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Raj Wiener: A Profile

by Peter Pratt, Senior Consultant for Health Policy

Raj Wiener is an attorney who leads Michigan's public health efforts. She is only the second woman and first nonhealth professional to hold the position of director of the Michigan Department of Public Health (MDPH). She has spent her professional career as a congressional aide and an upper-level state agency administrator, not as a member of the public health establishment. She is young, thirty-seven. If your idea of a public health director is an avuncular family doctor who has spent most of his professional life caring for patients or running a local public health department, Raj Wiener couldn't surprise you more.

If, however, you look at the daily tasks facing the public health department—educating the public on subjects ranging from prenatal care to AIDS to smoking; making environmental health policies; investigating sources of disease; promoting and assisting in substance abuse prevention and treatment; regulating public water supplies, restaurants, health facilities, and migrant labor camps; producing vaccines; registering vital records and statistics; performing laboratory tests; and, operating state veterans' facilities—you might come away with a different sense of the qualifications for the director's position. Managing a $400 million budget and more than 2,000 employees requires skill in setting priorities and juggling numerous and often conflicting tasks, issues, and private interests—in other words, an administrator with conviction, negotiating skills, and political savvy. Wiener calls it "the art of combining personal beliefs, science, government, and people to organize programs that protect people from preventable death, disease, and disability."

Raj Wiener is well suited to this job description. She spent eight years as an aide to Michigan Congressman Bob Traxler (as press secretary, federal programs and grants specialist, and staff assistant to an appropriations subcommittee). "As staff, we had to deal with an incredible breadth of issues. We had to become overnight experts on any issue that fell from the sky so that we could advise our boss. This exposure was tremendous," she explained.

This need to juggle tasks and issues prepared her well for subsequent work in state government. Her first concentrated work on health policy occurred when she served as deputy director of the Michigan Department of Licensing and Regulation, where she oversaw the Bureau of Health Services. Wiener chose the job because "[working with Traxler] had given me great issues management experience, but I had limited experience in personnel management. At Licensing and Regulation, I got it working with Betty Howe, an accomplished woman manager." She then moved over to head the MDPH Bureau of Health Facilities and was responsible for handling licensing of health facilities and the complex web of regulations involved in granting or denying permission to health facilities for capital expenditures under the certificate of need (CON) program. As for the connection among the three jobs she held prior to becoming public health director, Wiener explains that "each job has its own unique window looking in on the health planning system."

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Despite the fact that her experience in state government had been in regulation — of insurance companies, health professionals, and health facilities — she relishes most the duties of the public health director that relate to improving the health of the state's residents. "Our goal is to make Michigan people live the healthiest lives possible, free of disease and exposure to environmental hazards," she says. The role of public health, as she sees it, is to encourage people to take responsibility for their health. "Our health is in our own hands. Many of the major killers are no longer infectious disease, but chronic disease brought on by the ways and habits of life—smoking, drinking, lack of exercise, failure to eat the right foods. We need to teach people about personal self-government. We must re-educate the public about healthy lifestyles."

She brings strong convictions to her job: "All my life I was taught the value of avoiding alcohol, cigarettes, and drugs, of a strong education and family, of self-respect and respect for the dignity of every human life. Many children are not taught these things."

While adults are the target of many MDPH education programs, it is no surprise that Wiener focuses on children. "We want to work aggressively on children before they develop unhealthy behaviors. It's much harder for adults, whose ingrained behaviors are not easily going to go away."

Wiener has high hopes for a sentinel warning system that identifies high-risk children within hours of their birth. "Trained health professionals and social workers will help teach the mother basic parenting skills — feeding and bathing. The bottom line is to make sure that the child is protected where neglect and abuse are suspected." She also speaks highly of Healthy Start, the $13 million program proposed by the governor in last month's State of the State address that would provide full health insurance coverage for children under age 10 whose families are uninsured or underinsured. "It's very important when a parent puts off getting care for something as simple as a child's ear infection because they have no insurance; it can blow up into a serious problem." Wiener is more cautiously optimistic about a proposed 20th state department, the Children and Families Services agency that would bring together all state programs for children. "The focus on the coordination of services is good. Often the same child is in several different systems—social services, public health, the courts—and each looks at part of the child, not the whole child." She points out, however, that some states are now disbanding such agencies. "In Michigan, we'll do pilot programs. No one will dispute programs that work, and pilots are a way to find out what works," she says.

Despite all the attention paid to health and the cost of health care, Wiener notes that prevention receives too little attention among policy makers, especially when it comes to budget priorities. "Too many policy makers energies flow toward problems and not solutions. We in public health must educate policy makers about the importance of prevention. Public health is prevention. Right now, cost and access are everyone's biggest worries. Prevention is the key to keeping down costs and improving access."

This does not mean that Wiener slights her department's regulatory duties. In fact, it is safe to say that Governor Blanchard appointed her as co-chair of his health care cost-management team (along with Larry Tokarski, director of the Business Climate Policy/Legislation Group in the Commerce Department) because he valued her perspectives on how regulation and prevention affect health care costs. Running the regulatory arm of the department has made her see that "regulation alone can't control quality or cost. By its nature, licensing provides only minimal standards for health professionals and facilities. It makes sure that the car runs properly, not whether the car is a Cadillac or Chevette." Only health care providers can assure quality, she adds. "The MDPH can offer guidelines, but providers can police it best. It's very difficult to measure quality health care. We're dealing with bodies, and it's obviously not the same as

quality control in manufacturing." As for costs, MDPH can regulate the dissemination of technology through the CON process, she says, but "we can't control utilization, and that's where the larger expenses occur."

Wiener's assessment of the work of the governor's health care cost-management team reflects her understanding that, especially in an area as volatile as health care, process can be as important as product. "Everyone on the team had to work together. We didn't decide that one group was the villain and blame it all on them." In fact, she counts the CON reform package as one of her biggest accomplishments because "it brought players together who wouldn't sit at the table and talk to each other. There is incredible change ahead in health care. Thanks to CON reform, the dialogue between adversaries has begun."

Wiener says this all with an air of quiet determination. She shows no anger or frustration; she is not inclined to harangue others in health care or government who do not see her priorities as theirs. She seems at ease with the contradictions that any administrator must face: on the one hand, she has definite ideas for improving the health of the population and is baffled at times by the unnecessary roadblocks that prevent her ideas from becoming reality; on the other hand, she understands that beneficial public policies emerge only after protracted discussions among groups whose interests make compromise difficult.

Properly balanced, this idealism and realism can serve a person well in a position that requires commitment and the political savvy to forge good public policy out of that commitment. Raj Wiener is known for her political savvy, for her ability to work with competing factions. She laughs when asked about this. "When we walk into a meeting where we know things will be controversial, I tell myself, 'Raj, you're going to be diplomatic.' But sooner or later, I blurt out exactly what I think. You have to be honest with all the different groups. If we can build trust—if they know I'll be honest and I know they'll be honest—we can accomplish a lot."

She doesn't gloss over problems, however. "Many of the groups I work best with are those with whom I disagree the most. When I first came to public health, we didn't agree on much with the hospitals or with local public health departments. We still disagree on plenty, but we sit down and thrash it out, and we communicate honestly."

In the past, some people confused this political savvy with political influence. Wiener carries long and strong credentials as a Democratic party activist. Her husband of six years is the former state party chair, Rick Wiener, and they are close friends with Governor Blanchard. Her 18-month stint as acting director of the department was necessary because state law requires the director to have five years' experience in public health, a qualification she met in March of last year. She was named director four months later.

Time has laid to rest any qualms people had about her ability to lead the MDPH. Without partisan wrangling, the Republican-controlled Senate confirmed her as director in September 1989.

Wiener is unperturbed by previous concern about her qualifications. "In negotiating the political terrain, it is an incredible advantage to be married to the guy who knows Michigan politics better than anyone. But I've always been independent, and I'm accustomed to being treated as independent. Whether I'm qualified has never been a problem among people who know me. Whatever slight perception problems there were among people who didn't know me disappeared once I worked with them," she says without defensiveness.

Wiener has followed what appears at first glance to be a circuitous route to her present position. At age 12, she emigrated with her mother and two brothers to Michigan from her birthplace of Hyderabad, India. Her mother was pursuing a doctorate in child psychology at Michigan State University. After graduating from Saginaw Valley State University with a B.S. in biology (tutoring fellow students in biology, calculus, French, and music theory, working as a maid and cook, and singing rock and country and western music to help pay tuition) Wiener headed for the nation's capital. Although she worked on innumerable issues for Congressman Traxler, her main interest was international trade. She earned her law degree by attending evening classes at the Catholic University of America's Columbus School of Law.

Practicing law never really crossed her mind. "You need the degree on Capitol Hill to do committee work, to work on legislation." Working for Traxler was a very worthwhile course of study: "When I went to Washington, I expected to find a callousness in people. I was happily surprised. Traxler cares very deeply about his constituents, and I learned a lot about how to blend caring about issues, government, and politics from him."

Blending caring about issues, government, and politics takes quite a bit of her time these days. "I have no free time," she laughs, and adds that "this is a phase of my life when I don't expect to have free time." She relishes the time she spends with her three-year-old daughter, Rachel. "We have fun together," she says, smiling. "What would I do if I weren't public health director? One thing I'd do is spend more time raising my daughter and adopting a few dozen more."

The course of Rachel's artistic development can be seen on one huge wall of her mother's office. Finger paintings, macaroni and glue on construction paper, bright colors, and stick figures and houses are all there. The other walls are decorated with family portraits, ink and pencil drawings of freshwater fish, and two paintings of a mother and child. A poem about "the kind of mind set you must have to bring about social change" by India's esteemed Nobel laureate, Rabindranath Tagore, is never more than a glance away on the wall behind her desk. And there's the glass bowl of condoms, the business card of public health officials. Her office is big but unassuming; its walls are filled as a home's walls would be. It is a testament to her interests and not her accomplishments.

Her accomplishments are many, even in her short tenure: revamping the WIC program in only a year; CON reform; the expansion of maternal and child health programs (Michigan was the first state to expand prenatal care to all Medicaid-eligible women; the program is a national model, one of the two best in the country according to the Institute of Medicine); and antismoking initiatives, especially those targeting young people. As if embarrassed by being asked to toot her own horn, she adds, "we just plug on; we muddle through." While the biggest thrill for her is "to see policies that you've implemented make a difference in people's lives," she also laments that "there's so much to do. Everyday, so many different things: Agent orange, veteran's facilities, AIDS, infant mortality, fish advisories, toxic site evaluations, testing drinking water, are the apples safe to eat?, is a nursing home mistreating a patient?, is the vaccine delivery truck on schedule?" She takes a breath. "And each of the 48 local public health departments has its own unique needs. You always feel like you need to do more."

With all this work, Wiener isn't looking too far into the future. "I'll always work with people, but public service doesn't have to be government. I'm probably too old to start all over again," she says, but a few minutes later she says, "I'm still young." She apologizes for her coughing and then jokes, "it doesn't look very good for the public health director to have a cold for five weeks."