for swine flu to get the vaccine as soon as it becomes available.
- Keeping work areas clean, stocking up on hand sanitizers and other supplies, and sending employees home at the first sign of flu symptoms.


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ECU's Jamar Bryant makes a one-handed TD catch over State's Javon Walker in a 2007 game in Greenville.
Ethan Hyman, Staff file photo by Ethan Hyman

ECU's Jamar Bryant, left, makes a one-handed TD catch over State's Javon Walker in 2007 game in Greenville.
Ethan Hyman, Staff file photo by Ethan Hyman

ECU's Jamar Bryant, left, fights for yards after a catch as UNC's Durell Mapp tries to pull him down in 2007.
Sara D. Davis, AP file photo
Bryant hopes to help ECU

Receiver aims for successful return from suspension

BY KEN TYSIAK, Staff Writer

GREENVILLE - Between gasps after an exhausting morning practice in brutal heat, East Carolina wide receiver Jamar Bryant described his disappointment of last season.

After catching 19 passes in the first five games, Bryant was suspended for the remainder of the season for an unspecified violation of team rules. He watched helplessly as the Pirates won the Conference USA title and lost to Kentucky in the Liberty Bowl.

"I made a mistake," Bryant said. "People make mistakes. You've got to learn from them, basically. I learned from it last year, sitting out. It hurt me a lot watching those guys go out there and play. We won, and I was happy we won. The games we lost I was really sad, because I thought I could be out there helping."

Bryant, East Carolina's leading receiver in 2007, could be out there helping again this season. He is practicing with the team, and coach Skip Holtz has said he has done everything he has been asked to do, but Bryant still has more things he needs to do to be eligible for the Pirates' Sept. 5 season opener against Appalachian State.

It's clear that Holtz has high hopes for Bryant and an offense that is recharged for the 2009 season. Holtz prefers to play a wide-open spread offense and has done so throughout most of his tenure at East Carolina.

A debilitating run of injuries and suspensions, including Bryant's, caused Holtz to change direction in the middle of last season. The Pirates became so conservative that it looked more like Skip's father -- Woody Hayes admirer Lou Holtz -- was running the offense.

During one stretch, East Carolina scored fewer than 20 points in four straight games, which is shocking for a team in scoring-crazed Conference USA. But the Pirates won three of those games.

"We were going to try to control it, we were going to punt it away, we weren't going to do anything foolish and turn the ball over and put our defense in poor field position," Holtz said. "We were going to try and win it old school."

They did. But now Holtz is ready to get back to his more modern brand of football.

A new running back, Kentucky transfer Brandon Jackson, has rocketed up the depth chart and impressed with his quickness.

Dominique Lindsay returns in the backfield after missing all of last season with a knee injury.

Speedy playmaker Dwayne Harris is back at wide receiver after missing the last four games of last season with a foot injury. If Bryant can get on the field, too, senior quarterback Patrick Pinkney will have two talented, dangerous targets.

As a sophomore, Bryant led East Carolina with 48 catches and 704 receiving yards. After his fast start in 2008, his weight ballooned from 208 pounds to about 230 during his suspension.

Although he was stronger, he couldn't move as well carrying all that weight. His back and knees hurt when he ran. He consulted a nutritionist, quit a late-night snacking habit and reported to camp at about 212 pounds.

He admitted, though, that he's still a bit rusty.

"I haven't been in a game situation in a while," Bryant said. "I'm just trying to get the kinks
out. I still don't think I'm back to where I was last year. But I've got time."

Holtz said he hopes Bryant will be able to play the full season as the coach retools his offense to take advantage of the re-infusion of talent at skill positions.

With nine starters returning from a unit that gave up the fewest points per game in Conference USA (21.1) last season, the Pirates are loaded on defense. But Holtz said he doesn't want to be a team that just runs the ball and punts it away.

Bryant could play a vital role if he can get reinstated soon.

"We're a better football team with Jamar," Holtz said. "There's no doubt about it. And we're hopeful that he can turn and get everything done he needs to get done and he can be a part of this football team early in the season."

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August 19, 2009

Colleges Seek to Remake the Campus Tour

By JACQUES STEINBERG

CONWAY, Ark. — For as long as high school seniors have been visiting colleges, it seems, there have been tour guides walking backward in front of them, breathlessly reciting statistics from a script while, hopefully, avoiding tree roots and other hazards.

Not so at Hendrix College, a liberal arts institution outside Little Rock, Ark. It is one of several dozen colleges and universities that are increasingly directing their tour guides to turn around and walk forward, and to purge their memories of all those dates from the college’s history in favor of personal anecdotes and frequent breaks for give-and-take.

Driving the overhaul of the campus tour is colleges’ desire to provide visitors a more natural, spontaneous and, ideally, engaging experience — and to relieve mothers, in particular, of the nagging worry that their guide might, at any moment, fall backward over a bicycle rack.

The changes have been fortunate for Katie Rice, 21, a senior at Hendrix and longtime guide here, who does not even know when her college was founded — “I just tell my groups it was a long time ago,” she says — and who never did get the hang of walking backward.

“Look at these shoes,” she said the other day, after leading a campus visitor along red-brick paths lined with crape myrtles. “They are very basic sandals. I fall just walking forwards.”

The remaking of the campus tour is the latest development in the pitched competition among colleges to woo the most talented applicants.

Among the institutions that now encourage their tour guides to walk forward, alongside visitors, are big ones like the University of Texas at Austin, American University in Washington, and the State University at Oswego, N.Y., as well as smaller colleges like Trinity University in San Antonio, Albright in Reading, Pa., and Spelman in Atlanta.

Though some have done so on their own, others have been urged to turn their guides around by a private consulting firm called TargetX. It charges colleges thousands of dollars to “audit” their tours and look at other aspects of how they present themselves to visitors, including visitor parking.

“Walking backwards is just not conducive to having a conversation,” said Jeff Kallay, a principal at the firm whose job title is experience evangelist. “Not only are you talking at someone, but it’s also so stressful to watch. We have seen guides hit signs and trees and lampposts.”

Three years ago, Hendrix put its campus-visit program under the direction of a former Disney employee named Jennifer McKenzie and retained TargetX to provide annual training for its student
guides, who are volunteers. The endeavor is considered so crucial — the college spends $1.5 million, or 4 percent of its annual operating budget, on marketing and student recruitment — that freshmen are deemed too inexperienced to participate.

Since 2006, the number of students visiting Hendrix each year has risen by more than 300, or 25 percent, to 1,765 this year — with the number of applications increasing by a similar percentage, to 1,625. (The incoming freshman class is 430.)

After showing prospective guides at Hendrix examples of tours that were so staid they became easy targets for pranksters — including a video of a University of Virginia tour upended by streakers — Mr. Kallay and Ms. McKenzie work with the students to hone the stories they might tell of a favorite professor or experience.

That the guided “walks” at Hendrix — they are not even called “tours” any more — are more relaxed than those at many of its competitors was obvious to Katie Bigbee of Corrales, N.M., who visited in mid-July.

“My father and I noticed on the Hendrix tour that the guy wasn’t rehearsed, which we really appreciated,” Ms. Bigbee said. “I didn’t need to know all the facts and when the buildings were built. I was going to so many colleges that the facts weren’t sticking.”

What did stick was her guide’s telling her group about a theme night in the cafeteria that commemorated the fall of the Berlin Wall.

“He told us how, on the east side of the room, the cooks removed all the salt and pepper shakers, took all the tablecloths away and served really bad food,” she said. “On the west side, they gave nice German candy and decorated the place really well.”

“That made me want to go there and experience that,” she said.

By contrast, Ms. Bigbee said that her guide at Elon University in North Carolina not only walked backward but followed an obviously set route.

“One thing I didn’t appreciate at Elon is that he took us through an extensive parking lot to look at the sports center,” she said. “None of us had expressed any interest in the sports center.”

Which is not to say that walking backward does not have its virtues.

At Franklin & Marshall in Lancaster, Pa., Emily Pavlos, a senior, says she would be unable to show her tour groups everything the college wanted them to see in the 90 minutes allotted without walking backward.

“Making eye contact with them while I’m walking also helps me make a connection with the parents,” Ms. Pavlos added.

So, too, at Ohio State University, a TargetX client that nonetheless advises its tour guides to walk backward. “We are still true believers,” said Jill Hampshire, a university administrator.
Hendrix, though, has emerged as enough of a pace-setter for the modern campus tour that administrators from as far away as Bennington College in Vermont have traveled to Arkansas to see the program.

And yet, Hendrix considers its tour strategy so proprietary that when a direct competitor that it would not name — a college that, like Hendrix, is featured in the book “Colleges That Change Lives” — recently asked if it could send a delegation on a tour, the request was turned down.

“That would be like Coke letting Pepsi into their plant,” said Laura Martin, the director of admission at Hendrix.

An earlier version of this article misstated the location of Franklin & Marshall College. It is in Lancaster, Pa., not Carlisle.
Adding Personality to the College Admissions Mix

By ROBERT TOMSHO

For years, colleges have asked applicants for their grade-point averages and standardized test scores.

Now, schools like Boston College, DePaul University and Tufts University also want to measure prospective students' personalities.

Using recently developed evaluation systems, these schools and others are aiming to quantify so-called noncognitive traits such as leadership, resilience and creativity. Colleges say such assessments are boosting the admissions chances for some students who might not have qualified based solely on grades and traditional test scores. The noncognitive assessments also are being used to screen out students believed to be at a higher risk of dropping out, and to identify newly admitted students who might need extra tutoring.

Big nonprofits that administer standardized admissions tests, including the College Board, the Educational Testing Service and ACT Inc., are also getting in on the trend. ETS, for instance, which administers the Graduate Record Examination, or GRE, recently unveiled a "personal potential index" designed for schools that want to replace traditional letters of recommendation for prospective grad students with a standardized rating.

"There is quite a bit of demand for these [noncognitive] instruments," says David Hawkins, director of public policy for the National Association of College Admissions Counseling. Educators say the use of such assessments is likely to grow as some schools search for new tools to recruit more minority and low-income students. At the same time, budget pressures are forcing public institutions in states like California and Florida to find new tools for selecting incoming students.

Critics contend that efforts to quantify noncognitive traits are often unreliable. And, they say, as the new systems of evaluation become widespread, prospective students will figure out how to game the answers to their advantage. Some legal advocates also say the assessments could stir affirmative-action controversy if they are used solely to give a boost to minorities' admissions chances.

Many colleges have asked personality-related questions for years as part of the admissions process, but the results were seldom scored in a standardized, numerical way, says William Sedlacek, a retired University of Maryland education professor whose "noncognitive questionnaire" has been used by various colleges and by the Bill and Melinda Gates Foundation to award scholarships. He says such assessments are reliable and that if students and counselors figure out how to manipulate them they will have to be revised. "Right now, these things are useful," Dr. Sedlacek says.

Boston's Torch Scholars

Boston's Northeastern University uses noncognitive assessment for its Torch Scholars Program, which is designed to identify applicants who show leadership potential or have overcome adversity but probably wouldn't qualify for the university based solely on their high-school grades and test scores.

Torch scholars have average SAT scores about 200 points below the typical Northeastern student, says Phalomena Mantella, senior vice president of enrollment management. Still, about 90% of them stay on from their freshman to sophomore years, roughly akin to the university-wide average of 92%. Nationwide, the so-called persistence rate for freshmen at four-year schools is just under 70%.

Simona Vareikaitė, 20, a Northeastern junior majoring in criminal justice, said her high-school grades were good but she didn't do well on the SAT. Although she found her college's personality assessment to be "weird," it gave her a boost in the competition for the Torch scholarship. "The whole process kind of opened a new opportunity for me," says Ms. Vareikaitė, who after immigrating from Lithuania started cleaning offices as an 11-year-old to help support her family.

DePaul University, in Chicago, made one noncognitive assessment part of its application process for the first time for this fall's freshman class. Jon Boeckenstedt, associate vice president of enrollment management, says it was mainly used to make decisions about students who were just over or just under DePaul's typical admission requirements.

Of the 8,500 freshman expected this year, he estimates about 150 got in because of how they answered four
personality-assessment questions. But " hackadossial responses" resulted in the rejection of about 50 applicants who were being considered for admission. Among the questions, to be answered in about 100 words each: "Describe a goal you have set for yourself and how you plan to accomplish it. How would you compare your educational interests and goals with other students in your high school?"

At Oregon State University, every would-be undergraduate must now provide 100-word answers to six questions that are part of what the school calls its "InSight Resume." One question, designed to measure applicants' capacity to deal with adversity, asks them to describe the most significant challenge they have faced and the steps they took to address it. Another asks them to describe their experiences facing or witnessing discrimination and how they responded. Every answer is reviewed by two admissions officers and scored on a 1-to-3-point scale.

Michelle Sandlin, OSU's admissions director, says the university implemented the assessment in 2004 in part to help it attract and keep minority, low-income and other applicants who don't quite have the grades and test scores OSU generally looks for. Low scores on the InSight Resume aren't used to disqualify students with adequate grades and test scores, she says.

Nonprofits also are developing noncognitive evaluation systems. A " student readiness inventory" created by ACT is being used by Northern Arizona University, Chicago's Wilbur Wright College and more than two dozen other schools to identify admitted students with traits that might make them dropout risks, which could result in their getting extra help. The students are asked to respond to 109 statements and are rated by their level of agreement with items such as "I turn in my assignments on time," and "I'm a patient person."

The "personal potential index" recently unveiled by ETS has been piloted over the past three years in an Arizona State University effort to get more minority students to take the GRE and attend graduate school. Applicants are asked to identify past professors, supervisors and other recommenders. These people are sent a form asking them to rank applicants from "below average" to "truly exceptional" on items such as whether they support the efforts of others or accept feedback without getting defensive.

And the College Board, which administers the SAT, is working with researchers at Michigan State University to develop a questionnaire designed to measure applicants' judgment and behavior by asking them how they would respond to various situations, such as a group research project where one student doesn't contribute. A College Board spokeswoman says the company has not yet decided how the questionnaire would be administered or to whom.

Gaming the System

Not everyone thinks such assessments are a good idea. Relying on applicants' writing about themselves won't always result in reliable information, says Howard Gardner, a Harvard education professor and author who has studied human intelligence. "There is a real danger in [applicants] gaming questions like that," he says.

And legal-advocacy groups that have fought racial preferences in college admissions say the new assessment systems could face court challenges if white and minority students are measured differently. "They can't apply them in a discriminatory fashion or adopt them solely for the purpose of increasing minorities in their classes," says Michael Rosman, general counsel for the Center for Individual Rights. The group represented plaintiffs before the Supreme Court, which in a pair of 2003 decisions upheld the use of minority status to boost the chances of an applicant in college admissions decisions, but ruled against points-based admissions formulas and said applicants should be considered case-by-case.

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Doctor shortage looms as primary care loses its pull

By Janice Lloyd, USA TODAY

Family medicine is what Doug Dreffler has wanted to practice ever since he was a second-year medical student 14 years ago at Ohio State. He listened to a different drummer from the majority of doctors entering a workforce in which subspecialties generally are considered more glamorous — and lucrative.

"All the sexy shows on TV are about ER work or surgeons," Dreffler says. "Grey’s Anatomy, ER. Whatever it may be. There is no Marcus Welby on TV — ‘cause it’s just not cool."

Television aside, medical specialists cite an array of reasons why more medical students aspire to be Grey’s Anatomy’s McDreamy neurosurgeon Derek Shepherd (Patrick Dempsey), than wise family practitioner Marcus Welby, played by Robert Young in the 1970s series.

Longer days, lower pay, less prestige and more administrative headaches have turned doctors away in droves from family medicine, presumed to be the frontline for wellness and preventive-care programs that can help reduce health care costs.

The number of U.S. medical school students going into primary care has dropped 51.8% since 1997, according to the American Academy of Family Physicians (AAFP).

Considering it takes 10 to 11 years to educate a doctor, the drying up of the pipeline is a big concern to health-care experts. The AAFP is predicting a shortage of 40,000 family physicians in 2020, when the demand is expected to spike. The U.S. health care system has about 100,000 family physicians and will need 139,531 in 10 years. The current environment is attracting only half the number needed to meet the demand.

At the heart of the rising demands on primary-care physicians will be the 78 million Baby Boomers born from 1946 to 1964, who begin to turn 65 in 2011 and will require increasing medical care, and the current group of underserved patients.

GENERAL PRACTICE: New doctors avoiding most-needed, worst-paid field
SURGEONS: U.S. is short on them, too
ONCOLOGY: Cancer doctor shortage expected

If Congress passes health care legislation that extends insurance coverage to a significant part of the 47 million Americans who lack insurance, the need for more doctors is going to escalate.

The primary-care doctor — a category that includes family physicians, general internists and general pediatricians — has been held up as the gatekeeper in keeping people out of emergency rooms and controlling health care costs. But medical analysts say giving this limited pool of doctors responsibility for millions more patients is problematic.

"That tsunami wave (of patients) is going to be huge," says Bruce Bates, interim dean at University of New England’s college of osteopathic medicine in Biddeford, Maine.

Finding a doctor will get increasingly difficult, waits for appointments will grow longer, and more sick people will turn to crowded emergency rooms, says Ted Epperly, president of the AAFP, an association that represents more than 89,000 physicians. Or, if a patient goes to a doctor’s office, he might not be treated by his doctor.

"We have overwhelmed family physicians have been dealing with patients to have office visits overseen by a nurse practitioner or a physician’s assistant, some of whom can dispense certain prescriptions and recommend specialists," Epperly says.

"At the time we need family-care physicians the most, we are producing the least," Epperly says. "The nation’s medical schools are failing to produce a workforce that is essential to caring for America’s communities."

How the gap is filled

In March 2009, U.S. medical school graduates filled only 42% (1,063) of the 2,555 resident positions for family medicine. More than 200 of the positions were left untilted nationwide. The majority of other spots were filled by non-U.S. citizens educated internationally (20.7%), graduates of colleges of osteopathic medical schools (10.5%) and U.S. citizens educated internationally (18%).

Even the graduates of international medical schools and colleges of osteopathic medicine are showing signs of losing interest in primary care. Osteopathic training is nearly identical to traditional medicine but focuses more on the inner workings of the musculoskeletal system and puts a big emphasis on the importance of family care.

Bates says only 26% of the University of New England’s grads chose family practice this year, compared with 40% "when I started this institution 20 years ago.”

The shortage, which Epperly calls a “crisis,” has gained the attention of the politicians looking at revamping the nation’s health-care system.

"Patients with access to quality primary care are more likely to remain healthy and prevent costly and distressing chronic diseases, but the current shortage of primary-care doctors prevents too many Americans from getting the care they need, especially in rural areas," says Sen. Max Baucus, D-Mont., who plays a key role in Congress’ health care debate as the chairman of the Senate Finance Committee.

Congress is looking at bills that could help doctors who choose primary care with loan forgiveness or other debt relief and payment increases for their services.

Medical school tuition and expenses generally range from $140,000 to $200,000, according to Merritt Hawkins & Associates, a leader in recruiting and placing physicians. A primary-care doctor usually makes $120,000 to $190,000 a year, compared with $530,000 and higher for those in neurosurgery, according to the Merritt Hawkins salary survey from 2007.

Dreffler is still paying back his loans to Ohio State but says he made the right career choice.

"Absolutely. For me it's about why I came into family medicine," he says. "I consider it a privilege. I like people. I like relationships. That's what family medicine is about. It's not about doing procedures or a cool heart bypass. You get to be part of your patient's life story."
He has seen interest in family medicine change as the medical director of training programs at Family Health Centers in Concord, N.H., and Hillsboro-Deering, N.H.

"More than half of the spots filled are by non-U.S. medical graduates," Dreffer says. "Our pool used to be mostly U.S. medical graduates." One problem with using foreign students is the draining of talent from their home countries. Another is their English-speaking skills, which might make communication with patients more challenging. All are required to take stringent exams in the USA, however. An upside is their willingness to work in underserved areas often rejected by U.S. graduates, including rural areas and inner cities, according to studies done by the American Medical Association.

Part of the reason U.S. medical school graduates are rejecting primary care, Dreffer and Bates say, is because some U.S. schools promote subspecialties or research, higher-paying careers with more prestige.

"I would put a lot of weight on the culture of the school being a big influence," Bates says, adding that doctors pursuing family medicine often will hear, "you're too smart to be in primary care."

Eleven of the top allopathic (conventional medicine) medical schools, including Harvard and Johns Hopkins, have internal-medicine departments but lack separate family-medicine departments. Most internal-medicine doctors get out of primary care and go on to specialties within five years of leaving school, says AAFP's Perry Pugno, director of the division of medical education.

"I think the way you get exposure and cultivate it plays a role," he says. "In some of the bigger schools that generate more primary-care positions by percentage — some of the state schools and osteopathic schools — they have better mentorships and exposures early on."

A shift in training
Training of family-care physicians has been evolving as the supply of doctors decreases. The fictional Marcus Welby symbolized an era in which many doctors handled nearly all aspects of a patient's care. That is not always the case now.

Pippa Shulman, 35, completed two residencies at Dartmouth and begins her first year of family practice Sept. 1 in Massachusetts for Harvard Vanguard Medical Associates, where the team approach is practiced. She is a graduate of the UNE college of osteopathy.

Her residencies "fed into what is the hot topic now: the patient-centered medical home and really creating a primary-care home for patients," she says.

The medical home approach surfaced in the '90s and delivers service that is supposed to be better-coordinated, family-centered and more accessible with expanded hours. Nurse practitioners and physicians assistants play bigger roles in office visits and relieve physicians of other time-consuming tasks so they can focus on the continuity of quality care. "Home" implies continuous, preventive care rather than seeing the doctor only for acute problems.

Experts say getting more doctors to be generalists is an uphill climb in a health care system that rewards doctors based on the procedures they do.

"The biggest problem is the payment model," says Sameer Badlani, an instructor at the University of Chicago's school of medicine. "The more procedures you do, the more money you make. That is why, in a procedure-based specialty, a physician can make about four to five times the annual salary a primary-care physician can earn."

'There is hope'
And that's why specialists like Grey's Anatomy's McDreamy are envied and why fewer students will follow Shulman's path into family medicine, Epperly says.

"I really love being a generalist," Shulman says. "Primary care is fun. I always say I'm a generalist in a specialist's world."

Badlani urges students to consider primary care.

"I give a lecture to medical students basically on not letting debt affect your career choices," he says. "And my aim was just to convince one out of the 100 students who attend. That's where I set my benchmark. If I can convince just one person, I will have done my job.

"I have had three or four students come back to me and tell me they did not want to go into primary care but now they will rethink. There is hope."

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