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HEARING BEFORE THE COMMITTEE ON HUMAN RESOURCES UNITED STATES SENATE NINETY-FIFTH CONGRESS

SECOND SESSION

ON

ROBERT C. BENEDICT, OF PENNSYLVANIA, TO BE
COMMISSIONER ON AGING

FEBRUARY 7, 1978

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NOMINATION

TUESDAY, FEBRUARY 7, 1978

U.S. SENATE,
COMMITTEE ON HUMAN RESOURCES,
Washington, D.C.

The committee met, pursuant to notice, at 9:10 a.m. in room 4232, Dirksen Senate Office Building, Senator Thomas F. Eagleton presiding pro tempore.

Present: Senators Williams, Kennedy, Eagleton, Cranston, and Javits.

Senator EAGLETON. Good morning, ladies and gentlemen. The Committee on Human Resources meets this morning to take testimony from 10 distinguished citizens who have been nominated by the President for important offices in the executive branch.

We have before us for consideration a Commissioner Designate on Aging, five nominees to be members of the Board of Directors of the Legal Services Corporation, an Assistant Secretary Designate for Mine Safety and Health within the Department of Labor, a nominee as member of the Railroad Retirement Board, two nominees to membership on the National Council on Educational Research and a nominee as member of the Board of Trustees of the Harry S. Truman Scholarship Foundation.

We welcome the nominees and look forward to a productive discussion with them about their impending duties. The first nomination before the committee is that of Robert Benedict, to be Commissioner on Aging. Senator Heinz of Pennsylvania will introduce Mr. Benedict.

First, however, we have a statement on behalf of the chairman of the committee, Senator Williams, and I will make it a part of the record at this point.

OPENING STATEMENT OF SENATOR HARRISON A. WILLIAMS, JR.,
CHAIRMAN, COMMITTEE ON HUMAN RESOURCES

The CHAIRMAN. Mr. Benedict comes before the committee with both academic and practical experience in the area of aging. His most recent assignment as Commissioner of the Office on Aging for the State of Pennsylvania has given him a rich background in policy and administration which will be of great value in his new duties. Though Mr. Benedict is only 38 years old, I know he has an intimate knowledge of, and has keen sensitivity for, the problems experienced by the elderly.

The Older Americans Act is currently being considered for extension and reauthorization. This is the time for real vision, creative thinking, and progressive program development to improve the quality of life for our senior citizens. Mr. Benedict's experiences show that he is most

concerned about the problems facing future generations of elderly. He is aware that members of the aging community have different needs and require varying degrees of services, depending on whether they might be urban, rural, poor, or otherwise situated.

I know that, with Mr. Benedict's qualifications and past experiences, he will not only carry out the mandate as required by the Older Americans Act, but can use the Office of Administration on Aging to become a true advocate for the older Americans community throughout the Federal Government.

Senator Eagleton. Senator Heinz.

STATEMENT OF HON. JOHN HEINZ, A U.S. SENATOR FROM THE STATE OF PENNSYLVANIA

Senator HEINZ. Mr. Chairman, thank you very much. I appreciate the opportunity to be with you today for these important hearings. I am here, as you know, to introduce Robert C. Benedict and to express my strong support for his confirmation as Commissioner on Aging.

I can speak with some personal knowledge of Bob Benedict, because over the past several years my office and I have had frequent occasions to work with him on a variety of issues affecting older people in my home State of Pennsylvania. In each one of my encounters with him—even in those rare instances, and they have been rare, when we may have disagreed—I have been sincerely impressed by Mr. Benedict's knowledge, his skill, his sense of dedication to the work he has undertaken.

There is no doubt in my mind that he is a committed advocate for the welfare and dignity of older people. Just as important, he is a capable, competent, and creative administrator who can insure that services are made available to the elderly in a responsive, efficient, and accessible fashion.

While I wish to be brief, and I will be brief, let me just say a few words about Mr. Benedict's work as commissioner of aging in the Commonwealth of Pennsylvania, because his experience there bears directly on his fitness to serve here in the post for which you are considering him today.

The most important task that Mr. Benedict faced as our commissioner was to effectively implement on a State level the programs created by the Congress through the Older Americans Act. He did an extraordinarily successful job, and I think the service network he helped create in my State represents a model of which we at the Federal level can be proud. He played an extremely active role as Commissioner in seeking to liberate aging programs from the narrow constraints of the "welfare mentality," and was careful to keep our State's service programs out of the hands of the public relief system.

He also demonstrated a clear sense of innovation that allowed local area Agencies on Aging to make the most of their resources with a minimum of needless bureaucratic restrictions, and that is a talent we should welcome at any level of administration.

In summary, Mr. Chairman, I think that Bob Benedict has shown himself to be an extremely able public servant who cares about older people, who understands their needs and who has sought to provide services in an effective and in a compassionate way. If his experience

in Pennsylvania is any guide I am sure that Bob Benedict will be a Commissioner of Aging who will make this committee proud of its support for him.

I will be pleased, of course, to answer any questions. I do thank you, Mr. Chairman, for this opportunity to introduce Bob Benedict of Pennsylvania.

Senator EAGLETON. Thank you, Senator Heinz.

I have a biographical sketch of Mr. Benedict which shows his academic training and his professional experience in the field of aging, and unless there be an objection, I will ask that this background sketch be printed in the record.

[The biographical sketch of Mr. Benedict follows:]

9/19/77

PROFESSIONAL VITA

Robert C. Benedict

PERSONAL DATA

Robert Clyde Benedict
59 Oakwood Avenue
Mechanicsburg, Pennsylvania 17055

Date of Birth: 11-29-40

Family: Married -- Joanne Marie Benedict
Children -- Amy Marie (5), David Matthew (3)

Phone: (717) 697-8921 -- home
(717) 787-5350 -- office

EDUCATIONAL BACKGROUND

Undergraduate: Eastern Michigan University, Ypsilanti, Michigan
Degree: Bachelor of Science, 1965
Majors: History and Political Science
Minor: English Language

Graduate: The University of Michigan, Ann Arbor, Michigan
Degree: Master of Public Administration, 1969

The University of Michigan-Wayne State University,
Institute of Gerontology, Ann Arbor, Michigan
Certificate: Specialist in Aging, 1969

RELATED PROFESSIONAL EXPERIENCE

The Executive Office of the Governor, Lansing, Michigan
State Human Resources Council -- Staff Associate for Human
Services, 1965-1967 - concentrated on Voluntary Sector Resources

The University of Michigan-Wayne State University, The Institute
of Gerontology, Ann Arbor, Michigan -- staff associate faculty
member, Director of Short Term Training and Director of the
Residential Institute on Aging Program, 1969-1972

The Department of Public Welfare, Harrisburg, Pennsylvania
Director, Bureau for the Aging and Commissioner, Office for
the Aging, 1972 - present

Internships with: (1) The Peace Corps - Washington, D.C., 1963;
(2) The Michigan State Legislature, 1960; and
(3) The Pennsylvania Department of Public
Welfare, 1970

Professional Vita
Robert C. Benedict

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Member of the Certification Board for Homes for the Aged
for United Ministries of the Methodist Church, 1971-1973

- Consultation for:
- (1) Center on Aging, Duke University;
 - (2) International Center on Social Gerontology;
 - (3) National Center on the Black Aging;
 - (4) Institute of Gerontology - University of Michigan-Wayne State University;
 - (5) Macy Foundation; and
 - (6) National Council on Aging

OTHER EXPERIENCE

The United States Navy, 1958-1961

Organized and Directed the Campus Service Corps, Eastern Michigan University, a faculty and student volunteer organization, 1963-1965

Director, Low-Income Family Planning Program, Ann Arbor, Michigan 1968-1969

PROFESSIONAL AFFILIATIONS

The American Society for Public Administration

The American Academy of Political and Social Science

The Gerontological Society -- Co-Chairman elect, Public Information Committee

The National Association of State Units on Aging

PUBLICATIONS AND WRITINGS

Benedict, Robert C. "The Plight of Aged Indians in America", in Occasional Papers in Gerontology - No. 6 (Ann Arbor: Institute of Gerontology, the University of Michigan), 1973.

Department of Public Welfare, Caring for Elderly Persons. A report prepared by the Bureau for the Aging. Harrisburg: Department of Public Welfare, 1973.

Benedict, Robert C. "Authority Structures: Public and Private Sponsorship of Senior Centers". Unpublished paper prepared for the National Council on Aging, Washington, D.C., 1975.

Benedict, Robert C. and Hoke, Richard R. "Toward Community Services for the Aging: A State Agency Perspective", in Planning Services for Older People: Translating Objectives into Effective Programs, George Maddox (ed.), (Durham: Duke University), 1976.

Professional Vita
Robert C. Benedict

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Benedict, Robert C. "Trends in the Development of Services for the Aging Under the Older Americans Act". A paper delivered at the Belmont Conference, Gerontological Society, spring 1976. Publication date - 1977.

Benedict, Robert C. "State Governments and Aging Services: A Policy Perspective on the Future". A paper prepared for the National Governors Conference, Washington, D.C. Publication date - 1977.

Benedict, Robert C. "Who Should Live in Congregate Housing", a paper prepared for the International Center for Social Gerontology, Washington, D.C., publication date, 1977/78.

Benedict, Robert C. "Reauthorization of the Older Americans Act: A Case for Complete Overhaul", testimony presented to the House Select Committee on Aging. Mr. Claude Pepper, Chairman, August 3, 1977.

Senator EAGLETON. Mr. Benedict, before we get to the questioning, do you have an opening statement that you care to make?

**STATEMENT OF ROBERT C. BENEDICT, NOMINEE TO
BE COMMISSIONER ON AGING**

Mr. BENEDICT. I do have a brief statement.

Senator EAGLETON. We know that Senator Heinz will not be with us all morning because he has other committee hearings he must attend and if, at the outset, he has any question of Mr. Benedict, we can add that now.

Senator HEINZ. Mr. Chairman, I appreciate that opportunity but I do not have any questions.

Senator EAGLETON. Thank you very much, Senator.

Mr. Benedict?

Mr. BENEDICT. My name is Robert Benedict. I have been commissioner on aging for the State of Pennsylvania for the past 6 years. I want to thank the members of this committee for the opportunity to appear before you this morning. For the present, I can speak only from my experience as commissioner, and from my personal experience, and not yet as a representative of the administration, but I understand that you wish to know some of my initial thoughts with regard to how we should approach the reauthorization of the Older Americans Act.

My own approach to the Older Americans Act is one which treats it in a long-term time frame, longer than a particular year or a particular Congress. I prefer to look ahead and consider the sort of life we would like for older people in America over the next several decades.

As this committee knows so well, we are changing from a younger society to an older society. At the turn of the 20th century, only 4 percent of our population was over 65. Today, it is 10 percent. In another 50 years, it may be as high as 20 percent, even higher in particular communities.

With a growing elderly population, we can expect a greater incidence of disability and the likelihood of social isolation and of people living on fixed incomes. And we can expect that there may be more people in the category that we now call the "frail and the vulnerable elderly." Today, 38 percent of the elderly population is over the age of 75; by the year 2000, that figure will be 43 percent, representing as many as 12 to 13 million Americans.

As commissioner on aging for Pennsylvania, I was struck by the research that suggested that perhaps as many as one-third of the elderly population now in institutional settings might be able to remain in their communities if alternative forms of support were available to them. Those estimates and their implications for the lives of the elderly deserve very careful consideration.

Working in a State agency, I could not help but be conscious of the high cost of institutional care, the newspaper accounts of the poor quality of care, and the tragic stories of the social consequences of our disregarding those vulnerable elderly individuals who remain in the community. Every day our health and social service agencies are confronted with the need of an ever-expanding population of older citizens, many of whom are frail, poor, sometimes functionally impaired and without adequate services or resources.

I learned in that job that if terms like "home," "family," and "community" mean anything to our society, they mean a great deal more to the elderly who feel those values and their lives threatened with advancing age. I am convinced that a key to the reasonable life for older people requires building support in the community and in the living arrangements which allow these basic values to manifest themselves in the daily routine of their lives.

As I review the development of current programs, I have come to appreciate the fact that we may be dealing with a major social problem which, if it goes unnoticed and undealt with, will grow only worse. Despite our current efforts, the energy and the commitment of the many fine and dedicated individuals in Federal and State governments and legislatures, the professionals and the volunteers who work with the elderly and the organizations that work on their behalf, in too many parts of the country we cannot yet point to a coherent, comprehensive system of community services readily available to the elderly. For the people who seek those services, the result is too often frustration and disappointment.

In considering what I might like to project for the Older Americans Act and the role that it might play in the lives of the elderly over the next several decades, I hope to look beyond just the individual titles to an examination of the national goals that must be affirmed if we are ever to fulfill our society's commitment to a decent life for all of our older citizens.

I expect to be back to the Congress in a few weeks with the first steps that the administration will be taking. But I would like you to know generally some of my thinking as we approach the ways in which we might improve the lives of the elderly.

First, I believe it is important that we address ourselves to the broad and very fundamental changes that must occur if the elderly are to be effectively assimilated into our society in the future. That will touch on such sensitive areas as ageism and the negative stereotypes that are now attached to the elderly, and to the constitutional and legal rights of older people in our society.

Second, I would hope that we could address the very special needs of those elderly who are frail, vulnerable, isolated, functionally disabled, and living on fixed income. Any changes in our service delivery system would, I hope, take these very special needs into account.

Third, I believe we must think very carefully about the role of the public sector in supporting the elderly and their families when they are unable to provide the necessary resources to support themselves.

Fourth, I am convinced that a key to providing a decent life for older people lies basically in their own communities and the support those communities receive from the Government at all levels.

And, finally, I hope we might approach the issue of comprehensiveness in terms of the communities in which they live an which we hope it will be possible for older people to live in decades ahead.

Over time, that would suggest a broadened role for the Older Americans Act and for the kinds of support that might be publicly provided, including assistance we, at the Federal level, might provide to the States and communities as they attempt to provide better services available to the elderly.

Senator EAGLETON. Could I ask your indulgence and we will continue with your statement in a moment. Senator Kennedy is chairman of a subcommittee that is going to hold hearings at 9:30 and has a number of witnesses, some of whom are from out of State. I would like to yield to him at this time to ask a couple of questions. He has a series; some of them we will get in writing. This will come at the conclusion of your prepared statement.

Mr. BENEDICT. Mr. Chairman, why don't I just submit my statement for the record and I will be happy to go to questioning. I am nearly completed in any event.

Senator EAGLETON. All right.

[The prepared statement of Mr. Benedict follows:]

STATEMENT OF ROBERT BENEDICT
JANUARY 7, 1978

My name is Robert Benedict, and I have been the Commissioner on Aging for the State of Pennsylvania for the past 6 years. I want to thank the members of this Committee for the opportunity to appear before you this morning. For the present I can only speak from my experience as Commissioner, and from my personal experience, and not as a representative of the Administration, but I understand that you wished to know some of my initial thoughts on the Older Americans Act.

My own approach to the Older Americans Act is one which treats it in a longer time-frame than any one Congress or year. I prefer to look ahead and consider the sort of life we want for older people in America in the next several decades. I believe that what will ultimately make a difference is improvements in the every day life experience of older Americans. And that, in my view, means thinking ultimately in terms of a progressive but long-range development of a comprehensive range of services to enable older Americans to remain at home, if they choose, or to have available to them the other resources that they require.

As this committee knows so well, we are changing from a "young" society to an "older" society. At the turn of the 20th Century only 4 percent of our population was over 65; today it is 10 percent. In another fifty years it may be up to 20 percent, and even higher in particular communities.

With a growing elderly population, we can expect a greater incidence of disability, and the likelihood of social isolation and of people living on fixed incomes. And we can expect that there may be more people in the category we now call the "frail elderly." Today 38 percent of the

elderly population is over 75 years of age; by the year 2000 that figure will be 43 percent, representing as many as 12 to 13 million Americans.

As Commissioner for Aging in Pennsylvania I was very struck by research that suggested that as much as one-third of the elderly population now in institutional settings might be able to remain in their communities if alternative forms of support were available to them. Those estimates, and their implications for the lives of the elderly, deserve careful examination. Working in a State agency I could not help but be conscious of the high costs of institutional care, the newspaper accounts of poor quality care, and the tragic stories of the social consequences of our disregard even for those frail elderly individuals who remained in their communities. Every day our health and social services agencies were confronted with the needs of an ever expanding population of older citizens, many of whom were frail, poor, sometimes functionally impaired, and without adequate services or resources.

I learned in that job that if terms like "home," "family," and "community" mean anything to our society, they mean a great deal more to the elderly who feel those values and their very lives threatened with advancing age. I am convinced that the key to a reasonable life for older people requires building supports in the community and in the living arrangements which allow these basic values to manifest themselves in the daily routine of their lives.

As I reviewed the developments of current programs, I have come to appreciate the fact that we may be dealing with a major social problem which, if it goes unnoticed, may only grow worse. Despite current efforts, despite the energy and commitment of the many fine and dedicated individuals in federal and state governments and legislatures, the professionals and volunteers who work with the elderly, and the organizations that work on their behalf, too often, in too many parts of the country we can not yet point to a coherent, comprehensive system of community services readily available to the elderly. For the people who seek those services, the result is too often frustration and disappointment, with little hope that the situation will quickly improve.

In considering what I might like to project for the Older Americans Act and the role that it might play in the lives of the elderly over the next several decades, I hope to look beyond just the individual titles of the Act, to an examination of the national goals that must be affirmed if we are ever to fulfill our society's commitment to a decent life for all our older citizens.

I expect to be back to the Congress in a few weeks with the first steps that the Administration will be taking in the next few fiscal years. But I would like you to know generally some of my thinking as I approach the ways in which we might improve the lot of the elderly. First, I believe it is important that we address ourselves to the broad, and very fundamental changes that must occur if the elderly are to be effectively

assimilated into our society in the future. That will touch on such sensitive areas as ageism and the negative stereotypes that are now attached to the elderly, and to the constitutional and legal rights of older people in our society.

Second, I would hope that we could also address the very special needs of those elderly who are frail, isolated, functionally disabled, and living on fixed incomes. Any changes in our service delivery system would, I hope, take those special needs into account. Third, I believe we must think very carefully about the role of the public sector in supporting the elderly and their families when they are unable to provide all of the necessary resources and supports themselves. Fourth, I am convinced that a key to providing a decent life for older people lies in their own communities, and the support those communities receive from governments on every level. And finally, I hope we might approach the issue of "comprehensiveness" in terms of the community lives we hope will be possible for older citizens in the decades ahead.

Over time that would suggest a broadened role for the Older Americans Act and for the kinds of supports that might be publicly provided, including the assistance we at the federal level might provide to states and communities as they attempt to provide as well as better coordinate and deliver the services available to the elderly.

I personally believe that our society has the knowledge and the capacity to provide a better life for older people. In this as in so many areas, the critical question remains our willingness to take the actions that will be necessary, and a continued attentiveness to this vulnerable group in our society.

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I look forward to working with the Congress and in particular with the Members of this Committee in the years ahead. I am well aware of the leadership which you have shown in addressing the problems of the elderly, and I feel privileged to join you in the important work ahead.

That concludes my prepared remarks, but I will of course be pleased to answer any questions you may have.

Senator EAGLETON. At this point I will yield to Senator Kennedy.
 Senator KENNEDY. Thank you, Mr. Chairman.

I want to congratulate Mr. Benedict on his nomination and indicate great interest in working closely with him on a number of the opportunities which exist to better serve older Americans.

First of all, I would like to gain your view of the area 3 agencies. Don't the area agencies presently have great flexibility under the title III allotments; aside from the 20-percent set-aside for the four priority services, can't they spend the money on the programs they want, and can't they spread it or concentrate it to suit local needs now?

Mr. BENEDICT. The area agencies have a great deal of flexibility. I think the question is whether or not they have the resources and authority that is required to develop within the context of the communities within their jurisdiction anything close to what we would regard as a comprehensive community services program.

Many of the federally supported programs, at this point in time, are funded through individual titles, and there is very little consistency from one community to the other across the country with regard to what is available.

What I personally would like to see over the next 2 years is for us to take the next incremental step that allows us to use those local agencies as a base for developing a comprehensive range of services which begins to span the range of social and health services so that they are really treated as a part of the whole system rather than as fragmented bits and pieces.

Senator KENNEDY. Programs such as nutrition and community service employment serve many of the poor elderly. When we consider how much discretion to leave to them, can we be sure that area agencies will be really representative and reflect the needs of all the elderly in the community?

Mr. BENEDICT. Whenever we delegate authority, I think we also have to be concerned about delegating responsibility and issues of accountability. From my perspective, I personally would like to see community, as a whole, fully representative of older people, involved through the area agency advisory boards given significant authority and responsibility with regard to determining the nature of the priorities in that community, the distribution of services in that community, and the priorities with regard to those most in need.

Over the years, I would like to think that some of the same principles that have given us citizen participation in other forms of local government, citizen participation in our public school systems, will eventually evolve their way into the management of human services.

Senator KENNEDY. Are the poor and minorities appropriately represented in the agencies now?

Mr. BENEDICT. I cannot speak to the fact nationwide with regard to the extent to which they are represented on area agency boards. I do know that the Federal requirements certainly require the representation of minorities and low-income persons on the area agency advisory boards and also at the State level. I think the question is not simply one of representativeness on the board but the extent to which we may or may not want to invest in those boards powers and duties with regard to the administration of local plans.

Senator KENNEDY. Before we leave this point: as I understand, 38 percent of area agencies set up under section 304(b) consist of councils of government, 25 percent of county or multicounty agency representatives, 25 of private nonprofit groups. City and other public agencies make up 12 percent. I am trying to determine how that kind of representation affects the fashioning of a particular program. If you have county officials, for example, that are serving, can you expect them to be funding Legal Services when many of the elderly might be bringing cases against county government? And yet, the multiplier effect of legal services is probably enormous, and they probably should be funded.

If you are giving this kind of authority, don't you have to insure a greater sense of representation?

Mr. BENEDICT. Senator, I think you have asked two questions.

Senator KENNEDY. I am trying to get them all in.

Mr. BENEDICT. My own view is whether a local agency is designated by the Senate formally as a public agency or a private agency, we have an obligation to try to assure that they understand that they carry at least a quasi-public responsibility and to do everything we can to require openness in the involvement of the community in the administration of that program.

With regard to your second question, I believe, on the one hand, that it is appropriate for us to require and expect those local agencies to expand such services as Legal Services for clients, but that we also have to look to the varied and mixed advocacy that comes with citizen participation at the National, State, and local level in a variety of forms to be involved in the process of change that goes beyond representing individual clients.

Senator KENNEDY. I won't now take the time, but I want to get your response to some other questions on title III, and I will submit those questions.

Mr. BENEDICT. I will be happy to respond to them.

Senator KENNEDY. Just very briefly, would you comment on the need for home-delivered meals? I would be interested in your perception of the need, and whether you support an expansion in the home-delivered meal program.

Senator JAVITS. That is meals on wheels.

Senator KENNEDY. Yes.

Mr. BENEDICT. What I found from my experience in Pennsylvania is that the single principal desire of older people is to stay in their own home. There is no question but that the provision of in-home services enhances the likelihood of their staying at home enormously.

From our experience, we would approach the problem of in-home services not exclusively from the perspective of need but from the perspective of in-home services, whether it be chore or a simple maintenance task in the household, whether it be the provision of homemaker services, expansion of home-health services, and the provision of home-delivered meals. There is no question that those kinds of services make it possible for older people and their families to keep them at home.

Senator KENNEDY. Should there be a separate authorization for expansion of that program?

Mr. BENEDICT. I personally would like to be able to make more of an effort in the area of expanding in-home services.

Senator KENNEDY. Could you give us a little better answer? Do you think there ought to be specific legislation? Do I gather you personally support that but you haven't cleared it?

Mr. BENEDICT. I think, without question, of all the services that I see identified under the authority of the Older Americans Act, that constellation of in-home services may well be the most important thing that we can do to help older people stay independent and in their homes. Nationwide, there are not currently adequate resources to meet the tremendous need that exists.

Senator KENNEDY. Thank you, Mr. Chairman. I just have a few questions that I will submit. I appreciate it.

Mr. BENEDICT. Thank you, Senator.

Senator EAGLETON. I take it Senator Kennedy will submit some further questions in writing. If you will supply us with the answers it will be made part of the record as a continuum of the dialog between you and Senator Kennedy, all of which will come after your prepared statement.

Senator JAVITS?

Senator JAVITS. I am all for you. You apparently impressed my staff enormously and I am impressed with you. I would just like to ask one question.

Generally speaking, do you think Arthur Flemming handled things along the right lines?

Mr. BENEDICT. Senator, I have come to know Dr. Flemming very well both during my tenure as commissioner on aging in Pennsylvania and during this transition, and I have to say to you and the members of this committee that I regard him as one of our premier public servants. I have tremendous respect for the energy and dedication that he brought to that job, and his performance as Federal Commissioner on Aging is a model for anyone who would seek to follow him.

Senator JAVITS. Thank you so much.

Senator EAGLETON. Since Senator Javits raised that point, I want to go on record—I was going to do this anyway—I think Arthur Flemming is perhaps one of the finest gentlemen I have known in my entire life in or out of government. I think he is an absolutely first-rate humanitarian. I think it makes it very difficult for you, Mr. Benedict. You are a fine person in your own right, but you follow one of the great men, I think, of our modern age, and so you have a high, high standard of performance to equal.

Mr. BENEDICT. I am well aware of that.

Senator JAVITS. Mr. Chairman, I would like to top what you said and what Mr. Benedict has said, as Arthur is a great friend of mine. Thank you.

Senator EAGLETON. I have a couple of questions I would like to ask and a couple more I will submit to you in writing for answers to the record, and I ask the indulgence and patience of Senator Williams, who is the fine chairman of the parent committee.

Mr. Benedict, up here you see some charts that we have pasted on the wall. I don't know if you have had a chance to glance at them. It is our attempt to give a consolidated overview of the various Federal programs pertaining to America's senior citizens. I am sure we have left some out, but it is the best compilation that we could come up with and get it on two charts.

We have been holding hearings, as you know, in the Senate Subcommittee on Aging, in connection with the extension or modification of the Older Americans Act, which expires this year. We know as a new commissioner you will have a considerable input into the fashioning and formation of that new act. In fact, we have hearings later on this morning, imminently, in another room to hear from other interested witnesses.

One of the tentative conclusions that I have drawn is that we have a multiplicity of aging programs scattered throughout the Federal bureaucracy, and some that we deal with with great financial intensity, and some we deal with only nominally.

Let me tell you what I mean by nominally. Look down in the Older Americans Act, title III, and under that there are the four priorities which are spelled out in the legislation. We tell the States that there are four things we want you to emphasize—we are going to send you \$172 million; you allocate the money around, but there are four things the statute said that we want you to do. We want transportation for the elderly, in-home services for the elderly, legal counseling for the elderly, home repairs for the elderly.

Let me direct you to home repairs. I am just using this as an example: Home repairs for the elder, \$6.8 million nationwide. An amount triple that could be meaningfully spent I bet you, in Newark, New Jersey or maybe Jersey City. Certainly, in St. Louis or Kansas City.

Is it not a semi- or quasi-deception to have a program called home repair for the elderly and put such a pittance in it that really, we have no program at all? I can answer my mail and people say, Eagleton, what are you doing about the home repair for the elderly; winterization; it is a cold winter; a lot of elderly people in their homes are shivering; some are dying. I can write back and say, we have a home repair for the elderly program.

That is an honest answer, but it is not a complete answer. So, my question to you is this: Wouldn't we be better off doing fewer things more intensively than trying to do so many things meagerly?

Mr. BENEDICT. Senator, I think that many of us in the Federal Government, and State government and communities share your basic concern that over the years as we have sought to improve services for older people that we have apparently done so in a rather fragmented way. My own sense is that this has been a part of our own national growth in becoming aware of the nature of the needs that older people have. There is no question that we do have to observe the fact that we are in a time of relative scarcity and we do have to establish some priorities.

But, my own view would be that we must generally come to understand that what we are about is providing a basis upon which older people can have more meaningful lives within their family, within their home, within their community. As we approach the reauthorization of the Older Americans Act, I would hope that we could at least begin to provide the basis upon which communities as a whole could, one, begin to have increasing responsibility and authority over the management of human services for older people; two, that it focus primarily on least restrictive alternatives in keeping older people in their homes.

As I look at that list, one of the things that occurred to me is that from our experience, what I really hear older people saying is: One, I want to be physically and mentally sound; two, I want a decent place to live; three, I want to be able to maintain my linkages—social, economic—in the community in a meaningful way; and, four, whatever my physical, emotional, mental well-being, I want to be able to pursue a meaningful life as long as I live.

My own sense is that if we were to begin to conceptualize a system of community care, if we would begin to focus on these kinds of goals and set aside titles and regulations, if we were willing to focus on the needs of those most in need, those who are very old, those with disabilities, those who live alone, those who are on low incomes, and if we were ready to rest authority, and responsibility and resources in the community, over the long run, we would begin to see a system of care that made more sense to them.

I agree with your observation of home repair. However, at the same time, I am reluctant to suggest that we ought to totally withdraw from our communities some opportunity to make some decisions because needs and problems are not even around the country.

So, while I would look in the basic direction that I suggest, and while I agree that we need to establish national priorities, I would hope that we always leave some room for some communities to make some of these free-standing choices.

And I would observe, Senator, that these resources that you have referred to under title III, are being multiplied in ways that I would not have predicted 4 or 5 years ago, in community after community. One sees the local agencies on aging and local public officials literally delving into every pot of funds they can find—local, State and Federal—to begin to try to find ways to expand these basic sets of services.

Senator EAGLETON. All right, very good.

Let me go you one better. You say you would hate to get out of this because that is how the States decided to spend that pot of money. We had an earlier witness, Dr. Robert Binstock—I think you know Dr. Binstock.

Mr. BENEDICT. Very well.

Senator EAGLETON. He suggested this. I think it is interesting. I am not saying I accept it lock, stock, and barrel, but it is an interesting suggestion. He said, in essence,—I will take what Mr. Benedict has just said—let's have a block grant to the States and to the local area agencies and say, OK, there are a whole bunch of things you can do; we can spell out certain worthy objectives, not only the four that are listed there, but add to them in terms of other objectives that appear in other parts of the Older Americans Act.

You out there in St. Louis, that area aging agency, decide how you think it can be best spent in St. Louis, but we make one proviso; you have got to spend, 60, 70, 75 percent of what you receive on one of those objectives. That gets back to the question I asked you. That is, you are going to at least have to do one thing pretty darn thoroughly, and we leave you 20, 30, 40 percent to scatter around, if you want to, amongst a wide range of worthy objectives. But we are going to require you to do one thing well and you decide what that one thing well is in St. Louis, Newark, Philadelphia, or Pittsburgh.

What do you think of that?

Mr. BENEDICT. If I can begin with an analogy on that answer, in a way it is sort of like saying to a community in another field: We only have so many funds. Do we want to teach first grade children how to read, do we want to teach high school seniors physics, do we want to teach college freshmen literature, postgraduate students research methodologies?

I'm afraid that what we are talking about is providing a set of services that relate very basically to quality of life, an ability to live decently. Except for a willingness to suggest that the local agencies ought to concentrate their planning, their coordination, and the commitment of their resources to the notion of keeping people out of institutions, to the notion of keeping them in their own homes free and independent, I would be reluctant to suggest to any community that it had to make that awful choice in such dramatic terms—all transportation, all in-home services.

These are very difficult things we are talking about and I find them repeated, Senator, at every State advisory committee meeting, at every meeting of local area agency advisory boards because what I find these people understanding is that they are not so much deciding who is going to get served as they are making the awful decision about who is not going to get served.

Senator EAGLETON. A followup question to Senator Kennedy's line of questioning. We had a day of testimony from several minority groups regarding the participation of minorities either in programs that the Federal Government sort of directly operates and funds, or programs that the national contractors operate and fund.

Let me ask you this: Based on your experience in Pennsylvania, do you think that minorities, including blacks, Hispanics, and Indians, have had a significant enough input and a significant enough piece of the action in either programs operated by governmental agencies, or programs operated by the national contractors?

Mr. BENEDICT. I would like to answer that question two or three ways.

First of all I generally concur with the basic point being made by minority organizations that there is a tendency for there to be higher incidences of need for services among minority populations than the population as a whole, and that generally there is a tendency for them to often be underrepresented.

Data provided to me by the staff of the Administration on Aging indicates that of all the persons in the United States who receive transportation services, 25 percent of them,—under the Older American Act—25 percent of them were minorities. Of all persons receiving in-home services under the Older Americans Act, 42 percent of them were minorities. Of all persons receiving legal and related counseling services, 12 percent were minorities. Of all persons assisted with residential repair and renovations under the Older Americans Act, 38 percent were minorities.

Are they being served? Yes; is it adequate? Perhaps not. Is it equitable? I honestly don't know whether or not that is equitable.

There is another perspective from which I would like to raise the question of services to minorities, and I know that it has been raised before, and that is the question of whether or not we ought to extend the age discrimination inquiry to look at whether or not minorities

have been adequately served under medicare and medicaid, whether or not they have been adequately served in special housing programs administered by HUD, whether or not they have adequately been served in the variety of other Federal programs which support services to the aged in the community.

Senator EAGLETON. An observation and then a final question and then, Senator Williams, I have other questions and we will submit them in writing.

I think you appreciate the timing dilemma that we are in and that you are in. Here you are, being considered for nomination or confirmation purposes at the very time that we are working on the legislation. We realize that you have some problems in terms of coming on board and thinking through some of your thoughts. We will be as patient and as indulgent as is humanly possible. We are going to go ahead with our hearings in the next several weeks and we know that in time you will crystallize some of your thinking and we will be delighted to have you as a witness before the subcommittee.

A two-part question relating to ACTION. By the way, we had the other day, at a table just like this, we had some State commissioners on aging and some heads of local area agencies on aging, and I asked a similar question of them with respect to ACTION.

Part 1: Do you think ACTION ought to be folded in—Sam Brown's ACTION agency and put over with the Commissioner on Aging?
Part 2: Based on your experience in Pennsylvania, of the three ACTION programs, rank them in terms of effectiveness and meaningfulness.

As you know, the administration budget has made a somewhat different ranking. Senior Companions, as is. It gives a tiny increase in Foster Grandparents, a 25 percent cut in RSVP. All of them meagerly funded.

Mr. BENEDICT. With regard to your first question, my general point of view, which comes from my experience in Pennsylvania, but also comes from my bias and background of public administration, is that generally federally funded programs for older people ought to be administered by and through the network which was established to assure the coordination of services.

With regard to your second question with regard to ranking the ACTION programs, I must say, I feel a little bit like I did with regard to your question of picking out a particular service. My own experience in personal terms has been closer to the Foster Grandparent program. The Department of Public Welfare in Pennsylvania administers a very large Foster Grandparent program through many of its mental retardation institutions.

I can only say that I don't ever recall seeing such magic take place before when one takes a group of older persons and places them alongside the working staff of mental retardation institutions and sees, quite literally, the children come to life, and those older persons having an opportunity to make an enormous contribution.

I suppose that in some ways I might make that a first priority, understanding that I had not thought about this before, partly because of the benefit to the older people but also because I think that the children they serve need so badly the kind of companionship, and friendship, and love that those older people can bring them.

Senator EAGLETON. Thank you very much, Mr. Benedict. I am going to take my charts and move elsewhere and propound some of these sensitive questions to today's group of witnesses. I asked these questions on ranking because, ultimately, that is a decision that—I am on the Appropriations Committee—we have to make there and it is ultimately a decision that Senator Williams will have to make, and all other Senators, on the floor, because we have to put pots of money around, you see.

These are terribly difficult choices. We faced this with the National Institutes on Health. Everybody hates cancer. How much for cancer? How much for eye disease, and what have you?

And, again, Senior Companions, the people I talked to about that program think it is absolutely magnificent, but at \$7 million nationwide it is not really a program at all in my opinion. It is analogous, I think, to that home repair thing. These are some of the things that really trouble me.

Mr. BENEDICT. Before you leave, may I make one final observation on your tables?

Senator EAGLETON. Yes, sir. Did we leave something out or did we misrepresent something?

Mr. BENEDICT. This is only an observation. I see nothing left out that I am aware of at the moment.

When one looks under the Social Security Act and the cost of medicare and medicaid one can't help but observe that the cost of medicare next year is going to increase by an amount which is many times greater than the total budget for the whole social service program for the aged represented on that board.

Senator EAGLETON. That is correct.

Mr. BENEDICT. My sense is that until we begin to develop, No. 1, a comprehensive approach to community services for the aged which spans health and social services, and, No. 2, community responsibility, and, No. 3, a willingness to place some emphasis on least restrictive kinds of alternatives, that disparity in the distribution of our resources is going to continue.

And the fact is, older people, in spite of their frailties, in spite of their disabilities, want to stay at home. So I would hope that as we consider the reauthorization of the Older Americans Act we can indeed continue to look at that whole table and not just the individual titles represented in the current law.

Senator EAGLETON. I think that is a very valid observation and a very important one.

I have a series of questions. I will ask that they be given to you in writing and that you give answers in writing in due time.

[The questions referred to may be found in the hearing record of the Older Americans Act held by the Subcommittee on Aging.]

Senator EAGLETON. I thank my colleagues, Senator Williams and Senator Cranston. I will go elsewhere.

The CHAIRMAN. Before you go, let me just say that I want to applaud the Senator from Missouri, my good friend, Tom Eagleton, for describing all of the Government-related efforts to help the lives of older people. It is an invaluable service to see on one chart all programs that we have had opportunities to influence or, in some cases, vote on. It is a great service and I think, this picture will be useful to you also as you consider the reauthorization of the Older Americans Act.

I was thinking—before even seeing the charts, Tom—how this office does work with other activities within the Federal establishment, so that everyone can know what you are doing and how you relate your basic mission, which is to serve the needs of older people, to ACTION, which is to use older people in serving others, such as the RSVP and Foster Grandparents.

There should be, I would think, some communication, perhaps even a linkage. You might have clients who could be useful over there to RSVP, for example.

Mr. BENEDICT. I would agree with you that the Administration on Aging does have an obligation to reach out to these other agencies at the Federal level and begin to think in terms of some common planning for the development of services for older people.

I have reemphasized time and again this morning the notion of community services. I do believe that if one puts all of these programs in the context of what our real goals are, meaningful life, reasonable life, decent places to live, that one finds that there is a basis upon which these agencies have common ground for discussion and we will be considering that problem during our examination of reauthorization in hopes to try to find ways to strengthen the kind of cooperation that can occur both here, but also at the community level, which is where all of these programs, in the end, impact on the lives of older people.

The CHAIRMAN. Under title III, State and area plans receive money in the nature of a block grant and the communities decide the amount which goes into the various activities. Is that correct?

Mr. BENEDICT. That is correct, Senator, but at this point we have not really developed the wherewithal to effectively relate that State planning process and the area planning process to the community's right to also participate in the development of plans for the expenditure of many of these other funds in the community. That, I think, is maybe where our greatest challenge is.

The CHAIRMAN. I will submit some questions for a written response. What timing should we have on the answers, Tom?

Senator EAGLETON. Of course, we want to proceed, I take it, with this confirmation as rapidly as possible. If some of my questions cannot be answered conveniently and quickly, and maybe Senator Williams' as well, the Aging Subcommittee's record is going to be open for many weeks. We could ask for those questions to be responded to as a part of the subcommittee hearing record.

The CHAIRMAN. Fair enough.

[The questions referred to may be found in the hearing record of Older Americans Act held by the Subcommittee on Aging.]

Senator CRANSTON. I am going to be having hearings Thursday on the authorizations that relate to those parts of that, that fall under the Domestic Volunteer Service Act.

Senator EAGLETON. That is very pertinent, then, to another piece of the action, so to speak.

Thank you, Mr. Chairman.

Senator CRANSTON. Mr. Benedict, it is very good to see you here this morning.

I want to say it is also good to see Arabella Martinez present.

Arabella, we are delighted you are doing what you are doing, and we know your commitment to and interest in the Older Americans Act and to Dr. Benedict's nomination. You are good to be here this morning.

Dr. Benedict, I want to make plain I support your nomination. You have a very impressive record in this field. You do have a very tough task before you. As Commissioner on Aging, you will be the Federal Government's highest ranking official devoted to carrying out programs for older Americans. You will be responsible for implementation of the Nation's primary legislative effort to provide services to senior citizens. You will be expected to be the executive branch's advocate on behalf of the elderly.

The older Americans that you serve are black, white, Indian, Asian American, Hispanic. They are or were laborers, soldiers, engineers, teachers. They saw us through two great wars. They represent our heritage. Their efforts gave this Nation a future. They survived the Depression. They heard FDR's words of hope in 1933. They remember Armistice Day. They remember VE Day. They remember a lot more than that.

The Nation that they served really must now make certain that it serves and meets their needs. We must do so effectively, equitably, expeditiously, and efficiently and with compassion. It is a responsibility that this Nation must bear and should bear with joy.

On a personal note, I have a young man on my staff whose grandmother will be 100 years old on Friday. Her family is coming from all over the country to be with her, and for the first time in 20 years all her children will be together, or at least they will be trying to get together through two feet of snow in Massachusetts.

However, not all of us will live to be 100. Not all of us will have a family to look after us. But all of us should be able to look to a Government which cares for us and wants to help us when we need help to live in dignity.

You are going to be heading some very important efforts for some very important people. I have heard many good things about you, and if I can be of help in any way as you seek to meet your responsibilities, don't hesitate to get in touch with me and get in touch with my staff.

I do have some questions. Two I will ask now. The rest I will submit for this record, or if something is worked out to move faster and we have another record that they would fit into, that is fine.

The two questions relate to this: first of all, it seems to me that too often too little coordination exists between and among various Federal Government programs designed to assist in resolving the problems of older Americans. For example, the Veterans' Administration recently submitted to Congress a report on the aging veteran's present and future medical needs. That report revealed that by 1990, only 12 years from now, more than half of the U.S. males over 65 will be veterans; and by 1995, veterans will exceed 60 percent of the total.

Clearly, these statistics emphasize the need for a close relationship between the VA and the Administration on Aging. So, I would like to ask first what plans you have for the conduct of appropriate coordinative activities between the Administration on Aging and other appropriate Federal agencies, and particularly the VA?

Mr. BENEDICT. First of all, I share your concern over the observations of those statistics. I think they do give us reason to be concerned. I think they reflect, however, not only a circumstance which confronts the Veterans' Administration, but they quite literally reflect the circumstance which confronts every major service institution in the United States, be it our mental health system, acute hospital care

system, or our social services system. We face the problem of changing from a young society to an older society together.

I have not had an opportunity to consider or develop a detailed plan for interagency coordination at the Federal level. There are three or four kinds of directions which I am giving some thought to.

The first is to consult very closely with these other primary agencies in the development of a national plan on aging under the authority of the Older American Act that, No. 1, can represent shared goals; that, No. 2, can represent the sorting out of responsibilities that can be shared; and, No. 3, might permit the State plan on aging and the area plan on aging to be a primary vehicle for the expression of community goals or services irrespective of the source of Federal funds to the extent that they relate to the purposes of the Older Americans Act.

We have been thinking about the problem. It certainly is not an easy one. But we hope to establish a formal vehicle through which those agencies can be represented in the kind of planning that goes into a national plan, State plan, and local plan, hopefully, that they will reflect the views of many of those agencies, not solely the more narrow, immediate, and direct responsibilities for direct services of the Administration on Aging.

Senator CRANSTON. Thank you very much.

I think it would be a good idea if you and Arabella got together with Max Cleland. I would be glad to speak to him about that.

Mr. BENEDICT. I agree with you, and we will.

Senator CRANSTON. The report on aging veterans notes that:

Senior centers are not part of the VA programs since no authority exists for the provision of nonmedical services. However, the socialization which these centers provide can improve the quality of life and indirectly reduce the disability of chronic physical and psychiatric disorders. In addition, the centers can provide health, education, and preventive services. Thus, within the limits of authority, the VA encourages and assists the development of these programs.

The hookup between the local senior citizen centers and VA facilities does seem to be very natural one. What steps will you take or undertake to bring about coordination with local VA activities in connection with such local senior centers?

Mr. BENEDICT. First of all, I would expect to articulate a philosophy which may not always have been clear, and that is that programs supported under the Older Americans Act are for all older people, that responsibilities of State and area agencies on aging and nutrition programs do not stop at the institutional doorstep, and that we expect those plans to reflect an openness and, in fact, an outreach strategy to see that those individuals who are confined do have opportunities to participate in the community services programs.

To prepare for that, we would expect to have opportunities to confer not only with the Veterans' Administration, but other agencies who are supporting programs, such as HUD and other agencies in HEW that involve caring for people either in housing settings or institutional settings to develop similar kinds of arrangements.

Senator CRANSTON. One other point. A number of States—among them, California—have had difficulty in integrating the administration of the title VII nutrition program with area agencies on aging. Do you have any thoughts on that?

Mr. BENEDICT. Yes; I do.

We are in a period of growth in terms of our understanding of what we would like a community services system to be. Thankfully, the Congress did not wait until we had a perfect model before it began to make resources available to address these special kinds of needs.

It recognized very early on that nutrition was a very serious problem and a need that had to be met. So, it made funds available to the Administration on Aging to States and communities to expand nutrition services. I think that was laudable, and I am certainly glad that it was done. I would hope that as we consider the reauthorization that we can focus on efforts to expand the role of communities generally. My preference is through the area agencies on aging to have a greater voice in the establishment of priorities, in the identification of location, and in assuring that the needs of the broad community are met.

It is my impression that today approximately 60 percent—it is an estimate I have heard, which I have to check the validity of—of the nutrition programs are administered through area agencies on aging.

I generally favor that direction. I think it is the kind of thing we have to work at gradually but would hope that the Congress would entertain that kind of a proposal as it considers the reauthorizations. I know that it has been presented both by the National Association of State Units on Aging and the National Association of Area Agencies on Aging.

Senator CRANSTON. Thank you very much. I have some further questions, but I will submit them in writing for inclusion in the record, along with Senator Eagleton's and the Chairman's. I think it is very important that it be demonstrated that young people are concerned about older people and their problems. Your appointment will serve that purpose symbolically and, I hope, substantively, and help convince a lot of other younger people that they should be concerned about this problem.

Mr. BENEDICT. Senator, I want to thank you for your kind opening remarks, and I certainly hope that we will have an opportunity to work together.

Senator CRANSTON. I look forward to it. Thank you.

Mr. BENEDICT. Thank you.

The CHAIRMAN. Senator Church, chairman of the Special Committee on Aging has submitted some questions for me to ask of you. We will do this by requesting you answer these questions in writing for the record. Mr. Benedict, there are two letters that have been addressed to me with a request to ask certain questions, one letter from the Association Nacional Pro Personas Mayores. This is a Spanish-speaking group for the elderly. They have some questions, also, from Compass. These questions will all be submitted to you for your written response.

Mr. BENEDICT. I will be happy to respond to any of the questions in writing as expeditiously as I can.

The CHAIRMAN. My opening statement, with my praise for the administration having found you and nominated you for this position, has been made a part of the record. We are very, very excited about your appointment.

Mr. BENEDICT. Thank you, Mr. Chairman. I am looking forward to it very much.

[Certain of the material referred to may be found in the hearing record of the Subcommittee on Aging on the Older Americans Act.]

[The following material was subsequently supplied for the record:]

CLAUDE PEPPER, FLA.
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U.S. House of Representatives
Select Committee on Aging
Washington, D.C. 20515

Telephone: (202) 225-9378

January 31, 1978

Hon. Harrison A. Williams, Jr. Chairman
Committee on Human Resources
U.S. Senate
Washington, D.C. 20510

Dear Mr. Chairman:

Your Committee, I understand, will be holding hearings next week on the proposed nomination of Robert C. Benedict to be U.S. Commissioner on Aging. The purpose of this letter is to endorse that nomination warmly, and to urge that your Committee speedily approve Mr. Benedict's name for Senate consideration.

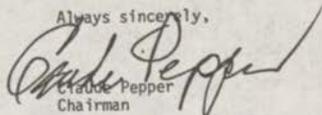
From his position as Commissioner of Aging for the State of Pennsylvania, Mr. Benedict built a strong reputation for smooth administration, forceful advocacy and splendid dedication. That is why I chose him last year as one of only four witnesses to testify at the initial session in my Committee's series of hearings on "Older Americans Programs Oversight." His testimony was forthright, thoughtful, imaginative and persuasive. I am enclosing a copy of that hearing for your review.

I have since had the occasion to speak with Mr. Benedict on a number of aging issues. I am convinced that he would make an outstanding Commissioner on Aging.

With kindest personal regards, and

Believe me,

Always sincerely,


Claude Pepper
Chairman

CP:ehs

Enclosure

ROBERT S. WEINER
STAFF DIRECTOR

JAMES A. BRENNAN
ASST. TO THE CHAIRMAN
ROBERTA BRITTON
PROPERTY STAFF DIRECTOR

WILLIAM J. J.

1978 FEB -3 11 10 27

U.S. HOUSE OF REPRESENTATIVES
COMMITTEE ON HUMAN RESOURCES
WASHINGTON, D.C. 20510



ASOCIACION NACIONAL PRO PERSONAS MAYORES

January 19, 1978

The Honorable Harrison A. Williams
Chairman, Senate Committee on Labor
and Public Welfare
Suite 4230 Dirksen Building
Washington, D. C.

Dear Senator Williams:

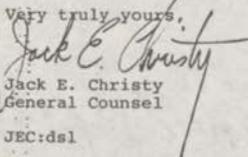
I am writing in regards to the pending confirmation hearings for Robert C. Benedict as Commissioner on Aging.

Enclosed are eight questions that are of vital concern to this organization. We respectfully request that your Committee ask these questions to Mr. Benedict during the hearing.

The questions are based on statements made by Mr. Benedict last August when he testified before the House Select Committee on Aging on reauthorization of the Older Americans Act. I have... included a copy of that testimony for your information.

Thank you for your consideration of this matter. If I can provide further assistance I will be happy to do so.

Very truly yours,



Jack E. Christy
General Counsel

JEC:dsl

Enclosures

1978 JAN 23 11 11 50
COMMITTEE ON
PERSONS

REGIONAL CENTERS: Los Angeles, CA, Albuquerque, N.M., Miami, FL, Washington D.C., New York, N.Y.

National Association Pro Spanish Speaking Elderly
National Executive Offices: 3875 Wilshire Blvd, Suite 401 Los Angeles, CA, 90010 (213) 487.1922 487.1923

- *** In a recent interview, Secretary Califano stated that racism is the major, overriding domestic problem facing this country.

What steps would you take as Commissioner on Aging to assure that the Administration on Aging is sensitive and responsive to the needs of Hispanic, Black, Asian, and Native American elderly?

- *** You have stated that government policy towards older Americans must be a two-tiered policy with special emphasis on people who are alone, disabled or functionally dependent, very old, isolated and on low income.

Since Blacks, Hispanic and Native American elderly are predominantly low income, what special actions will you take to address their needs?

- *** You have stated that the basic aging process shows no difference to race, color, creed, sex or social status and that within each community we must assure that the services are available to all in need of services.

The Hispanic, Black, Asian, and Native American communities have historically received fewer services than the majority community. What actions will you take to assure that services are provided to these communities?

- *** If you are confirmed as the new Commissioner on Aging, what issues are priorities for your first year in offices?

- *** Do you contend that national advocacy organizations in behalf of the minority elderly are not necessary?

If so please state all facts on which you have base that contention.

- *** You have stated that it is important for the whole community, through local governmental officials, to be involved in the planning, management and administration of human services programs.

What actions would you take to insure that local government officials provide equatable service to all segments of the community?

*** With regard to the elderly, you have stated that:
"Programs were developed to respond to specific social and medical needs without the underpinning of an adequate knowledge base or a well conceived social policy."

Please outline those areas where you believe our knowledge base is inadequate and describe the considerations you deem necessary for a well conceived social policy.

*** Assuming you are confirmed, after your tenure as Commissioner on Aging is over, what bureaucratic changes or program initiatives or other contributions do you hope to leave as a legacy of your leadership of the Administration on Aging?

COMPAS
 Council on Minority Planning and Strategy
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JAMES FARMER - PRESIDENT
 GODFREY BECKETT

February 5, 1978

The Honorable
 Harrison J. Williams
 Chairman
 Committee on Human Resources
 United States Senate
 Washington, D.C. 20510

Dear Mr. Chairman:

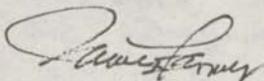
The Council on Minority Planning and Strategy (COMPAS) has just completed a significant "think tank" seminar on "Blacks in Retirement: An Untapped National Resource," funded by a grant from the Administration on the Aging.

COMPAS' interest in the problems faced by senior citizens in general, and minority aging in particular, is a continuing one.

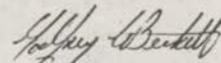
It is therefore with an abiding interest that we submit to you the enclosed statement from the Seminar Conferees with the request that it be read to Mr. Robert Benedict during his Confirmation Hearing before your Committee on Tuesday, February 7, so that he may have an opportunity to respond for the record.

Thank you for your consideration in this matter.

Sincerely yours,



James Farmer
 President and Project Director



Godfrey C. Beckett
 Project Coordinator

Enclosure 2 pages

JF:GCB:cvs

Statement
Submitted by the seminar on
"Blacks in Retirement: An Untapped National Resource"
to the
Confirmation Hearing of
Robert Benedict as Commissioner, Administration on
Aging
February 7, 1978

Recognizing the changes in leadership within the Administration on Aging, the Seminar Conferees, including both employed persons and volunteers in the field of aging, brought together by the Council on Minority Planning and Strategy (COMPAS), wish to take the opportunity to bring our concerns to your attention.

At the outset we want to give recognition to the contributions made by former Commissioner Arthur S. Flemming in making the issue of aging a high priority among the policy questions on our national social agenda.

We wish to call attention to some of the many problems which remain unresolved and will require the continuing forthright action of Mr. Benedict as he addresses policies and programs on aging.

While we share the growing interest of Americans in the problems of our aging population, we have a special interest in the senior citizens among blacks and other minorities, for they suffer a kind of "double jeopardy"--facing the penalties of being older in a youth-oriented society, compounded by the experience of being non-white in a predominantly white nation.

In delivering the opening address at our seminar on "Blacks in Retirement: An Untapped National Resource" Thursday, February 2, 1978, Mr. Benedict showed an awareness of existing problems and left us with positive feelings. We would hope that early in his administration, upon confirmation, he will announce a set of objectives and

procedures for achieving them which permit us to have high expectations.

In accordance with his request that we communicate to him the thoughts of the seminar conferees and our recommendations, we now use this occasion to point to certain urgent needs which should be addressed. Available data indicate that the following areas of concern require immediate action:

- o Removal of income inequities between the aging, the black aged, and other older citizens
- o Development, monitoring, and enforcement of affirmative action plans as they affect the black aged in programs for the aged
- o Meeting the physical and mental health needs of older blacks
- o Maintenance of present employment opportunities and creation of new ones for the black aged
- o Providing greater access for blacks in nutrition projects, Senior Centers, and other AOA funded programs, and encouraging more minority sponsorship of such programs
- o Development of programs and services sensitive to the special housing needs and long term care needs of the black aged, as well as service support systems
- o Development of support and commitment of resources for black researchers to address the inadequacies of research concerning the black aged

In relation to these areas, we want the establishment of concrete objectives and public reporting on the achievement of these objectives. We anticipate that these periodic public reports and assessments will reveal that the Administration on Aging through its own affirmative action plan will serve as a model throughout government for minority participation at the policy-making level.

We extend our support to Mr. Benedict in fulfillment of these goals and objectives.

The CHAIRMAN. The hearing stands adjourned.
[Whereupon, at 12:01 p.m., the committee was adjourned, subject
to the call of the Chair.]

