

Y4
.L 11/2
011

GOVERNMENT

Storage

COMMITTEE PRINT

2 5

THE OLDER AMERICANS ACT OF 1965,

A COMPILATION OF MATERIALS
RELEVANT TO H.R. 3708, AS AMENDED BY THE
SPECIAL SUBCOMMITTEE ON AGING
OF THE
COMMITTEE ON LABOR AND PUBLIC WELFARE
UNITED STATES SENATE



Printed for the use of the Committee on Labor and Public Welfare

U.S. GOVERNMENT PRINTING OFFICE

46-843

WASHINGTON : 1965

COMMITTEE ON LABOR AND PUBLIC WELFARE

LISTER HILL, Alabama, *Chairman*

PAT McNAMARA, Michigan

WAYNE MORSE, Oregon

RALPH YARBOROUGH, Texas

JOSEPH S. CLARK, Pennsylvania

JENNINGS RANDOLPH, West Virginia

HARRISON A. WILLIAMS, JR., New Jersey

CLAIBORNE PELL, Rhode Island

EDWARD M. KENNEDY, Massachusetts

GAYLORD NELSON, Wisconsin

ROBERT F. KENNEDY, New York

JACOB K. JAVITS, New York

WINSTON L. PROUTY, Vermont

PETER H. DOMINICK, Colorado

GEORGE MURPHY, California

PAUL J. FANNIN, Arizona

STEWART E. McCLURE, *Chief Clerk*

JOHN S. FORSYTHE, *General Counsel*

STEPHEN KURZMAN, *Minority Counsel*

SPECIAL SUBCOMMITTEE ON AGING

PAT McNAMARA, Michigan, *Chairman*

WAYNE MORSE, Oregon

RALPH YARBOROUGH, Texas

JENNINGS RANDOLPH, West Virginia

JOSEPH S. CLARK, Pennsylvania

HARRISON A. WILLIAMS, New Jersey

EDWARD M. KENNEDY, Massachusetts

JACOB K. JAVITS, New York

WINSTON L. PROUTY, Vermont

GEORGE MURPHY, California

JOHN B. BRUFF, *Counsel*

LETTER OF SUBMITTAL

U.S. SENATE,
COMMITTEE ON LABOR AND PUBLIC WELFARE,
April 27, 1965.

HON. LISTER HILL,
*Chairman, Committee on Labor and Public Welfare,
U.S. Senate, Washington, D.C.*

DEAR MR. CHAIRMAN: On April 13, 1965, the Special Subcommittee on Aging unanimously reported the Older Americans Act of 1965 (H.R. 3708, amended to contain the language of S. 811) to the full Committee on Labor and Public Welfare.

The subcommittee has compiled excerpts from letters, reports, and other pertinent documents representing Senate hearings in 1960, 1961, and 1962 by the Senate Subcommittee on Problems of the Aged and Aging and its successor, the Special Committee on Aging, hearings by the House Committee on Education and Labor in 1962 and 1963, the study and recommendations of the White House Conference on Aging of 1961, and the experience of the Office of Aging within the Department of Health, Education, and Welfare. In fact, the history of this legislation dates back to the studies of the aged and aging from 1956 to 1961, contained in the committee's bound volumes of records.

H.R. 3708 passed the House on March 31, 1965, by an overwhelming vote of 394 to 1.

For the consideration of the full committee, I submit herewith letters, reports and documents in support of H.R. 3708, as amended.

Sincerely,

PAT MCNAMARA,
Chairman, Special Subcommittee on Aging.

LETTER OF SUBMITTAL

COMMISSION ON LABOR AND PENSION
WASHINGTON, D.C.
April 21, 1966

Dear Mr. Tolson:
I am pleased to have the opportunity to submit to you this report on the work of the Commission on Labor and Pension. The Commission was established in 1964 by Public Law 88-272, and its mandate was to study and report on the problems of labor and pension. The Commission has held numerous public hearings and has received many suggestions from labor and management alike. The Commission's report is the result of this process. It contains a number of recommendations which we believe will be helpful in solving the problems of labor and pension. We believe that these recommendations are sound and practical, and we hope that they will be adopted by the Congress. The Commission's report is being submitted to you for your information and for your recommendation to the President. We believe that your support of these recommendations will be of great help in solving the problems of labor and pension. We are sure that you will find the report to be a valuable contribution to the study of these important issues. We are sure that you will find the report to be a valuable contribution to the study of these important issues. We are sure that you will find the report to be a valuable contribution to the study of these important issues.

Very truly yours,
Chairman, Special Subcommittee on Aging

CONTENTS

	Page
Excerpts from introduction to "Federal and State Activities," from series entitled "Studies of the Aged and Aging," November 1956, 85th Congress-----	1
"Bill of Objectives for Older People and a Program for Action in the Field of Aging," from "The State and Their Older Citizens," report to the Governors Conference, August 1955-----	4
Excerpts from "The Aged and Aging in the United States: A National Problem," report by the Subcommittee on Problems of the Aged and Aging, January 29, 1960, pursuant to Senate Resolution 65, 86th Congress, 1st session-----	9
"Effective Organization of Federal Programs in Aging," chapter V, from "Developments in Aging," 1959-63, a report of the Special Committee on Aging, U.S. Senate, February 11, 1963-----	15
"Federal Organization: A U.S. Office of Aging," chapter VI, from "Action for the Aged and Aging," report by the Subcommittee on Problems of the Aged and Aging, U.S. Senate, January 27, 1961-----	30
"Federal Organizations and Programs," section 20 of the "1961 White House Conference on Aging—Basic Policy Statements and Recommendations," committee print of the Special Committee on Aging, May 15, 1961-----	43
"Recommendation VI: Community Action," from "Compilation of Materials Relevant to the Message of the President of the United States on Our Nation's Senior Citizens," committee print of the Special Committee on Aging, June 1963-----	46
Excerpts from "Developments in Aging," 1963 and 1964, report of the Special Committee on Aging of the U.S. Senate, March 11, 1965-----	47
Report on the Older Americans Act of 1965, submitted by the Department of Health, Education, and Welfare, April 8, 1965-----	48
Report on the Older Americans Act of 1965, submitted by the Committee on Education and Labor of the House of Representatives (to accompany H.R. 3708), Report 145, 89th Congress, 1st session-----	49
Letters of support from the Commissions on Aging of the States of California, Hawaii, Indiana, Maryland, and New Jersey-----	75
Statements of support of the Older Americans Act of 1965 by—	
William C. Fitch, executive director, National Retired Teachers Association, American Association of Retired Persons, and Association of Retired Persons International on S. 811-----	83
Charles E. Odell, Director, Older and Retired Workers Department, United Automobile Workers (AFL-CIO)-----	85
Text of H.R. 3708, as amended by the Special Subcommittee on Aging of the Senate Committee on Labor and Public Welfare, April 13, 1965---	90

1890

**EXCERPTS FROM INTRODUCTION, "FEDERAL AND STATE
ACTIVITIES," FROM "STUDIES OF THE AGED AND
AGING," NOVEMBER 1956, 85TH CONGRESS**

* * * * *

The first National Conference on Aging ever held met as recently as 1950. President Harry S. Truman on June 2, 1950, requested the Federal Security Administrator to convene a National Conference on Aging. The President wrote on this occasion:

Changing population trends make it clear that older persons comprise a far larger proportion of our total population than in the past, and that their numbers will continue to grow. The problems arising out of this change affect not only these citizens, but all of our people.

All aspects of life have a direct bearing upon our older citizens. While problems of income and maintenance are of great importance to them, other aspects of life, such as their participation as citizens in our democracy, their housing, recreation, education, physical and mental health, are significant. All segments of our Nation—local, State, and Federal Government, voluntary agencies, religious organizations, and other welfare groups, as well as the aging themselves and their families—have a stake in the problems and an obligation to help find solutions.

I should like therefore to ask you to explore with all appropriate groups, both within and outside the Federal Government, the problems incident to our increasingly older population and to report to me on your findings and recommendations.

The National Conference on Aging met in Washington, D.C., on August 13–15, 1950. More than 800 delegates from all parts of the country attended, including representatives of private organizations, professional societies, and State and local groups concerned with aging. The Conference agenda covered subject matter in 11 broad fields, ranging from health maintenance and rehabilitation to community organization. A full report of this first Conference was published as a 311-page book, "Man and His Years" (Health Publications Institute, Inc., Raleigh, N.C., 1951, \$3.25), and has therefore not been included in the present collection of documents.

The 1950 Conference directed national attention to the need for meeting the challenge of a rapidly increasing older population. In the next 2 years at least 50 major conferences on aging were held in various parts of the country. A growing number of States established commissions or committees. By 1952 there was a widespread demand for another national conference, this one designed to bring together agencies of the States and the Federal Government concerned with the aging and aged.

Document No. 1 in this volume is a Report of the Conference of State Commissions on Aging and Federal Agencies, held September 8-10, 1952, in Washington, D.C., under the auspices of the Committee on Aging and Geriatrics of the then Federal Security Agency.

During the next 2 years, expanding activity by the States led to adoption by the Governors' conference of a resolution calling for a year-long study by the Council of State Governments of the problems of older citizens. The resolution, approved at the 46th annual meeting of the Governors' conference, in July 1954, reads as follows:

Spectacular improvements in medical techniques and facilities are substantially extending the span of human life, with the result that older persons comprise an increasingly larger proportion of our population. Increased life expectancy should provide more meaningful rewards than mere prolongation of life itself. Our older citizens are entitled, in their advancing years, both to healthful living and opportunities for useful and satisfying activity. In order that government at all levels may do its best to cooperate in dealing constructively with the problems of the chronically ill, aged, and infirm, it is essential that studies of the problem should reflect not only the existing situation but should provide a basis for intelligent planning of adequate care, treatment and rehabilitation facilities to cope with the needs of the foreseeable future.

Accordingly, the 46th annual meeting of the Governor's conference requests the Council of State Governments to conduct such a study, taking into account the material presently being developed by the national commission on the study of patients in chronic institutions and by the study groups, operating in the several States, and to report its findings to the 1955 annual meeting of the Governor's conference.

A year later, in 1955, the results of this study were published by the Council of State Governments in a 176-page report entitled the States and Their Older Citizens. (The Council of State Governments, 1313 East 60th Street, Chicago 37, Ill., \$3.) In that report appears a Bill of Objectives for Older People and a Program of Action in the Field of Aging, setting forth recommendations that grew out of the study. The Bill of Objectives is reproduced as document No. 5 of the present volume, page 183.

On March 21, 1956, in a letter to Hon. H. Alexander Smith, United States Senator from New Jersey, President Dwight D. Eisenhower summarized recent and proposed actions of the Federal Government affecting older persons, and announced his intention to create a Federal Council on Aging. President Eisenhower's letter appears as document No. 4 of this volume, page 173.

In April 1956, the President established the Federal Council on Aging, comprising representatives from the Department of Agriculture, the Civil Service Commission, the Department of Commerce, the Department of Health, Education, and Welfare, Housing and Home Finance Agency, Department of the Interior, Department of Labor, National Science Foundation, Office of Defense Mobilization, Small Business Administration, Department of the Treasury, and the Veterans' Administration.

One of the first actions of the Federal Council was to join with the Council of State Governments in calling another Federal-State Conference on Aging. Document No. 2 in this volume (p. 49) is an account of this Conference which was held in Washington, D.C., on June 5-7, 1956. In preparation for the Conference the Federal Council on Aging prepared a descriptive inventory of existing programs of the Federal Government for the benefit of older persons (document No. 3 of this volume, p. 111). The Council of State Governments also prepared for use of the Conference a survey of the organization and activities of the official State groups on aging (document No. 6 in this volume, 191) and a summary of recommendations on problems of the aging compiled from reports of these State agencies (document No. 7 in this volume, p. 275).

* * * * *

A BILL OF OBJECTIVES FOR OLDER PEOPLE AND A PROGRAM FOR ACTION IN THE FIELD OF AGING FROM "THE STATE AND THEIR OLDER CITIZENS," REPORT TO THE GOVERNORS CONFERENCE, AUGUST 1955

A BILL OF OBJECTIVES FOR OLDER PEOPLE

Officials, legislators, agencies, and committees dealing with the problems of aging can work most effectively, and with the largest degree of cooperation, if they are agreed upon certain common objectives.

The objectives, surely, should accord with the rights and privileges to which older people are entitled as human beings and American citizens. These are not, in fact, essentially different in many respects from the rights and privileges of the people generally. But it is evident that the majority of older persons are deprived of them to a greater extent than most people.

A bill of objectives for older people might consist of 10 points:

1. *Equal opportunity to work.*—Our society recognizes the value of work to the person and to the community. The older person should have equal opportunity, if physically and mentally able, to be gainfully employed.

2. *Adequate minimum income.*—Older persons should have a retirement income sufficient for health and for participation in community life as self-respecting citizens.

3. *Home living.*—Older persons are entitled to the satisfactions of living in their own homes and, when this is not feasible, in suitable substitute private homes.

4. *Homelike institutional care.*—For older persons who need care that cannot be given them in their own or other private homes, they have a right to expect the institutions that serve them to be as homelike as possible and have high standards of care.

5. *Physical and mental health.*—Older adults should have adequate nutrition, preventive medicine and medical care adapted to the conditions of their years.

6. *Physical and mental rehabilitation.*—Older persons who are chronically ill, physically disabled, mentally disturbed, or unemployable for other reasons, have a right, to the fullest extent possible, to be restored to independent, useful lives in their homes and communities.

7. *Participation in community activities.*—Older citizens can expect encouragement and assistance to form social groups and to participate with those of other ages in recreational, educational, religious, and civic activities in their communities.

8. *Social services.*—In planning for retirement and in meeting the needs of their later years, older persons should have the benefits of such social services as counseling, information, vocational retraining, and social casework.

9. *Research, professional training.*—Older citizens should be able to expect an increase of research on the human aspects of aging and

development of special courses in schools and departments of medicine, nursing, clinical psychology, and social work to train professional workers in the field of aging.

10. *Freedom, independence, initiative.*—In securing the foregoing objectives there should be increased emphasis on the right and obligation of older citizens to free choice, self-help, and planning of their own futures.

A PROGRAM FOR ACTION IN THE FIELD OF AGING

EMPLOYMENT

Older persons who wish to continue working encounter almost insurperable obstacles. After 40 years of age workers have increasing difficulties in getting new jobs. At 65, or another fixed age, many are arbitrarily retired. They receive little or no assistance, such as vocational retraining and counseling, in meeting special problems of reemployment. Relatively few part-time or full-time jobs are reserved for older workers. This failure to utilize the productive capacity of older persons constitutes a waste of manpower and a loss to the national economy.

1. Governments, employers, and unions should join in abolishing compulsory and automatic retirement at a fixed age and substitute a flexible and selective policy of retirement.

2. State governments need to take the lead in eliminating employment policies which discriminate on the basis of age. It is recommended that they urge employers and unions to abandon the age criterion in hiring or laying off employees.

3. Appropriate levels of government, as well as private organizations, should organize the finance special services for the rehabilitation of the handicapped aging and the vocational training and retraining of otherwise unemployable older persons.

INCOME

At 65 almost all persons, unless they have full-time work, experience a sharp drop in income. Many with little or no resources apply for old-age assistance. An increasing number are eligible for and receive benefits from old-age and survivors insurance. Others with insufficient funds are supported by relatives. Of those on OAA more than one-third of the couples and one-fourth of single and widowed individuals have total incomes insufficient to provide for their basic needs. Particularly critical is the situation of those who require medical care.

4. Payments under old-age assistance need to be made adequate to meet the basic individual requirements of older persons. Special provision should be made for medical care beyond their financial resources.

HOUSING

Older persons, in general, reside in dwellings not adapted to their needs. Only in 2 or 3 States does legislation provide public housing for the aged or facilitate private construction specifically for them. Urban redevelopment programs often entail special hardships for older people, who find moving much more difficult than younger people do.

5. It is recommended that State and local governments review their housing legislation in the light of the needs of the aging. Public housing projects should include units properly designed for older couples and individuals, and similar provisions are needed in private housing developments. Governments are urged to give special consideration to the problems encountered by those of the aged who are forced to move because of urban redevelopment programs.

PREVENTION OF DETERIORATION

Physical and mental diseases of old age generally have their origins in the younger and middle years. Prevention in the early stages is easier, more economical, and more effective than treatment after an ailment has become chronic and disabling.

6. The States should encourage and support localities and non-profit groups in establishing all-purpose facilities for counseling, for early detection and followup of diseases and disability, and for promotion of public education in nutrition, health, and mental health.

REHABILITATION

The present goal in treatment of physical illnesses and disabilities is rehabilitation or restoration of the patient to his highest potential of physical self-care and employability.

7. It is suggested that grants be made to public bodies for development of rehabilitation services for the aging in local hospitals and in public and nonproprietary nursing homes.

MEDICAL HOME CARE

Persons over 65, although only 1 in 12 of the total population, are one-fifth of the patients occupying hospital beds. Many of them require intensive hospital treatment for only a short time, or not at all. They would be happier in their own homes, and as well or better cared for, if such services as housekeeping, homemaking, and nursing were made available.

8. It is recommended that State governments encourage and support hospitals, social agencies, medical societies, and public health agencies to utilize the team approach—a typical team comprising physician, nurse, homemaker, housekeeper, and social worker—for home visits to older persons who can be cared for in their own homes.

SCREENING OF MENTAL PATIENTS

The tremendous increase of older patients in mental hospitals (3 times as rapid as that of all patients in the past 50 years) confronts the public with a problem of tremendous magnitude. Some patients are now being admitted who do not require psychiatric treatment. Others, who have improved, are not discharged because they have no homes of their own or relatives to receive them.

9. Every State should see that diagnostic processes are set up for screening patients before admission to a mental institution. Procedures need to be established to place those who do not require hospital care, or who have recovered, in private homes, boarding homes, homes for the aged, or nursing homes.

NURSING HOMES

A considerable proportion of older persons need nursing care under medical supervision in an institution that is intermediate between a hospital and a private home. The majority of nursing homes which have developed to meet this need are functioning with low standards of service and relatively untrained personnel.

10. State grants to local governments for construction of medically supervised nursing homes, which will meet high standards of care for older persons, can help solve this problem.

ACTIVITY CENTERS

A high proportion of older persons are inactive, lonesome, and unidentified with social groups. They are left out of existing recreational programs. Some withdraw into themselves, develop imaginary illnesses and, in extreme instances, experience mental breakdown.

11. State governments can assist by encouraging communities to establish centers where their older residents may join in interesting and productive activities.

TRAINING

Specialized professional work with the aging is a relatively recent development. There is as yet no adequate training program for workers in this field. Persons interested in entering it can find few organized courses of training or stipends available while in training.

12. It is recommended that State governments encourage the development of courses in schools and departments of medicine, nursing, social work, psychology, education, law, and the ministry for the special training of persons to work with the aging. Leaves of absence with pay from public employment are one important means to enable individuals to take such training.

EDUCATION

Employees, in general, are not adequately prepared for the adjustments in modes of living required by retirement. Courses in planning for retirement have been tried out on an experimental basis. Evaluation of the results, as measured by changes in knowledge, attitudes, and behavior, indicates that those who take the courses gain in their capacity to adjust to retirement.

13. The State should stimulate action by public schools, colleges and universities, business concerns, labor unions, and farm organizations to develop and sponsor adult education courses on planning for retirement.

RESEARCH

The existing body of basic knowledge on the physical, mental, and social aspects of the aging process is fragmentary and unintegrated. Programs for the well-being of the aging are many, but few of them have been evaluated scientifically. No gerontological research center has yet been established with funds adequate to conduct studies on the biological, psychological, and social aspects of aging.

14. Substantial public and private funds are required for research on the biological, psychological, economic, and social factors in aging

and on the practical application of the research findings to the welfare and happiness of older citizens. Consideration should be given to establishing gerontological research centers for the systematic development of such research.

ORGANIZATION

Every State is concerned about the problem of its aging citizens. About half have established commissions that have conducted hearings and surveys and made recommendations. In some States certain of these recommendations have been carried out. Many States now are considering other forms of organization commensurate with the problem of aging—seeking forms which will effectively coordinate the resources of governmental and private agencies in the planning and achievement of a dynamic and comprehensive program for the welfare of their older citizens.

15. Effective organization can be promoted through appointment by the Governor of a qualified special assistant, with such staff help as may be needed, to plan and lead in carrying out a comprehensive program for the aging. Each of the State departments concerned with important aspects of the aging problem might assign special personnel to work with older persons. The establishment of an interdepartmental committee of the State government, with the Governor's assistant on aging as its secretary or chairman, could effect the desired coordination of available resources and planning.

It is recommended that an advisory council, representative of all groups interested in the problems of aging, be appointed to work closely with the Governor, his assistant on aging, and departmental and legislative committees in formulating and carrying out a coordinated program.

EXCERPTS FROM "THE AGED AND AGING IN THE UNITED STATES: A NATIONAL PROBLEM," REPORT BY THE SUBCOMMITTEE ON PROBLEMS OF THE AGED AND AGING, JANUARY 29, 1960

* * * * *

II. Employment Opportunities

The No. 1 problem of those between the ages of 40 and 64 is assurance of equal opportunity for employment in accord with their full capacities. These are the men and women who feel job discrimination because of age, but who are not yet eligible for social security benefits. Data developed by the U.S. Department of Labor and in the subcommittee hearings provide ample evidence of discrimination in employment because of age, even in periods of general high employment, and of the irrelevant nature of such discrimination. The experience is a degrading one for the individual, and a several billion dollar loss to the economy.

The subcommittee has given considerable attention to the desirability of prohibiting on a national basis discrimination in employment because of age. Seven States have enacted such laws.

2. In general, the subcommittee is of the opinion that this is an area for current State attention and it urges the States to consider at their next sessions legislation to outlaw such discrimination.

However, the subcommittee does assert a Federal responsibility in this sphere, in regard to employment practices by employers with Federal contracts and subcontracts. The Federal Government is in the anomalous position of taking leadership to break down age discrimination in industry when at the same time it may be purchasing goods and services from firms discriminating against older job applicants.

3. Therefore, the subcommittee recommends enactment of legislation requiring contractors and subcontractors of the U.S. Government to review their personnel policies and eliminate all forms of employment discrimination based on age.

The subcommittee has been impressed throughout its study with the fact that many retired persons over 65 seek meaningful part-time work in their communities without success, while at the same time critical shortages exist in the area of health and community services. These include important occupations such as practical nursing, non-professional work in hospitals, senior center leadership, and home-maker services. The subcommittee believes that great contributions can be made by senior citizens in this area of human services through good recruitment, careful training, and proper compensation.

4. Therefore, the subcommittee recommends the establishment of a senior citizens service training program for the purpose of recruiting and training willing and able older persons

to serve in specified community activities, the personnel for which are otherwise in short supply.

In addition to these measures the subcommittee recommends—

(a) A substantial expansion in the programs of the Department of Labor and the Department of Commerce to provide education and research information to employers and labor organizations on the abilities of workers over 45 and on the need for full utilization of our manpower resources.

(b) Added investment by the U.S. Employment Service in cooperation with Vocational Education in its important special programs for older workers. These efforts should include funds and personnel for special job counseling services for older applicants; training and retraining of older workers for occupations in scarce supply; advice to employers on effective methods of job reclassification to use fully the capacities of older workers.

(c) Continuance of the leadership shown by the U.S. Civil Service Commission in eliminating age discrimination in Federal employment. Further advances can be made in developing "tapering off" programs, redesigning positions to meet older worker capacities, counseling and retraining older workers, and instituting retirement preparation programs.

III. An Adequate Income

A major problem for millions of older persons throughout the Nation is how to maintain a decent, independent American standard of living on an income below or barely at the subsistence level. The studies of the subcommittee, and pages of eloquent testimony show that at least half of the aged—approximately 8 million people—cannot afford, today, decent housing, proper nutrition, adequate medical care, preventive or acute, or necessary recreation.

Some of the relevant data developed by the subcommittee in this report are as follows:

Taking all aged individuals (including those employed full time), almost 60 percent had less than \$1,000 money income in 1958. Another 20 percent were in the \$1,000 to \$2,000 range.

The average income for an over-65 family is about half that of all families.

In 1959 about two out of five aged spending units (37 percent) had liquid assets of \$200 or less. Two out of three had less than \$2,000 in liquid assets to handle any emergencies or to cover daily living expenses.

The average benefit for a person presently on social security is \$72 per month, and \$82 for those currently retiring. The average benefit for retired couples is \$120 per month. An aged widow now on the benefit rolls subsists on an average of \$56 per month.

The average monthly payment under old-age assistance (October 1959) was \$65, with a range among the States of \$30 to \$110.

From either the standpoint of income adequacy to meet a decent level of living, or of relationship of retirement income to previous earnings, OASDI benefits are far below an acceptable level for older Americans living in our day and age. Income from other sources is

highly limited. Detailed information on this subject is summarized in chapter III.

Given the national will to meet the income problem, the Nation's economy has the capacity to meet it now, and increasingly so in the future. In recommending raises in social security benefits, the subcommittee, wishes at the same time to emphasize that progress in other areas, such as health service costs, housing, and the like, also affect the income picture.

5. Specifically the subcommittee recommends a substantial increase in benefits under old-age insurance for all beneficiaries and a raise in the minimum benefit from \$33 to at least \$50 per month.

The adoption of this recommendation will be a step in the direction of two important objectives:

(a) A substantial increase in benefits for all beneficiaries is in keeping with the principle that retirement income should be much closer to previous earnings than is now the case, if America's senior citizens are to live decently and independently.

(b) By raising the minimum benefit we recognize and do something about reducing the gap between retirement income and the amount necessary for modest American living.

As a means of providing more adequate retirement benefits for the younger and middle generations when they retire, as well as for those presently retired, the taxable earnings base should be increased to at least \$6,000.

6. To provide protection for the purchasing power of retirement income, the subcommittee recommends study of proposals to issue Government constant purchasing power bonds for retirement purposes.

While wage increases provide protection against cost-of-living rises during the work life of men and women, pension plans ordinarily do not. It has been proposed that such protection could be provided through Government action by issuing Government bonds, redeemable at an amount adjusted to account for increases in the cost of living. By investing in such bonds, pension funds and retirement annuity companies would be able to adjust pension benefits to increases in living costs. Further, individuals could purchase such bonds for retirement purposes. Those bonds redeemed before a stipulated age of the beneficiary might carry only a given interest rate, and not the purchasing power provision. The subcommittee believes that this proposal merits careful study and consideration.

IV. Housing the Elderly

The provision of safe, sanitary, and congenial housing at a rental which older persons can afford is a major unmet need of the elderly. The housing needs of older persons are diverse and varied and range from retirement houses to retirement hotels, from public low-rent housing to cooperative-type facilities, from living in the city to residing in the suburbs or running a farm. However, the retired aged have common problems which include low income, a need for meaningful social activity to avoid loneliness and frustration, and diminution of physical capacity as the aging process takes place. Whatever type of housing program is undertaken for the elderly, whether through

public or private auspices, these three common problems must be solved.

The subcommittee found that the Housing Act of 1956 and the major advance made by the Housing Act of 1959 provided the basis for a bold national effort in housing for the elderly. However, an assessment of actual accomplishments in relation to the volume of need indicates limited action. Basic data are set forth in chapter VI.

In brief, the subcommittee found that:

A higher percentage of the elderly, especially of those who rent, live in substandard dwellings than is the case for the rest of the population.

They often own and live in houses either too old and too big for them or rent single rooms too small for them in rooming houses.

A sizable proportion of older people live with children or other relatives often because of necessity rather than choice.

Over two-thirds of the elderly either live alone or with a spouse or other relative in a two-person household. An especially large proportion of aged women who have outlived their husbands are living alone.

In addition to the current picture of generally low income among the elderly, the projections of rising proportions of those over 75 in the next 15 years will intensify the housing problem.

Many elderly couples have small assets or income just above the limits for eligibility for public housing, but not sufficient for decent, suitable private housing at current costs.

Thus, despite the beginning success of a broadened program of public housing for the elderly, the bulk of America's senior citizens will continue to live in unsuitable structures until supply begins to meet demand within their financial limitations. The elderly require a special allocation of public housing.

7. The subcommittee, therefore, recommends that the Congress consider in 1960 legislation authorizing for a minimum of 5 years an addition to the total authorization for federally aided public housing of 10,000 units per year for housing the low-income elderly.

The Congress took a major step forward in 1959 in authorizing a \$50 million direct loan program to assist private, nonprofit corporations to provide housing and related facilities for the elderly. The subcommittee feels, however, that the \$50 million authorization, which was not even appropriated last year, is at best a negligible revolving fund in relation to the need.

8. The subcommittee recommends that the authorization should be raised to the original proposal of \$100 million and should be appropriated for use in fiscal year 1960, and the Federal agencies requested to act quickly on this program. In subsequent years additional appropriations should be made as applications warrant.

In any comprehensive housing program for senior citizens, plans should include provision for community services to assist the aged to live independently and congenially as long as possible and to provide necessary facilities when infirmities finally do develop.

A basic minimum opportunity for medical aid, counseling services, social and religious activities should be available in the neighborhood

or easily accessible by transportation. If these facilities are not provided, the community suffers as well as the aged.

9. The subcommittee, therefore, recommends that provision for such essential health and social services be required in plans for multiple-housing developments involving direct Federal loans to nonprofit groups for housing the elderly. With respect to private sales and rental housing, the subcommittee recommends consideration of these services for inclusion in the amount eligible for FHA mortgage insurance.

* * * * *

VI. Broader Application of Present Knowledge

A major problem of America's senior citizens is how to benefit now from the considerable body of knowledge already accumulated for sustaining their health and independence.

Throughout the course of its hearings and investigations, the subcommittee was greatly impressed with the knowledge gained through a number of forward-looking experiments in screening for early detection of disease, in organized home-care programs, in centralized referral and counseling services, and in programs of multipurpose activity and social centers.

These research and experimental efforts have provided convincing evidence that coordinated community services led by trained personnel can improve and sustain physical and mental health. They enable older persons to continue as self-sufficient, integrated members of their families and communities. For those affected by long-term chronic illness they help restore physical, emotional, social, and economic resources.

From a strictly financial point of view, the subcommittee was presented with documentary evidence of substantial savings achieved from these experiments:

Community services of varied kinds have conserved the health of significant numbers of older persons who otherwise would have required expensive hospitalization or institutionalization.

Programs of organized home medical care for patients who do not require specialized hospital attention have saved from one-third to one-half hospital operating costs.

Preventive and home service experiments have relieved in many instances excessive need for beds and have made huge capital outlay for institutional facilities unnecessary.

The subcommittee feels that the principles demonstrated in these experimental efforts in a few parts of the country can be extended to many other areas where they are urgently needed. Federal agencies, particularly the U.S. Public Health Service, can be more active in making the information available to States and communities and in providing technical assistance and consultation to them.

The subcommittee suggests that in this field consideration be given to the mechanism traditionally used in our Federal system, namely, that of stimulative grants to improve the health of our people.

11. Project grants to State and local groups, together with necessary funds for technical assistance, should be provided for demonstration programs to expand, as well as evaluate, organized community services for health screening, counseling and referral, homemaker and home-care services, activity and social centers.

Encouragement should also be given in these programs to demonstrations in the training of professional and lay persons who are devoting time and energy to helping senior citizens find and maintain their recognized place in the community. The newness of the problem, combined with its rapidly increasing magnitude, makes current shortages inevitable. But extensive training of personnel, both academic and inservice, can overcome them.

* * * * *

CHAPTER V.—DEVELOPMENTS IN AGING, 1959 TO 1963

(Report of the Special Committee on Aging, U.S. Senate, Feb. 11, 1963)

EFFECTIVE ORGANIZATION OF FEDERAL PROGRAMS IN AGING

The existence of this special committee and the number of Senators who have contributed through their membership on it is in itself recognition that there is wide and deep concern with the problems of older people throughout the United States. The committee's hearings have borne this out and have well illustrated both the scope and complexity of those problems and the need for effective leadership at the Federal level in devising and promoting solutions to them. Interest in the House of Representatives also has been clearly demonstrated. Yet despite this and despite the oft-expressed concern of the Nation as a whole, the executive branch of our Government, even through changes of administration, has dragged its feet for over a decade and still refuses to create an agency that can give full time and attention to the broad range of interrelated needs and potentials of older people, that can serve as their spokesman, and because of its independence of other agencies and high position in the governmental structure, can command the wholehearted cooperation of all governmental agencies and of nongovernmental organizations in achieving effective and coordinated action. Such an agency, functioning at the White House level, serving as the focal point for Federal activities in aging, capable of coordinating the work of the departments in this field, devoting its full attention to this area, and able to advise the President and the Congress without departmental bias, is imperatively needed.

When spurred by congressional attention, the executive branch has taken action or put forth plans for action only to relapse when the spotlight was off. The measures taken with respect to coordinating highlighting, and giving drive to a multiplicity of Federal programs in aging have been sporadic, spasmodic, piecemeal, hesitant, and futile.

Responsibility for developing programs to serve the needs of older persons is, of course, a shared responsibility. It involves the Federal Government, the States and their communities, and voluntary agencies and organizations at all levels. This partnership of governmental and voluntary agencies is in accord with our time-tested American tradition; it best takes advantage of the essential contribution the individual himself must make in creating a secure, healthful, and meaningful climate for the later years.

The opportunity to share in this responsibility has caught the imagination of many of the States and scores of communities and organizations over the past decade. The variety of approaches and programs developed is almost infinite, reflecting the many-faceted nature of older people and the older population, the needs perceived by sponsoring agencies, and the knowledge and resources available to them. While these developments have come rapidly and while they reach across the entire country, they are nevertheless spotty, often inadequately conceived, and generally undernourished.

The experience of the past decade, culminating in the White House Conference on Aging in January 1961, has clearly indicated the need for a focal point within the Federal Government for providing information, guidance, and support to the rapidly growing number of agencies and organizations eager to shoulder part of the responsibility.

Functions to be carried out by such a focal point within the Federal Government have been identified, as follows:

(1) Conduct and support research and keep abreast of emerging knowledge and developments in the total field of aging;

(2) Identify unmet needs and develop policies and program recommendations designed (a) to alleviate the problems of aging and (b) to enable older people and society to derive the benefits of longer life;

(3) Maintain liaison, develop cooperative relationships, and coordinative mechanisms among Federal agencies, national and international organizations which share responsibility in the field;

(4) Provide technical and financial assistance for organization, research, and demonstrations, and program development to States, communities, universities, and other organizations in areas not covered by existing programs;

(5) Serve as a national clearinghouse for the collection and dissemination of information essential to research, training, legislation, and program development;

(6) Sponsor and cooperate with other agencies in conducting conferences, seminars, training, and research programs in aging;

(7) Compile, and make public, program aids, factbooks, including guides, bibliographies, case studies, exhibits; and

(8) Conduct an intensive followup of the recommendations and actions resulting from the White House Conference on Aging.

Our committee's recent field hearings provided ample evidence of the desire of the States and communities to carry out their vital roles in this partnership. Effective performance of their roles, however, is dependent on effective performance of those functions which are the responsibility of the Federal partner. And our hearings made it clear that we lack anything even approaching effective performance on the part of the Federal partner.

The failure, to date, to properly organize Federal activities in aging, which is unforgivable, is easily understandable. There has been no directive from above. The task has been left up to the coequal agencies involved and no one agency is willing to release a shred of its authority to the others. The Department of Health, Education, and Welfare which feels itself somehow more equal than the other departments with interests in aging, is prolific of ideas which would give it a dominant role but adamant in its opposition to any proposal which might lead to the coordination of its activities in aging with those of other agencies under the leadership of a body above itself and the other agencies. The repeatedly undertaken pretense of resolving such difficulties by bringing together the Secretaries of the various departments in a Federal Council on Aging or a Presidential Council on Aging have been, are, and always will be meaningless. It is absurd to expect that key officials in existing agencies with sufficient authority and prestige to give leadership and continuing support to the effort needed can devote attention to such a task. Quite naturally, but unfortunately for the aged, they have other weighty and statutory

responsibilities which preclude more than occasional and tangential personal involvement in the field of aging.

The reluctance of career staff within the executive branch to support the development of an effective mechanism for overall study, planning, and coordination is understandable in terms of the usual pattern of opposition by established agencies to a new entry in a field they wish to reserve for possible future expansion for themselves, particularly one with such wide public appeal.

It is not as easy to understand why those in the executive branch who have and are responsible for taking a Government-wide view should be content to permit this lack of overall leadership and representation in an area of such dimensions, present and potential. It is almost impossible to understand in view of the fact that people in the administration with such responsibility did so excellent a job last year in persuading the Congress that it was important to establish in the Executive Office of the President an Office of Science and Technology. The reasons they so persuasively advanced at that time apply with equal force to our contention that Federal activities in aging should be similarly centered in an agency at the White House level. That this is so was spelled out in a joint letter to the President from Senator McNamara and Congressman Fogarty¹ which reads as follows:

APRIL 9, 1962.

THE PRESIDENT,
The White House,
Washington, D.C.

DEAR MR. PRESIDENT: We have given careful study to your Reorganization Plan No. 2 of 1962 designed to establish an Office of Science and Technology as a new unit within the Executive Office of the President. In so doing, we have read with great interest the reasons underlying that proposal, both as set forth in your message to the Congress and as given in the study submitted to the Senate's Committee on Government Operations by one of its subcommittees in justification of such a proposal.

We find the reasoning persuasive. We shall support the proposal.

We write today to point out what we believe to be compelling parallels between the reasoning underlying your proposal and that on which our identical bills calling for the creation of a Commission on Aging, similarly responsible to the President, rests.

Referring to the National Science Foundation, your report states that it "being at the same organizational level as other agencies, cannot satisfactorily coordinate Federal science policies or evaluate programs of other agencies. Science policies, transcending agency lines, need to be coordinated and shaped at the level of the Executive Office of the President drawing upon many resources both within and outside of the Government. Similarly, staff efforts at that higher level are required for the evaluation of Government programs in science and technology."

Substitute "Special Staff on Aging" for "National Science Foundation" and "policy with respect to aging" for "science policies," and your reasoning applies perfectly to our proposal.

¹ Senator McNamara and Congressman Fogarty introduced identical bills (S. 2779 and H.R. 10014) calling for the creation of a U.S. Commission on Aging. The bill is discussed later in this chapter.

You advise the Congress that should the Office of Science and Technology be created, "the Foundation will continue to originate policy proposals and recommendations concerning the support of basic research and education in the sciences, and the new Office will look to the Foundation to provide studies and information on which sound national policies in science and technology can be based."

Similarly, should the Commission on Aging be created, the Special Staff on Aging in the Department of Health, Education, and Welfare will continue to or will be stimulated to originate policy proposals and recommendations concerning the support of basic research and education in the field of aging and the new Commission will look to the special staff to provide studies and information which will help provide the basis on which sound national policies aimed at resolving the major problems concerning our more than 17 million older people can be based.

The subcommittee study brought out the fact that some eight departments and agencies, quite understandably and properly, conduct major programs in the sciences and that it is essential to create a high-level agency to coordinate, stimulate, and objectively report on their activities in that area.

Similarly, some five departments and agencies have major contributions to make in the area of aging. This situation calls for the creation of a similar high-level agency for the same reasons and, in addition, because, although the responsibilities of certain of the agencies in the field of aging are of major importance to those concerned with the problems of aging, they are too often given little attention by departmental and agency directors confronted by a host of other responsibilities.

The study states that "* * * a President can be greatly helped by having his own above-the-department science advisers. They can give him counsel 'in the round'—from a Government-wide, rather than departmental, perspective. They can assist him in cross-agency coordination. They can alert him to promising developments lying outside of obvious agency missions and having no departmental home. They can call to his attention programs of high national priority, but low agency priority. They can help him in checking on agency performance."

That is an impressive list of reasons for supporting your proposal. Each of those reasons, we believe, applies with equal cogency and strength to our own proposal.

Finally, the study advises us that "the President and the Bureau, where major questions are at issue, can profit greatly by having a ready source of above-the-department technical advice. A President needs the protection of more than one channel of technical counsel. Also, departmental experts may become overcommitted to their own agency program objectives. Program protagonists are not necessarily good program critics."

Certainly that is as true in the field of aging as it is in the area of science.

We are quite confident that such heads of departments and agencies as may be called to testify on your Reorganization Plan No. 2 will find your reasoning and that of the Senate's study group quite convincing and will support your recommendation. We hope, particularly in view of your own great interest in the problems of the aged,

which, we know, antedates your service on the Senate's Subcommittee on the Problems of the Aged and Aging, that these same officials and your administration will find that same reasoning just as convincing when they report on our recommendation.

Faithfully yours,

PAT McNAMARA,
U.S. Senator.

JOHN E. FOGARTY,
Member of Congress.

Dimensions of the problem.—The bare statistics concerning the growth of our older population in absolute numbers and proportion are by now familiar. The argument can be made that adequate representation at an identifiable point in the executive branch is due a population group whose number exceeds the population of any State; which exceeds the total population now living on farms; which will soon exceed in number the body of organized labor. Each year more people reach age 65 than are in the population of each of several States.

The need for overall leadership by planning and coordination can be supported on a fiscal basis alone: The Federal Council on Aging in its 1962 report to the President estimates over \$21.6 billion as the cost of all Federal programs and tax benefits in fiscal year 1962 as compared with \$11.6 billion 5 years earlier, and \$5.6 billion 10 years ago.

Earlier conclusions of subcommittee.—The report of the Subcommittee on Problems of the Aged and Aging dealt with the subject of Federal organization. It pointed out that despite the intensity of problems and the numbers involved, there was—

no special agency authorized by the Congress to be concerned full time with the total range of problems in this national area of public policy. The Nation's approach * * * is fragmented, piecemeal, haphazard, and without focus * * *. The position of the programs * * * is relegated to a secondary role and low status * * *.

The single most obvious fact about the problems of aging is that they concern in one way or another practically every department and agency of Government * * * the only efficient approach is an organic overall view.

Legislation proposed.—Developments since then have given further evidence of the truth of this statement. So much so that Senator McNamara, having introduced S. 1359 in the first session authorizing an Assistant Secretary and an Office on Aging in the Department of Health, Education, and Welfare, subsequently introduced S. 2779 in the second session jointly with Representative Fogarty with a provision for an independent Commission on Aging.

Speaking on the new bill, Senator McNamara said:

Despite similarity of objectives, the organizational approaches of S. 1359 and my new bill are obviously quite different. S. 1359 would strengthen an existing agency; the proposal Congressman Fogarty and I are now making jointly establishes a new agency.

I am well aware that there is ample evidence that the effectiveness of an agency in determining public policy is directly

related to its place in the established departmental structure of Government. Sound judgment would, therefore, dictate against creating a new instrument of Government if one already exists that can do the job that so urgently needs to be done.

I believe, however, that we do not now have such an agency of Government: One that can give full time and attention to the full range of interrelated needs and potentials of older people, serve as their eloquent spokesman, and—because of its independence and high position in the governmental structure—command the wholehearted cooperation of all governmental and nongovernmental agencies in achieving effective action. * * *

The bill I am introducing today, therefore, provides for a high-level independent agency which will devote full time to the total range of needs and potentials of older people, without fragmentation and with balanced perspective, and which will command the respect and full attention of the Nation's total efforts in behalf of the aging.

The bills, S. 2779 and H.R. 10014, introduced by Senator McNamara² and Congressman Fogarty call for the establishment of a permanent and independent U.S. Commission on Aging. It would provide a bipartisan, three-man Commission, appointed by the President and responsible to him, to be concerned full time with the full range of problems and potentialities of America's more than 17 million senior citizens. The Commission would serve as the focal point within the Federal Government for developing national policy; for providing information, guidance, and support to governmental and nongovernmental agencies with programs in the field of aging; and for developing and sponsoring a balanced nationwide program to achieve the objectives set forth in its preamble. It would have the advice of an Advisory Council of 20 members, including the heads of departments concerned, three Senators and three Representatives and also of an Interdepartmental Council. The bills would also authorize planning and project grants to assist the States in developing programs to benefit older persons and would provide for Federal sharing in the administrative costs of a State's planning and coordinating agency. Grants to institutions and organizations for demonstration, research, and training in the field of aging are also authorized.

Bases for support of commission form of organization.—We favor a commission as the organizational pattern within the Federal Government because it would lend (1) better and greater status, (2) balance, (3) strength, (4) continuity, and (5) visibility to Federal activities in aging. Status and balance, plus a comprehensive view, are both relative to the need to avoid domination of programs in aging by the Department of Health, Education, and Welfare and by the Welfare Administration in that Department—a fear shared by both Federal and State agencies, and with ample reason, as events have demonstrated. A commission can give full time and attention to the total range of interrelated needs and potentials of older people, and because of its independent and high position in the governmental structure, is designed to command the cooperation of all governmental and nongov-

² With the cosponsorship of Senators Long of Missouri, Randolph, of West Virginia, and Pell, of Rhode Island.

ernmental agencies. It is a principle of public administration and of management generally that you cannot coordinate from below, that specifically departments and independent agencies cannot be coordinated by a subordinate unit within one of them. All efforts over the years to prove the contrary have been futile, except insofar as they have served as tests to prove clearly that it cannot be done.

A balanced approach, a comprehensive view cannot be attained from a niche in the structure of one department. Institutional loyalties, and priorities, prestige, the system of rewards and punishments all combine to press into conformity with traditional patterns and goals, even broad-gaged, dedicated individuals. This process takes place even with Cabinet officers in relation to their departmental responsibilities. Their subordinates are much less able to maintain a total governmental view of all the programs, present and potential, affecting older persons.

The strength of the commission derives from the authorities and facilities including the grant provisions, in the proposed legislation, and especially from its relationship to the President. The main argument advanced by opponents of a commission has been that the President should not be burdened by another unit attached to his office, and that if it were, the commission would not in fact have opportunities to consult with the President. The position of proponents of a commission is not based on any expectation of frequent contacts with the President or his chief aids. In fact, the burdens on the Executive Office would be lessened with the creation of a commission. If the commission has the authority to go directly to the President, it will rarely, if ever, need to exercise this privilege to settle a difference within the executive branch. The commission itself would be preferred by departments and agencies as the level at which to reconcile differences and to reach agreement. Even though the commission would have no authority over Cabinet members and heads of agencies, its advice and recommendations would have considerable weight with these officials, in view of its facilities for study and consultation, including the interdepartmental committee and the public advisory board. If on the basis of such deliberations, the commission consisting of three Presidential appointees unanimously or by a majority favored a proposal for action, policy, or point of view, obviously the head of any agency would be strongly influenced, but still could act as he saw fit in his own sphere of responsibility.

The commission structure will have continuity through legislative authorization, Presidential appointment, and the fact that there will be three members. Being independent of any department, it will not be subject to the changes in organization and personnel which have characterized the Department of Health, Education, and Welfare. One witness, referring to the Special Staff on Aging, remarked at the hearings in 1962: "I have actually seen five different staff directors under four different Secretaries."

Presidential appointees are less likely to be moved about, and if one should resign, two remain to provide continuity, at the President's pleasure.

High visibility and a favorable image of the Federal Government's concern with the needs and potentials will be provided by a commission responsible to and appointed by the President with the advice and consent of the Senate. This is more than ever needed now that

the Special Staff on Aging has been removed from the Office of the Secretary and downgraded to a place in a new Welfare Administration which is primarily identified with the agency responsible for public assistance.

At least one witness foresaw this development:

My experience and that of most other States argues against placing responsibility for programs for older persons within an operating department. * * * From what I know of the operation of the Department of Health, Education, and Welfare, I have tried to envision what might happen if the responsibilities and grant programs were placed in that Department. To get real emphasis, such a program would have to be in the Office of the Secretary, and since apparently operating programs are not usually in the Office of the Secretary, it would probably not be left there. * * *

Another witness questioning the wisdom of assigning coordinating responsibility for aging in a few State welfare departments, said:

* * * This connotes to the public, and to older people particularly, that we think of them only, or primarily, in the welfare context. Most older people had a "bellyfull" of public welfare during the great depression. They will not, in my experience and judgment, use services, extended under welfare auspices, nearly as extensively as they will use them under other auspices.

It was the announced intention of the Department on establishing the Welfare Administration to broaden the concept of welfare beyond the public identification with relief recipients and investigators. However, it is to be expected that more of the color of the major agency in this new organization—the former Bureau of Public Assistance—will rub off on the Special Staff on Aging than vice versa. In any case, this committee is convinced that the Federal Government's voice on aging activities and its major source of guidance in developing policy with respect to aging should not and must not be identified with "welfare" operations. We can well imagine the violent reaction that would occur among America's farmers if our farm programs were directed by a "welfare" agency or among our industrial workers if the Labor Department's programs were put under "welfare." Our older people are equally proud and independent and desire, more than anything else to remain free of and untouched by anything that smacks of "welfare." Yet the Department of Health, Education, and Welfare has seen fit to relegate what was supposed to be the Secretary's Special Staff on Aging, reviewing and advising on all departmental activities in the field, to the Welfare Administration. We believe the Welfare Administration should have a special staff on aging. So too the Public Health Service and the Office of Education. Labor has one and Agriculture has one. But no one of these, presumably coequal groups in their own sphere, can speak for all: most certainly they cannot coordinate the activities of all. Nor can any one of them meaningfully service a group of Cabinet level officers giving a once a year or once in 2 years nod to the direction of the aging, whether the group bear the title, "Federal Council on Aging" or the more resounding name, "President's Council on Aging."

Incidentally, the committee notes, with sadness but no surprise, that the renamed President's Council on Aging, announced with great fanfare just when a House subcommittee was considering action on the bill for a U.S. Commission on Aging, has met but once. Its executive committee, of lesser employees, has made no recommendations to the Council. Because Health, Education, and Welfare acquired a new Secretary, it was for months unable to move on its budget. It has a total staff of three professionals and two nonprofessionals responsible in many ways to but one of the many agencies involved. And since HEW, without specific congressional authorization, provides 50 percent of its budget, the Council could not in any case function with the supradepartmental detachment and objectivity that is essential.

Testimony on Federal organizations for aging.—The General Subcommittee on Education, chaired by Representative Cleveland Bailey, held a series of hearings on H.R. 10014 (the Fogarty-McNamara bill). By April 17, when the hearings were held in Washington, it had become clear—particularly as a result of addresses by Assistant Secretary Wilbur Cohen and Representative Fogarty—that the major point at issue was whether we needed a commission or whether the continued vesting of authority in Health, Education, and Welfare and a so-called Council on Aging would do. During the hearings on April 17, 18, and 19 in Washington, 14 witnesses placed themselves on record regarding their position on the commission form of organization provided in the Fogarty-McNamara bill as compared to other forms of organization. It is significant that 13 out of 14 witnesses clearly favored the commission form. This position was maintained in the face of searching questions by members of the subcommittee.

Expert witnesses.—It is interesting to note the backgrounds and affiliations of these witnesses. They came from local, State, and National organizations on aging; they included unions, voluntary and professional organizations, religious organizations. Most impressive in establishing the expert qualifications of the witnesses were these facts: Five were chairmen or executives of State commissions or agencies on aging; five were former Federal officers who had key responsibilities in governmental programs for aging during this decade and were presently occupied in vital nongovernmental posts in the field of aging; one had both Federal and State Government aging posts. Their titles in their former Federal posts included Director of the Special Staff on Aging; Staff Director of the White House Conference on Aging; Special Assistant for Aging in the Department of Labor; Technical Director for Education, White House Conference on Aging; Assistant to the Under Secretary of Health, Education, and Welfare; Chief, Office of Aging and National Office of Vital Statistics in the Public Health Service. All agreed on the frustrations of their experience in attempting to work effectively within the organizational structure which various administrations had provided in the field of aging. These men, who know Government intimately, felt strongly that an agency over and above those in existing departments was imperatively needed.³

The organizational affiliations of the witnesses ranged from the National Conference of Catholic Charities to the National Council of Negro Women and included two large unions which have retired

³ Hearings, General Subcommittee on Education, Committee on Education and Labor, House of Representatives, on H.R. 10014, pts. 1 and 2, 1962, Washington, D.C.

workers' departments—the United Automobile Workers and the United Steelworkers.

It is perhaps of interest to consider the proposal for a U.S. Commission in light of the testimony of Garson Meyer, president of the National Council on the Aging, at the hearing of the Bailey subcommittee in Washington, D.C. Mr. Meyer's testimony was directed to principles rather than to a specific form of organization. Specifically, he said:

The council would therefore urge that whatever form the Congress may devise to carry out Federal responsibilities in the field of aging, it will recognize not only the responsibilities but the limitations of government, and establish as a basic principle of its operations at all levels cooperation with and effective use of the organized, voluntary services now operating and available to older people at National, State, and local levels.

One of the principles expressed by Mr. Meyer is:

It is the council's belief that the economic, social, educational, health, and spiritual needs of older people are so inextricably interwoven that to deal with them singly is to present a fragmented and unrealistic approach.

This, incidentally, is the very principle that led to the establishment of the Senate's Special Committee on Aging. It is also the reason Senator McNamara and Representative Fogarty have proposed an independent commission, rather than an organization located in a single department which—no matter how broad its functions—cannot assure balanced representation of all concerned. It is the reason the Fogarty-McNamara bill provides planning grants for the development of an overall State plan, and specifies that all the appropriate public and voluntary agencies must be involved in the development of this plan.

Mr. Meyer's second principle concerned the importance of voluntary effort "working in close cooperation with government"—a close partnership between voluntary agencies and governmental agencies at all levels. Again the specific provision of the McNamara-Fogarty bill for participation of the voluntary agencies in the development of the State plan as well as in the project grants reflects an appreciation of the need for nourishing and strengthening this partnership.

He also urged that grants for experimentation, demonstration and research be determined by priority of the need for new information. Pointing to some of the programs that have already been demonstrated to a rather remarkable degree, he stressed the need for an effective means of disseminating knowledge now available and for providing the machinery to establish these services "in all communities in some proportion to the developing need." The McNamara-Fogarty bill charges the Commission with responsibility for broadly disseminating information about the needs of older persons and about programs and approaches which meet these needs. Communities and public and voluntary agencies within each State would be guaranteed funds, in proportion to the State's older population, for projects they deem necessary and desirable, with emphasis on the development of action programs and services. Provision is made for the involvement and participation of the voluntary and public agencies of all

States and communities in such a way as to promote continuance and further development.

Because funds for aging activities would be broadly defined and widely available—rather than concentrated on the demonstration and training projects of the more sophisticated communities and universities, our growing knowledge can be translated into effective action and services that reach older people in all communities throughout the country.

Most expert of all witnesses was Congressman Fogarty, the sponsor of the bill, who, as chairman of the Subcommittee on Appropriations for the Department of Health, Education, and Welfare, has been examining matching activities in aging for 15 years. Congressman Fogarty, who lent yeoman support to the Department's occasional efforts to coordinate and make meaningful its various activities in aging and those of other departments, is convinced that the job cannot be done from within that or any multipurpose agency. He is convinced that only through the creation of a U.S. Commission on Aging, attached to the Presidency, can the task be accomplished. We are persuaded by his experience which parallels our reasoning. We agree. We urge the prompt enactment of legislation to establish the U.S. Commission on Aging in the form and with the powers set forth in S. 2779 and H.R. 10014 of the 87th Congress.

The counterproposal.—At the insistence of the Bailey subcommittee, a month after the conclusion of the previously scheduled hearings, Assistant Secretary Cohen testified for the Department of Health, Education, and Welfare. At that time, the Assistant Secretary discussed an administration bill subsequently introduced by Senator McNamara ("by request" and "without enthusiasm") and by Representative Bailey (H.R. 11752) and announced that the Federal Council on Aging was being converted by Executive order into the President's Council on Aging with greater stature and fiscal support.

This proposal authorizes \$10 million a year for a 5-year program of special project grants to be administered by the Secretary of Health, Education, and Welfare. The objective of this proposal is twofold:

- (1) To support research, demonstration, and evaluation projects to deal with some of the many problems faced by our older people.

- (2) To encourage and assist universities, professional schools, and other appropriate institutions, organizations, and agencies to step up their training programs for professional and technical personnel needed to provide the broad range of services required by older people.

A major difference between this proposal and that of the McNamara-Fogarty bill—leaving aside the very basic difference in the administering agency—is that the Department's proposal does not provide for Federal financial participation in the establishment and improvement of State agencies to plan and develop statewide programs. There is no provision for an overall State plan developed through consultation with all appropriate public and voluntary agencies, nor are the State's given any function under the legislation. Nor does the Department's proposal specify how the total of \$10 million a year shall be divided between training and research projects or between universities and public agencies serving the aged.

Because the administration's proposal was limited to research and training grants, it is of interest to compare these provisions with the grants provided by the McNamara-Fogarty bill.

Under the McNamara-Fogarty bill, communities and public and nonprofit agencies within each State are guaranteed funds in proportion to their older population, for projects they deem necessary and desirable with emphasis on development of action programs and services. Initial approval of grants is made within the State and any applicant may have a hearing before the State commission. Funds are also provided for planning and administration. These are in addition to the project grants and make the project grants more meaningful and feasible to the State and its communities: first, because these projects will fit into an overall plan developed on the basis of consultation with all appropriate public and private agencies; second, because the States are enabled to furnish expert assistance in the planning of research and demonstration and in the preparation of applications which have a real chance of approval. This procedure would be quite similar to that followed under the time-tested and highly successful Hill-Burton hospital planning and construction program. Adoption of this same procedure acts to prevent a small clique in Washington from deciding what is good for the States and which groups or communities shall get grant assistance. Grants can be finally approved in Washington, but only upon a determination by a State that the grant application fits into the State's coordinated plan and has the approval of the State.

Under the departmental sponsored bill, the typical community agency would be in grossly unequal competition with university-sponsored applications since universities have had long experience in the preparation of research proposals; their faculties earn much of their prestige and promotions through their ability to secure research funds. Under these circumstances, projects would be less oriented to action and services; they would have no necessary relationship toward the needs and objectives as the State or communities see these and would not be part of a plan; there would be no assurance that a State would secure any funds and the extent to which funds might be available would be completely subject to decision by a Washington staff. Under the McNamara-Fogarty bill, the Federal administering agency can exercise such absolute power of decision only under title IV authorizing \$2 million for special demonstration, research or training projects, but about \$13 million of the authorization for planning, administration, research, and demonstration projects would be allocated among the States and expended in accordance with the plans of each State. The McNamara-Fogarty bill provides for involvement and participation by States and communities in such a way as to promote continuance and further development. The departmental bill might be a great boon to certain specially favored universities, but their researches would be less likely to result in continuing services to the elderly.

Subsequent developments.—The administration bill (H.R. 11752) apparently gained no support. Subsequently Representative O'Hara introduced H.R. 12799, to provide formula grants to the States rather than grants to nonprofit organizations. This bill was said to have had some administration support as a substitute for its first bill. In essence, therefore, it may be inferred that the Department was prepared

to accept the grant provisions of the McNamara-Fogarty bill, but not the commission form of organization.

A followup by the staff of the Special Committee on Aging with respect to the effects of resurrecting the Federal Council as the President's Council revealed that one or two additional staff members had been hired, that the members of the Council had not met and that there was no activities to report. An executive committee, of increasingly lower status, has met from time to time, but no recommendations for action have been forthcoming. To all appearances, the Council on Aging is inactive, even comatose, at the present time. Whether the future will see efforts to revive it again or not, the forecasts of futility expressed by the expert witnesses have been borne out by subsequent events.

In December of 1962, the Secretary of Health, Education, and Welfare announced the establishment of a Welfare Administration in the Department of which the Special Staff on Aging will be a part. Whether the President's Council, which has been functioning to all intents and purposes as a division subordinate to the special staff, is part of this relocation is not clear. Presumably the Council which was allegedly upgraded in May, was clearly downgraded in December. Apparently the question "Do you love the aged in December as you did in May?" has been answered in the negative. In any case, except for a brief period at the beginning of its existence, this mechanism for overall coordination has not been viable.

Tapping our human resources.—Our hearings made clear the fact that there are hundreds of thousands of our older people who are able and willing—in fact, anxious—to make their contributions as senior citizens of the community, receiving in return the satisfaction of knowing that they are still useful, valued members of society.

Today there are perhaps as many as 14 million people over 65 who are fully retired. In the next 40 years this number may double. The average retired person has about 80 hours a week of free time, many of them hours which hang heavy on his hands. Literally billions of man-hours are thus available which could be channeled into creative activity, for the good of the individual and of society in general. We believe that our older people are more than ready to pick up this challenge but that, as a society, we are not making it easy for them.

We cannot reasonably expect our older people to lead full and satisfying lives and to make their potential contribution to society if they do not have adequate food, clothing, shelter, and medical care—or even if they are preoccupied with worry about meeting the bills for these essentials.

A person who is economically disadvantaged is also socially disadvantaged and likely to have especially acute health problems. Various studies have shown a high correlation between isolation and mental illness or—the other side of the coin—between participation in meaningful activities and physical and mental health.

Of the older people who are relatively free of economic worries many are much more interested in volunteer activities than in full-time employment. The Senior Citizens Association of Los Angeles County, Inc., for example, made a survey of its membership "to learn the views of the senior citizen himself. Too often we have had to sit in the audience while other age groups tried to tell us how we should

spend the remaining years of our lives." Of their members classified as in "the somewhat higher income group" and of whom half reported having incomes adequate for their needs, 28 percent answered "Yes" to the question "Are you interested in volunteer work?" Of the same group, only 7 percent said they would like a full-time job and only 25 percent a part-time job.

The readiness of this association's membership to serve was conveyed to our committee in the following statement:

If one is to believe all the statements that you read and hear about persons retiring at 65 years of age you would come to the conclusion that such an individual is through with all life's activities and is of no more use to his community or his Nation except to amuse himself with the playing of cards or shuffleboard. The senior citizen often has personal characteristics that are lacking in other age groups, such as patience, tolerance, kindness, and consideration of others. Surely these attributes are of some use to the Nation and to the community.

Seemingly, the general impression of other age groups is that when an older person retires from a wage-paying job he must be considered a burden and a responsibility to his country for the rest of his life. In his early years the senior citizen had the responsibility of making a living for his family, therefore had very little time to devote to service of his community; and now, when he does have spare time for community service, he is told that he should spend his time fishing and playing cards.

The Senior Citizens Association of Los Angeles County believes that our government, on all levels—Federal, State, and local—should seek out ways to use this source of human power that is contained in a growing population of older people. They further believe that if older people enjoy reasonably good health, with a decent economic existence, we can, in time of disaster or any major trouble in our Nation, be an extra source of power for the Nation to draw on. On the other hand, an older group of citizens in poor health and forced to live on a low economic level would just be an added burden in a time of national peril.

The pronouncement of our President in saying that we should think of what we can do for our country is taken seriously by our senior citizens, and we want to be in condition, both mentally and physically, to serve our country in whatever way we can be used.

During our hearings, numerous references were made to ways in which older individuals are now serving their communities. The more typical of these—although perhaps even these are not widespread enough to be called typical—are: Participating in homemaker services; assisting in United Fund drives; helping with community studies; making toys for needy children; rolling bandages; working with the Red Cross and with State and local hospital and clinics.

The committee would like to make known several other kinds of volunteer services which were mentioned at our field hearings and which may not be widely known in other communities. One of these

is a service for the blind or other handicapped persons—taking them to the doctor's, helping them to get out for some recreation and to church or to visit friends. Another is helping with the distribution of surplus foods through a "good neighbor program." And still another—and this was put forward as a proposal and may not actually be in effect anywhere—was a clothes repair and maintenance unit as part of an activity center. The senior citizen who made this proposal stressed the value that older people place on neatness but pointed out that many of them—and especially the men who live alone—have neither the facilities nor the skills to keep their meager wardrobes in good repair.

We would call attention again to the recommendation of the subcommittee in its last report for a Senior Citizens Service Corps, with Federal grants to help support the local training programs. A bill to implement this proposal had been introduced by Senators McNamara, Randolph, and Clark, and 11 colleagues.

The Senior Citizens Service training program would establish training and refresher programs for developing within the group of willing and able retired Americans the necessary skills for meeting such shortages. Primarily part-time jobs would be filled through such effort.

The committee's 1961 hearings have added immeasurably to the already impressive evidence of the need to provide opportunities for our retired population to engage in useful and meaningful activities while at the same time helping to overcome critical manpower shortages in the vital fields of health, education, and welfare.

The McNamara-Fogarty proposal for a U.S. commission gives specific recognition to the need for channels whereby older people can offer their valuable service. The project grants, for example, would be available for the training of special personnel, including volunteers, who may be needed to carry out the programs and activities. The provision authorizing support for senior centers would specifically include centers that assist older persons in providing volunteer community or civic services.

ACTION FOR THE AGED AND AGING

(Report by the Subcommittee on Problems of the Aged and Aging, U.S. Senate, Jan. 27, 1961)

CHAPTER VI.—FEDERAL ORGANIZATION: A U.S. OFFICE OF AGING

If there is any one conclusion reached by this subcommittee, it is that the problems of senior citizens in America have emerged as a major national problem both in terms of intensity and numbers of people involved. Despite this fact, there is presently no special agency in the Federal Government authorized by the Congress to be concerned full time with the total range of problems in this national area of public policy. The Nation's approach to its senior citizens and to planning concerning the problems of the aged and aging is fragmented, piecemeal, haphazard and without focus. The voices of the elderly are muted in the many agencies of government. The position of the programs concerning the elderly is relegated to a secondary role and low status.

The subcommittee is convinced that the problems of aging are great enough in scope, urgent enough in priority, and complex enough in their interrelationships to require representation as an identifiable agency or office at the Federal level. This is equally true at the State and local levels.

The White House Conference on Aging was a major step in showing the need for a central focus on aging at the Federal, State, and local levels. The recommendations from this Conference indicate a need for a separate agency on aging at each of these levels. The creation of an office, such as a U.S. Office of Aging, and of similar agencies at the State level, will not automatically meet all the needs of senior citizens. But, given sufficient authority and support, it can produce a more systematic, more effective, more efficient approach to aging as a positive goal and social achievement rather than only as a problem.

THE NEED FOR FEDERAL ORGANIZATION

The natural process of governmental organization in the United States provides for resiliency and adaptability to change. As new problems emerge or old problems change in quality or scope, they are incorporated either through enlarging existing agencies or by creating new entities. This process of adaptation, sometimes called "interest group representation," is more properly categorized as a necessary embodiment in structure of major social concerns.

Examples of this natural process are clearly revealed in the creation of such agencies as the Department of Agriculture, the Labor Department, the Commerce Department, the Veterans' Administration, and other units. In addition to the formation of specific policies and the administration of specific programs, these Departments or agencies

have a generalized function to give focus and special attention to major social problems in their areas of interest.

There are 16 million senior citizens today with an ever-increasing number in the future. These citizens have problems and concerns comparable in scope and intensity on a nationwide scale with those which are represented by the agencies mentioned above.

Our older citizens constitute a major natural resource, now sadly neglected, but potentially invaluable to the welfare of the Nation. In this respect they are comparable to other natural resources represented by identifiable agencies in the Federal Government. For example, within the Department of the Interior there is an Assistant Secretary for Fish and Wildlife and another Assistant Secretary for Mineral Resources. Under the latter, there is an Office of Saline Water and an Office for Oil. We realize these are important resources constituting special problems, and requiring representation. The Women's Bureau, the Bureau of Indian Affairs, the Children's Bureau, and others also recognize the need to conserve and promote basic human resources. They provide instruments for information, representation, and help. The senior citizen today, however, still has no legislatively backed agency to turn to in the Federal Government.

There are currently many piecemeal programs for older persons in the Federal Government. More than two dozen agencies each try to deal with some isolated aspect of aging. Communication, coordination—prevention of waste and duplication—become increasingly difficult as the various agencies attempt to meet complex, interrelated problems from a necessarily singular interest.

The difficulties of preventing unduplicated effort are compounded by the additional job of effective communication and cooperation with State governments and their many similar programs. The added bits and pieces become a confusing web too often marked by obstacles, rather than roadways, to a well-conceived set of programs which might make life for older citizens meaningful and satisfying.

The stimuli of Federal grants and technical assistance, in connection with the White House Conference on Aging, helped many States to establish agencies to give special attention to problems of aging. These agencies were effective in facilitating Federal-State relationships. Most States hope to continue these units in accordance with the recommendations of the White House Conference but financial limitations hamper the prospect. With the termination of the Conference and its stimulative grants, the momentum made may be lost unless a new and better means is created to improve cooperation and coordination between the States and the Federal Government.

EXISTING FEDERAL PROGRAMS

Five departments and five independent agencies currently have programs immediately affecting the senior citizens of the country. The fragmentation and scattering of approaches among them have long been apparent to the individual agencies themselves and to students of the subject. It is particularly apparent to State and local agencies and organizations—and especially to senior citizens—attempting to obtain information and assistance from the Federal Government. There are large areas which are not the responsibility of any agency.

The "Background Paper on Federal Organization" for the White House Conference on Aging gives an indication of the diversity of these agency programs. Among the Departments and agencies involved are the following:

The Department of Health, Education, and Welfare which includes the Social Security Administration, the Public Health Service, Offices of Education and Vocational Rehabilitation, Food and Drug Administration, and Special Staff on Aging.

The Department of Labor and its Bureau of Employment Security, Bureau of Labor Statistics, and Bureau of Women.

The Departments of Agriculture, Commerce, and Treasury.

The Housing and Home Finance Agency which includes a division of housing for the elderly, a public housing unit on aging, and an FHA office for nursing home mortgage guarantees.

The Small Business Administration, the Veterans' Administration, the Civil Service Commission, and the Railroad Retirement Board.

It is this proliferation of departments and agencies which the proposed U.S. Office of Aging would view as a whole, studying the implications of individual activities in relation to the whole. It would not assume, in any way, any of their functions or responsibilities. On the contrary it would more likely assist in strengthening the aging activities of these other departments and agencies. It would stimulate, consult, and provide a means of coordination but it would not function as a direct operating agency.

The Federal Council on Aging.—It has been contended that the Federal Council on Aging already performs the stimulating, coordinating functions of an Office of Aging. The Federal Council was set up in 1956 as a sub-Cabinet committee and then reconstituted in 1959 at the Cabinet level by Presidential letter. At the present time it is composed of the Secretary of Health, Education, and Welfare as Chairman, the Secretaries of Agriculture, Commerce, Labor, and Treasury and the heads of the Housing and Home Finance Agency and the Veterans' Administration. Invitations to participate are issued to other departments and agencies when issues concerning them are brought before the Council.

The Council has a staff of two people, an executive secretary and an office secretary. Its budget is small, financed by contributions from the participating departments and agencies. Its duties call for review and evaluation of Federal programs and for recommendations "from time to time on how needs in this field can be better met."

The Federal Council on Aging has a history of meeting infrequently, and in its 4 years of existence—either at the sub-Cabinet or Cabinet level—has never recommended a single piece of legislation. In fact its members have had difficulty at times agreeing to an agenda for its meetings. While each of the departments and agencies contributed facts to the various annual reports to the President, an examination of these reports reveals little or nothing in the way of evaluation or recommendation.

The fault does not lie in the individual department or agency, but rather in the inherent inability of understaffed committees to substitute for a full-time, professional agency. With other matters of national and international concern ever present and urgent, Cabinet heads could only regard the Council as a peripheral activity, if not something of a nuisance. This reaction was often intensified when the

Council—partially because of its ex officio status—became embroiled in conflicts of jurisdiction and prerogative.

The Special Staff on Aging.—About a decade ago a special Committee on Aging was created in the Federal Security Agency, following the First National Conference on Aging in 1950. This committee performed a useful educative role as a pioneer agency in the field. It was reorganized as a Special Staff on Aging in 1956, but given little new responsibility or authority.

The Special Staff on Aging does not play any role in the formation of national policy dealing with older persons. Useful and necessary functions include compiling data from published material, publishing a national newsletter on aging, providing some technical services to States and localities and maintaining relationships with voluntary organizations. Its role in coordination is not extensive, but it does provide some opportunity for intradepartmental communication at staff levels.

The Special Staff on Aging is not an identifiable item in the budget but is included in the general budget of the Office of the Secretary. Its staff has been very small, increasing only slightly despite the rapid increase in Federal responsibility for the problems of older persons.

Slightly more than 5 years ago, Oveta Culp Hobby, then Secretary of Health, Education, and Welfare, said the Department was 10 years behind in its work in behalf of the aged. At that time there was a total of nine employees on the special staff. By the end of 1959, there were just 12, including 6 secretaries.

During the recent White House Conference on Aging the Special Staff was merged with the White House Conference temporary staff and devoted its time and energy to arrangements for the Conference. It was not involved, however, in advising or studying the interrelationships of major substantive issues in this field that were before the Nation.

As Senator McNamara concluded in an address¹ on this subject:

It is clear that the functions and purposes of the proposed U.S. Office of Aging are not being filled by any of the agencies. Quite the reverse is true. The functions which it would perform are now going begging.

THE NEED FOR COORDINATION AND STIMULATION

The single most obvious fact about the problems of aging is that they concern in one way or another practically every department and agency of government. Corollary to this fact is the equally obvious, yet equally important, generalization that every particular problem of older persons affects every other problem and accordingly, the only efficient approach is an organic, overall view.

Examples of these interrelationships and the way so many of the problems created by neglecting these interrelationships can be cited at length.

The maintenance of good health is related to income, adequate housing, proper recreation, and nutrition. Both the Public Health Service and the Department of Agriculture can provide older persons

¹ Address on the floor of the Senate, July 1, 1960, Congressional Record, vol. 106, No. 123.

with data on nutritional requirement for health. But neither agency can transform data and statistics into adequate, nutritional meals if the older person's income is too low. Data and advice thus turn to inedible mush. In this connection an Office of Aging—concerned with the total aspects—should be aware of the possible use of surplus foods and school lunch programs and how they might be available to older persons.

Another example involves the productive use of years in retirement. Today approximately 12 million Americans over 65 have retired completely and are spending, on the average, 15 years in retirement. In just 40 years we may have as many as 25 to 30 million retired persons over 65 living an additional 20 years beyond the period of gainful employment. The prospect of 25 million people spending 20 years with no role or important contribution to the economy and society should raise questions of the basic values of our times. Can our economy support so large a population of "nonproductive" citizens? Even if it can, should it do so? What must be planned and undertaken now and tomorrow to insure that 500 million man-years will not be wasted, but will be devoted to important service to the community and to self-enrichment? Who will be able to concentrate full-time on these economic implications of aging and provide data and recommendations to reckon with them?

This type of reflection, planning, and recommendation for action is assigned to no agency at the present time. The problems here involve considerations of employment, health, income, housing, senior centers which are all interrelated. It is this type of forward thinking and relational analysis which the Office of Aging can and should assume, both in behalf of the Nation's senior citizens and the Nation as a whole.

Without such a responsible agency there is no end of ad hoc, and generally feeble, efforts at "coordination" of the various activities of governmental agencies dealing with special aspects of aging. An advisory committee of public citizens provides some coordinative thought in housing; a small group of people work in social security to coordinate programs in public assistance with other social security programs; the Public Health Service has a coordinating committee; and there is an additional such committee on research in the National Institutes of Health.

These committees perform useful functions in their areas, but are not substitutes for the overall, meaningful thought and direction which are required.

SIMILAR DEVELOPMENTS

The proposal to create a U.S. Office of Aging parallels in many ways the establishment of the Children's Bureau in 1912. The Bureau is charged with investigating and reporting "upon all matters pertaining to the welfare of children and child life among all classes of our people." Its creation was a legislative accomplishment of the first magnitude, recognizing that the welfare of children is an appropriate, important concern of the Federal Government. Within a period of 50 years it has made incalculable contributions to the health, welfare, and long life expectancy of America's children.

The purpose of the Children's Bureau "is to serve all children" everywhere. It is concerned with their health problems, employ-

ment, housing, adoption, social services—all interrelated and requiring a view of the child not as fragmented pieces, but as a whole person. Its great contributions have been based on the concept of preventing problems rather than having to deal with them in their acute stages.

It is specifically in these areas that the U.S. Office of Aging will fulfill its essential role. It will provide a focal point for consideration of the needs of older persons as whole people. The problems of the Nation's senior citizens are emerging problems now reaching the scope where national attention and therefore a national agency is required.

SOME PROS AND CONS

The proposal to establish a U.S. Office of Aging has raised a number of questions with respect to its immediate and longrun value. The questions may be listed as follows:

1. If an Office of Aging is established, will it not tend to take over the functions in the area of aging now being carried out by other departments and agencies?

2. Won't an Office of Aging, located in the Department of Health, Education, and Welfare, be limited in its outlook to the interests of the department?

3. If there is to be an agency dealing with problems of aging on an overall basis, should it not be outside of any operating agency? Don't we need an independent commission instead?

4. Isn't it possible that a Federal agency active in this field will reduce the effectiveness and support of voluntary agencies with interests in this area?

These are the major questions which have been raised at various conferences and discussions of the proper Federal organization to meet the problems of an aging population. These questions raise proper concerns, but do not constitute serious objections to the creation of the proposed Office of Aging. The reasons include the following:

1. The Office of Aging will not have service functions of its own, but will be consultative, reflective, stimulative, and financially supportive for programs for senior citizens. It thus will not in any way assume the responsibilities filled by other departments and agencies, but rather will be helpful in strengthening them in the execution of their present responsibilities and the assumption by them of necessary new duties.

2. The history of State and Federal organization provides ample evidence that the effectiveness of an agency in the determination of public policy is directly related to its place in the established departmental structure of government. The use of independent commissions—outside of a regular department—is helpful for making studies and recommendations on a temporary basis. They are not, however, ordinarily employed for sustained contributions once the period of extensive study and reporting has taken place.

The past decade can be characterized largely as one of study, reports, discussion, and preparation, rather than concrete action. For the past 2 years the White House Conference on Aging and the hearings of this subcommittee have sparked local, State, and regional conferences; has produced numerous surveys, studies, reports, and recommendations; and was climaxed with a national conference of almost 3,000 delegates in Washington.

It is the belief of the subcommittee that the Nation is now ready for action and that further committees and further study will only induce disillusion, frustration, and cynicism among our aged citizens.

Former Secretary of Health, Education, and Welfare, Marion Folsom, in discussing Federal organization at the White House Conference on Aging, did not endorse the Office of Aging bill. But with respect to independent agencies, he said:

I do not believe that an independent agency would be feasible. We already have too many independent agencies in the Federal Government; recent studies to improve the efficiency of government have pointed out the desirability of moving in the opposite direction—concentrating functions and eliminating duplication and complication with the several departments now functioning in this field.

3. Assuming that an Office of Aging thus should be located in an established agency, the logical assignment is the Department of Health, Education, and Welfare. Its responsibilities in aging include income maintenance, health, financing medical care, rehabilitation, education, research and social services. Its role far exceeds that of any other governmental agency and lays a natural basis for integrative thinking in this field.

4. In order to relate closely to the formation of policies in behalf of older persons, the Office should be at the level of an Assistant Secretary of HEW, who would be the immediate assistant to the Secretary in his role as chief adviser to the President on problems of aging. Further coordination could be achieved through an interdepartmental committee, chaired permanently by the Secretary of HEW and staffed by the Assistant Secretary for Aging and his Office. In addition, there would be a combined citizens and public advisory committee—which could include Members of the Congress—to broaden and freshen the approach to programs and policies for improving the conditions of senior citizens.

5. The field of aging and its problems are so numerous and many-sided that no group—voluntary or public—will in any way be diminished by the creation of such an office. Experience in the field of education, mental health, welfare and health generally evidences that a public response to a felt need gives new impetus and support to voluntary organizations. The Office of Aging could in no way supplant voluntary activity but rather would be available for consultation, assistance, and stimulation.

6. The White House Conference on Aging did not approve any specific form of organization but did set forth the following elements:

- (a) A statutory basis and more independent leadership;
- (b) Adequate funds for coordination and other assigned functions through a "line item" appropriation;
- (c) Responsibility for formulation of legislative proposals for submittal to Congress; and
- (d) Responsibility for periodic reviews of and reports on the various programs, departments, and agencies working in behalf of older people to achieve their effective coordination and operation.

A DECADE OF CONGRESSIONAL CONSIDERATION

Since 1950, there have been at least 53 bills introduced in the Congress either to establish an agency on aging within the Department of Health, Education, and Welfare, or to create a U.S. Commission on Aging. Interest in these proposals has mounted in the last several years and action on the matter may be on the immediate horizon. (A list of such bills prepared by the Legislative Reference Service of the Library of Congress is presented at the end of this chapter.)

Hearings were held on a "Bureau of Older Persons" in the spring of 1958 by a subcommittee of the House Education and Labor Committee. A number of House Members have actively promoted such a proposal since that time.

In the past 2 years hearings by this subcommittee dealing with problems of the aged and aging resulted in testimony from a number of witnesses recommending an office of aging. The data collected by the subcommittee, its special studies, the testimony of hundreds of older citizens, as well as that of national experts and local administrators, and the personal visits of the members of the subcommittee to the homes of older persons pointed to the need for a systematic national attack on the problems of the elderly.

Introducing a bill to provide for an Office of Aging, Congressman Thomas J. Lane, Democrat, of Massachusetts, stated that a "step-by-step improvisation" approach to the problems of the aged and aging—

* * * has resulted in too much overlapping and duplication that has obscured other problem areas where the aging need our advice and help. A single office to serve as a clearing-house for information, for research and training programs, and to provide clear leadership and direction, will coordinate Federal, State, and community action in behalf of a comprehensive yet unified approach to the whole problem (Congressional Record, Aug. 24, 1960, p. 16287).

In a recent communication with the subcommittee, Dr. Margaret S. Gordon, associate director, Institute of Industrial Relations, of the University of California (Berkeley) wrote:

I should like to see a special Office on Aging established within the U.S. Department of Health, Education, and Welfare which would have as one of its functions the stimulation of research on all aspects of aging. Such an office could work with the various Government agencies that have concern with the aging problem to stimulate research in areas that are currently being neglected or that need greater emphasis. The actual research grants might be awarded in some cases through the National Institutes of Health and in other cases through Social Security Administration, the Bureau of Employment Security, or other appropriate agencies (letter, Aug. 12, 1960).

The White House Conference on Aging climaxed 2 years of intensive participation at 77 statewide meetings by more than 30,000 people. Recommendations were suggested by hundreds of local conferences, by Governors' Conferences in each State, by State com-

missions and finally by the delegates to the White House Conference itself. There is a vast legacy of thought and recommendations which need to be systematized, assigned priorities, and selections made for executive and legislative action at the local, State, and Federal levels.

The subcommittee feels that this dramatic effort will be wasted if it does not culminate in establishing a U.S. Office of Aging to follow up these studies and recommendations. The achievements to date should not be relegated to the category of having been just "one more conference."

RECOMMENDATIONS

The subcommittee recommends that the Congress enact in 1961 authority to establish a U.S. Office of Aging within the Department of Health, Education, and Welfare. At the same time the top-level post of Assistant Secretary for Aging should be created to make clear the importance and magnitude of the work to be done. The duties of the Office should include (a) a clearinghouse of information related to problems of the aged and aging; (b) assist the Secretary in all matters pertaining to the aging; (c) administer grants provided by the act; (d) conduct research and demonstration programs in the field of aging; (e) provide technical assistance and consultation to States and localities; (f) prepare and publish educational materials dealing with welfare of older persons; and (g) gather statistics in the field of aging.

The Office of Aging should administer a program of grants for (a) planning assistance to each State to conduct studies, develop plans for new programs, and improve and coordinate existing programs; (b) project grants to the States to initiate and operate demonstration programs to further the implementing of the declaration of objectives for senior Americans; and (c) assistance to nonprofit institutions and organizations to conduct research and training programs in the field.

Planning and project grants, as demonstrated by the Hill-Burton Act and other such grant programs, have proved most effective in achieving efficient, cooperative relationships for joint Federal-State programs in many important areas.

SUMMARY

The Federal Government is in need of a central agency which can act as a spokesman for the aged, which can give focus and full-time attention to the problems of the aged and aging. It can bring technical and financial resources to bear on this problem so that the Federal Government will be equipped to meet today's problems today.

The experience in the States supports the idea that unless there is an agency legislatively authorized and which is built into the structure and fabric of the Government, then relatively little is accomplished.

The Congress has considered this matter for more than 10 years and has had over 50 bills presented on this subject alone. Hearings have been held and it has been discussed by citizen groups throughout the country, in State conferences on aging and at the White House Conference on Aging.

The Federal Government is ready for and requires a high-level agency created and backed by Congress to serve as an eloquent spokesman for senior citizens everywhere. After years of conferences, reports, bills, and studies, it is now certain that unless a specific agency is created with power and responsibility to seek action, very little will be done. "These problems, which have been buffeted about from agency to agency in a fragmented fashion for the past decade, are not going to diminish or oblige those who would rather talk than act. They are with us now and will be on an ever-increasing basis.

The purpose of this proposal to establish an Office of Aging was expressed by Senator McNamara on the floor of the Senate as follows:

The golden age ought to be the opportunity to reach one's outer limits. The latter half of life ought to be a time when we are freed of fetters and have the chance to soar to whatever heights we are capable of reaching.

What I propose today is a means to help all of us grasp that chance when it comes.

REFERENCES TO BILL AND PUBLISHED COMMITTEE HEARINGS RELATIVE TO ESTABLISHING A BUREAU OF OLDER PERSONS AND A COMMISSION ON THE AGING AND AGED, 1950-60

81st Congress 2d Session, 1950

House Resolution 473: Creating a select committee to conduct an investigation and study of the problems of the aging. Mrs. Douglas.

82d Congress, 1951-52

No bills were introduced.

83d Congress

Bills introduced in the House of Representatives:

H.R. 9861: To establish a Commission on Programs for the Aging. Mr. Coudert.

No printed hearings.

S. 3731: To establish a Commission on Programs for the Aging. Mr. Ives.

No printed hearings.

84th Congress

Bills introduced in the House of Representatives:

H.R. 3254: For the establishment of the U.S. Commission on the Aging and Aged. Mr. Laird.

H.R. 3307: For the establishment of the U.S. Commission on the Aging and Aged. Mr. Derounian.

H.R. 3382: For the establishment of the U.S. Commission on the Aging and Aged. Mr. Allen of California.

H.R. 3704: For the establishment of the U.S. Commission on the Aging and Aged. Mr. Sikes.

H.R. 5095: For the establishment of the U.S. Commission on the Aging and Aged. Mr. Hosmer.

H.R. 6044: For the establishment of the U.S. Commission on the Aging and Aged. Mr. Corbett.

- H.R. 7499: For the establishment of a Commission on the Aging.
Mr. Ostertag.
- H.R. 8941: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare; to authorize Federal grants to assist in the development and operation of studies and projects to help older persons. Mrs. Green of Oregon.
- H.R. 9092: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare.
Mr. Reuss.
- H.R. 9168: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare.
Mr. Ashley.
- H.R. 11577: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare.
Mr. Magnuson.
- H.R. 11638: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare.
Mr. Rhodes of Pennsylvania.
- H.R. 11794: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare.
Mr. Thompson of New Jersey.

No printed hearings.

Bills introduced in the Senate:

- S. 658: To establish a Commission on Programs for the Aging.
Mr. Ives.
- S. 693: For the establishment of the U.S. Commission on the Aging and Aged. Mr. Potter, Mr. Allott, Mr. Barrett, Mr. Beall, Mr. Bricker, Mr. Bender, Mr. Bush, Mr. Bridges, Mr. Capehart, Mr. Carlson, Mr. Cotton, Mr. Case of New Jersey, Mr. Case of South Dakota, Mr. Chavez, Mr. Duff, Mr. Douglas, Mr. Dirksen, Mr. Ervin, Mr. Eastland, Mr. Flanders, Mr. Goldwater, Mr. Green, Mr. Hruska, Mr. Hickenlooper, Mr. Humphrey, Mr. Ives, Mr. Jackson, Mr. Johnston of South Carolina, Mr. Kuchel, Mr. Kennedy, Mr. Kilgore, Mr. Langer, Mr. Lehman, Mr. Mundt, Mr. Martin of Pennsylvania, Mr. Malone, Mr. Mansfield, Mr. Magnuson, Mr. Murray, Mr. Neuberger, Mr. Payne, Mr. Purtell, Mr. Pastore, Mr. Saltonstall, Mrs. Smith of Maine, Mr. Schoeppel, Mr. Smathers, Mr. Sparkman, Mr. Scott, Mr. Thye, Mr. Thurmond, Mr. Walker, Mr. Wiley, Mr. Watkins, and Mr. Young.
- S. 3932: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare.
Mr. Magnuson.

No printed hearings.

85th Congress

Bills introduced in the House of Representatives:

- H.R. 373: For the establishment of a Commission on the Aging.
Mr. Ostertag.
- H.R. 383: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare; to authorize Federal grants to assist in the development and operation of studies and projects to help older persons. Mr. Rhodes of Pennsylvania.

- H.R. 495: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare; to authorize Federal grants to assist in the development and operation of studies and projects to help older persons. Mr. Yates.
- H.R. 562: To establish in the Department of Health, Education, and Welfare an Office for Senior Citizens. Mr. Bennett of Florida.
- H.R. 649: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare. Mrs. Green of Oregon.
- H.R. 3120: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare. Mr. Wier.
- H.R. 3408: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare. Mr. Reuss.
- H.R. 3415: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare. Mr. Thompson of New Jersey.
- H.R. 4398: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare. Mr. King.
- H.R. 4486: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare. Mr. Addonizio.
- H.R. 5249: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare. Mr. Teller.
- H.R. 5654: For the establishment of the U.S. Commission on the Aging and Aged. Mr. Corbett.
- H.R. 5932: For the establishment of the U.S. Commission on the Aging and Aged. Mr. Fulton.
- H.R. 6976: To provide for the establishment of the Bureau of Senior Citizens within the Department of Health, Education, and Welfare; to provide for an Assistant Secretary to the Department of Health, Education, and Welfare to direct said bureau; to authorize Federal funds to conduct and encourage research and studies in the fields of gerontology, geriatrics, and allied problems of senior citizens. Mr. Cramer.
- H.R. 11057: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare. Mr. Zablocki.
- H.R. 11271: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare. Mr. Ullman.
- H.R. 11659: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare. Mr. Dellay.
- H.R. 12051: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare. Mr. Libonati.

Hearings:

House Committee on Education and Labor. Bureau of Older Persons (Aging and Aged). Hearings, 85th Congress, 2d session, on various bills to provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare, March 18, 19, 20; April 22, 23, 24, and 30, 1958.

Bills introduced in the Senate:

- S. 258: For the establishment of the U.S. Commission on the Aging and Aged. Mr. Potter.
- S. 1117: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare. Mr. Magnuson.
- S. 3700: For the establishing of the U.S. Commission on the Aging and Aged. Mr. Langer.
- No printed hearings.

86th Congress, 1959-60

Bills introduced in the House of Representatives:

- H.R. 314: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare. Mr. Addonizio.
- H.R. 490: To provide for the establishment of a Bureau of Senior Citizens within the Department of Health, Education, and Welfare. Mr. Cramer.
- H.R. 719: To establish in the Department of Health, Education, and Welfare an Office for Senior Citizens. Mr. Bennett of Florida.
- H.R. 983: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare. Mr. Yates.
- H.R. 994: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare. Mr. Zablocki.
- H.R. 1195: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare. Mr. Wier.
- H.R. 2888: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare. Mr. Libonati.
- H.R. 3080: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare. Mr. Teller.
- H.R. 13147: To establish the U.S. Office of Aging in the Department of Health, Education, and Welfare; to authorize Federal grants, establish an advisory committee on the aged and aging; to create an interdepartmental committee on aging; a "Declaration of Objectives for Senior Americans" appears as title I of the bill.

No printed hearings.

Bills introduced in the Senate:

- S. 256: To provide for the establishment of the Bureau of Older Persons within the Department of Health, Education, and Welfare. Mr. Magnuson.
- S. 399: For the establishment of the U.S. Commission on the Aging and Aged. Mr. Langer.
- S. 3807: To establish the U.S. Office of Aging in the Department of Health, Education, and Welfare; to authorize Federal grants; establish an advisory committee on the aged and aging; to create an interdepartmental committee on aging; a "Declaration of Objectives for Senior Americans" appears as title I of the bill. Mr. McNamara.

Prepared by Legislative Reference Service, Library of Congress, June 8, 1960.

THE 1961 WHITE HOUSE CONFERENCE ON AGING—BASIC POLICY STATEMENTS AND RECOMMENDATIONS

(Committee print of the Special Committee on Aging, May 15, 1961)

SECTION 20. FEDERAL ORGANIZATIONS AND PROGRAMS

POLICY STATEMENT

Over the years, for one reason or another, the Federal Government has become deeply committed to various forms of aid to the individual citizen. In addition, there are many Federal activities that benefit the individual indirectly by strengthening his State and local governments by increasing the supply of trained people and by fostering research on the problems of the people. In the social welfare field, the Federal programs that benefit people directly and indirectly all have a common philosophy. The elements of that common philosophy are these:

1. A primary reliance on the individual's own efforts, with Federal aid encouraging and supplementing these individual efforts. Old-age and survivors and disability insurance (OASDI), for example, provides a foundation on which nearly all citizens can build their own security.

2. Encouragement of private enterprise and voluntary organizations. The Federal tax system, for example, encourages the provision of pensions and other benefits by employers and also encourages philanthropic support of voluntary organizations.

3. A partnership with local and State governments, within our Federal system. Both the public assistance and the unemployment compensation programs, for example, recognize the differences among States and therefore provide for State administration.

4. A preference for indirect rather than direct forms of Federal aid. For example, Government insurance of home loans is more typical than direct Federal loans, although these are also extended when necessary.

The commitment of the Federal Government in the field of aging is more recent than its commitment to aid individuals as workers, parents, or homeowners, etc. Increasingly, the Federal Government is being asked to aid individuals as senior citizens or retirees. We believe that the same philosophy that has successfully guided the Federal Government in its previous efforts that aid individuals should be followed in the case of the new programs designed to help older people.

RECOMMENDATIONS

In accordance with the philosophy stated above, we recommend the following necessary and appropriate Federal activities:

1. Congress should establish an Advisory Council on Health Care Benefits, broadly representative of all interested groups, to consider

the detailed questions that will be involved in adding health care benefits to OASDI and to report to Congress.

2. The existing Federal-State programs that are now providing health care benefits, research, and facilities for the elderly should be preserved and strengthened, since these programs are essential and must be continued and improved whether or not Congress decides to finance health care benefits for other segments of the elderly population through a contributory social insurance system.

3. Every governmental program of health care for the aged should embody a provision granting beneficiaries full freedom in choosing a physician, dentist, hospital, nursing home, dispenser of prescription medications, or other provider of health services.

4. It is the responsibility of the Federal Government, in the administration of the old-age, survivors and disability insurance system, to maintain its benefits at levels adequate to meet current human needs.

5. To foster more activities in behalf of the aging on a local and voluntary basis, the Federal Government should support small, short-term (2 years) experimental or demonstration action projects proposed by private, local, or State organizations to stimulate and initiate community services.

6. The old-age assistance titles of the Social Security Act should be amended to permit Federal matching of administrative costs of State personnel serving older people who are not applicants for or recipients of public assistance. This would enable many persons, with the aid of public social services, to eliminate their potential need for public assistance grants in the future.

7. Congressional appropriations for the Department of Labor should be increased to enable the Department to expand Federal-State programs of increasing employment opportunities for older people, gathering facts about the nature, extent and effects of age-discrimination in hiring offices and promoting public understanding and support of increased earning opportunities for older people.

8. The Federal Government should expand and refine its various statistical activities to provide more facts and figures on which local and State governments and private groups can base their programs benefiting older people.

9. The Internal Revenue Service and the tax committees of Congress should encourage contributions to and tax exemption of philanthropic, religious, and fraternal organizations, large and small, that serve older people, and, more specifically, nursing homes and homes for the aged.

10. The appropriate officials in the Department of Health, Education, and Welfare should recognize the importance of the problems of the elderly by channeling into this field more of the funds available for research in medical and social problems, training of specialized personnel and demonstration of new methods and techniques.

11. The Federal Government is urged to increase the funds available to provide for a greater number of nursing home beds.

12. Without expressing an opinion with respect to the present Federal Council on Aging or new governmental units that have been pro-

posed, it is recommended that the Federal coordinating agency in the field of aging should be given—

- (a) a statutory basis and more independent leadership;
- (b) adequate funds for coordination and other assigned functions through a "line item" appropriation;
- (c) responsibility for formulation of legislative proposals for submittal to Congress; and
- (d) responsibility for periodic reviews of and reports on the various Federal programs, departments, and agencies working in behalf of older people to achieve their effective coordination and operation.

13. In determining the ratio of State funds that must match Federal funds used to finance Federal-State programs in behalf of older people, the Federal Government has a responsibility to take into consideration the varying degrees of fiscal capacity or ability of the several States of the Unions as related to the program.

14. The Department of Health, Education, and Welfare should stimulate education for planning for the aged years so that our senior citizens may lead lives which are richer, more independent and satisfying.

Although the policy recommendations set forth above deal chiefly with the Federal Government, their achievement and effectiveness depends on more than Federal action alone. We have agreed that a working partnership between voluntary organizations, local and State governments and the Federal Government will yield the most significant and lasting benefits to older men and women. To make that partnership actually work, all the partners will have to do their part. We therefore call upon the States, local units of government, and private organizations of every description to work together to help make "Aging With a Future—Every Citizen's Concern."

A COMPILATION OF MATERIALS RELEVANT TO THE MESSAGE OF THE PRESIDENT OF THE UNITED STATES ON OUR NATION'S SENIOR CITIZENS

(Committee print of Special Committee on Aging, June 1963)

RECOMMENDATION VI. COMMUNITY ACTION

The heart of our program for the elderly must be opportunity for and actual service to our older citizens in their home communities. The loneliness or apathy which exists among many of our aged is heightened by the wall of inertia which often exists between them and their community.

We must remove this wall by planned, comprehensive action to stimulate or provide not only opportunities for employment and community services by our older citizens but the full range of the various facilities and services which aged individuals need for comfortable and meaningful life. I believe that in each State government specific responsibility should be clearly assigned for stimulating and coordinating programs on aging; and that every locality of 25,000 population or above should make similar provision, possibly in the form of a community health and welfare council with a strong section on aging.

The Federal Government can assume a significant leadership role in stimulating such actions. To do this, I recommend a 5-year program of assistance to State and local agencies and voluntary organizations for planning and developing services; for research, demonstrations, and training projects leading to new or improved programs to aid older people; and for construction, renovation, and equipment of public and nonprofit multipurpose activity and recreational centers for the elderly.

The assistance to be provided under this legislation will not duplicate other grant programs; indeed, it will make possible the more effective use of grants for such purposes as health, housing, and other services. Developing a comprehensive community plan will enable communities to discover where gaps exist, where unnecessary duplications lie, where health grants are most needed, and where sound social service or adult education or senior housing developments should be strengthened.

Among the demonstration projects which can be developed under this program would be the establishment of single, one-stop centralized information and referral offices, to avoid the need of an aged person seeking assistance from as many as a dozen agencies before finding the particular service or combination of services he needs—and the construction of multipurpose activity centers providing older people with educational experiences promoting health, literacy, and mental alertness, with information concerning available community services, and with an opportunity to volunteer for helping others in a variety of community programs.

This legislation is of real importance to our older citizens, and to the State and local agencies which can be strengthened by it. I strongly urge its enactment.

EXCERPTS FROM DEVELOPMENTS IN AGING, 1963 AND 1964

(Report of Special Committee on Aging of the U.S. Senate, Mar. 11, 1965)

MINORITY VIEWS OF MESSRS. DIRKSEN, CARLSON, PROUTY, ALLOTT,
MILLER, AND PEARSON

INDIVIDUAL RIGHTS VERSUS WELFARE APPROACH

During the period covered by this report there has been continuation of a trend, already too prevalent in some governmental quarters, which assumes that older people as a group should be the object of a public welfare approach subject to Government control.

Corollary to this has been vigorous rejection, in some quarters, of efforts designed to preserve the independence and individual responsibility of older people. Freedom to exercise these rights is essential if older people are to retain the personal dignity they desire and need.

In the continuing debate on Government's role in meeting problems encountered by older people, the basic questions are—

1. Shall governmental action aim at making older people increasingly dependent on Government? or

2. Shall Government offer help where necessary in a manner which recognizes and preserves as fully as possible the individual rights of older people as independent citizens?

We believe the latter course is mandatory in the best interests of the Nation and its older citizens.

* * * * *

RECENT ADMINISTRATIVE RECORD

How a philosophy alien to the desires of the people, and even contrary to the expressed purpose of the Congress, can influence administration of programs created to serve older people, is shown by review of the recent record of the Federal Government's executive branch. * * *

Administration attitudes are reflected in the decision, shortly after the end of the Eisenhower administration, by the Department of Health, Education, and Welfare to place its Special Staff on Aging and related activities under the Welfare Administration.

Prior to this change, the Special Staff on Aging had the status inherent in its being directly responsible to the Secretary of HEW, and through him, to the President's Council on Aging which President Eisenhower created to give Cabinet-level status to older people's problems and needs.

Despite repeated urging by Members of Congress in both parties, the administration has insisted in retaining aging activities within the Welfare Administration of HEW. * * *

REPORT ON THE "OLDER AMERICANS ACT OF 1965"

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE,
April 8, 1965.

HON. LISTER HILL,
*Chairman, Committee on Labor and Public Welfare,
U.S. Senate, Washington, D.C.*

DEAR MR. CHAIRMAN: This is in response to your request of April 1, 1965, for a report on H.R. 3708, "Older Americans Act of 1965," as passed by the House of Representatives.

This bill authorizes appropriations for grants to the States for community planning and coordination, demonstration programs, and training of special personnel for work with older persons. It further authorizes appropriations for grants to public or nonprofit, private agencies, organizations, and institutions for study, development, demonstration, and evaluation projects relating to the needs of older persons and for the specialized training of individuals in carrying out such projects. It also establishes a new administrative unit in the Department of Health, Education, and Welfare under the direction of a Commissioner of Aging to be appointed by the President with the consent of the Senate.

On September 17, 1963, I appeared before the House Select Subcommittee on Education to testify on H.R. 7957, a bill in the 88th Congress almost identical to H.R. 3708. At that time I endorsed wholeheartedly the provision for grants, including those for community planning, services, training, and research. I pointed out that they were in accordance with the recommendations of the President. I also discussed the need for providing opportunities for meaningful use of free time that comes with retirement and recommended that the subcommittee consider including in its bill additional grants for constructing, equipping, and operating multipurpose activity centers for older people. I also mentioned grant proposals to provide increased employment opportunities for older persons who are able and wish to continue to work.

We would therefore recommend passage of the grant titles of H.R. 3708. We would go even further and recommend grants for multipurpose activity centers and employment opportunities. We would prefer to have the responsibility for the administration of the titles of the bill vested in the Secretary of Health, Education, and Welfare and to leave him with administrative flexibility in its administration. We do not favor the amendments adopted on the floor of the House which would limit the Secretary's authority to make research and development projects and training projects.

We are advised by the Bureau of the Budget that there is no objection to the presentation of this report and that legislation to improve opportunities for older Americans would be in accord with the program of the President.

Sincerely,

ANTHONY J. CELEBREZZE, *Secretary.*

OLDER AMERICANS ACT OF 1965

MARCH 9, 1965.—Committed to the Committee of the Whole House on the State of the Union and ordered to be printed

Mr. POWELL, from the Committee on Education and Labor, submitted the following

REPORT

[To accompany H.R. 3708]

The Committee on Education and Labor, to whom was referred the bill (H.R. 3708) to provide assistance in the development of new or improved programs to help older persons through grants to the States for community planning and services and for training, through research, development, or training project grants, and to establish within the Department of Health, Education, and Welfare an operating agency to be designated as the "Administration on Aging," having considered the same, report favorably thereon without amendment and recommend that the bill do pass.

PURPOSE OF LEGISLATION

It is the purpose of H.R. 3708 to create an operating agency known as the Administration on Aging within the Department of Health, Education, and Welfare, under the direction of a Commissioner on Aging who will be appointed by the President and confirmed by the Senate.

This new agency will serve as a clearinghouse of information on problems of the aged and aging; will assist the Secretary in all matters pertaining to the aging; will administer grants provided by the act; will develop, conduct, and arrange for research and demonstration programs in the field of aging; will provide technical assistance and consultation to State and local governments; will prepare and publish educational materials dealing with welfare of older persons; will gather statistics in the field of aging; and will stimulate more effective use of existing resources and available services.

The bill authorizes \$5 million for the fiscal year ending June 30, 1966, \$8 million for the fiscal year ending June 30, 1967, and such sums

as the Congress may appropriate for the next 3 fiscal years in grants to the States for community planning and coordination, demonstration programs, and training of special personnel.

It further authorizes \$1.5 million for the fiscal year ending June 30, 1966, \$3 million for the fiscal year ending June 30, 1967, and such sums as the Congress may appropriate for the next 3 fiscal years in grants by the Department of Health, Education, and Welfare to public or nonprofit private agencies, organizations, and institutions, for study, development, demonstration, and evaluation projects relating to the needs of older persons, and for the specialized training of individuals in carrying out such projects.

The bill provides for the establishment of a 16-member Advisory Committee on Older Americans with the Commissioner on Aging as Chairman.

BACKGROUND

Concern arising from the dramatic increase in the "over 65" population in the United States has led, in the past decade, to the development of many local, State, and Federal programs designed to ease the sociological, psychological, and economic problems created by a growing nonproductive retired population. Almost every branch of government is concerned with these problems, since they involve health, employment, recreation, education, income maintenance, and housing; in fact, the entire range of social, cultural, and economic activities. They involve many complex interrelationships between Federal and local governmental agencies; between governmental agencies and voluntary social, education, welfare, and health agencies; and between Federal agencies themselves.

Since 1900, the population of persons over 65 has grown from 3 million to nearly 18 million. The lifespan has increased from 60.5 years in 1947 to 70.5 years today. At the present time 9.2 percent of the total population is over 65. Future estimates vary. Conservatively, it is believed that as many as one out of every eight persons will, by 1975, be over 65.

In 1958, Representative John H. Fogarty, concerned about "what are we doing about the problems of the aging?" introduced a bill known as the White House Conference on Aging Act which became law in August of that year. The purpose of that bill was to convene a national forum of the most knowledgeable people in the field of aging to distill their combined experience into a "blueprint for action in aging."

Funds were made available to every State for studies, surveys, and conferences, and as a result of this preliminary work the White House Conference on Aging convened during the Week of January 8, 1961, and brought together governmental personnel, education laymen and volunteer workers, and others interested in the aging, together with older persons themselves, so that problems could be explored, existing programs evaluated, and a workable plan for action developed. The Conference made 20 specific recommendations dealing with a wide range of subject matters. The section of their report, "Federal Organizations and Programs," which is most pertinent to this legisla-

tion, recommended that a Federal coordinating agency should be established, as follows:

(a) The agency should have a statutory basis and more independent leadership.

(b) Adequate funds for coordination and other assigned functions should be furnished through a "line item" appropriation.

(c) It should have responsibility for formulation of legislative proposals.

(d) It should have responsibility for periodic reviews of and reports on the programs in behalf of older persons to achieve more effective coordination and operation.

As a followup to this Conference, there was established in May of 1962, by Executive order, the President's Council on Aging. The Council was charged with the task of reporting annually to the President and of making available information of interest to private and public organizations which are concerned primarily with the problems of the aging.

In transmitting its first report in May 1963, the Council called attention to the situation of some 18 million Americans who collectively share the problems of "the older American."

The figure "18 million" is of special significance when one realizes that included in this group are—

2 ex-Presidents;

nearly 10 percent of the Nation's population;

over 2.3 million war veterans;

nearly 1½ million people living on farms; and

more than 3 million people who migrated from Europe to the United States.

There are many among this vast segment of our citizens who have contributed significantly to the position we now enjoy in the family of nations.

And, yet, we learn from the work of private and public agencies that the older American, who has given so much of himself in the development of this great country, may not be sharing proportionately in the very greatness he has passed on to us.

On February 21, 1963, President Kennedy became the first President ever to send to the Congress a special message relating to our elderly citizens. In his message the President said:

The basic statistics in income, housing, and health are both revealing and disturbing:

The average annual income received by aged couples is half that of the younger two-person families. Almost half of those over 65 living alone receive \$1,000 or less a year, and three-fourths receive less than \$2,000 a year. About half the spending units headed by persons over 65 have liquid assets of less than \$1,000. Two-fifths have a total net worth, including their home, of less than \$5,000. The main source of income for the great majority of those above 65 is one or more public benefit programs. Seven out of ten—12.5 million persons—now receive social security insurance payments, averaging about \$76 a month for a retired worker, \$66 for a widow, and \$129 for an aged

worker and wife. One of the eight—2¼ million people—are on public assistance, averaging about \$60 per month per person, supplemented by medical care payments averaging about \$15 a month.

A far greater proportion of senior citizens live in inferior housing than is true of the houses occupied by younger citizens. According to the 1960 census, one-fourth of those aged 60 and over did not have households of their own, but lived in the houses of relatives, in lodging houses, or in institutions. Of the remainder, over 30 percent lived in substandard housing which lacked a private bath, toilet, or running hot water or was otherwise dilapidated or deficient, and many others lived in housing unsuitable or unsafe for elderly people.

For roughly four-fifths of those older citizens not living on the farm, housing is a major expense, taking more than one-third of their income. About two-thirds of all those 65 and over own their own homes—but, while such homes are generally free from mortgage, their value is generally less than \$10,000.

Our senior citizens are sick more frequently and for more prolonged periods than the rest of the population. Of every 100 persons aged 65 or over, 80 suffer some kind of chronic ailment—28 have heart disease or high blood pressure, 27 have arthritis or rheumatism, 10 have impaired vision, and 17 have hearing impairments. Sixteen are hospitalized one or more times annually. They require three times as many days of hospital care every year as persons under the age of 65. Yet only half of those 65 and over have any kind of health insurance; only one-third of those with incomes under \$2,000 a year have such insurance; and it has been estimated that 10 to 15 percent of the health costs of older people are reimbursed by insurance.

These and other sobering statistics make us realize that our remarkable scientific achievements prolonging the life-span have not yet been translated into effective human achievements. Our urbanized and industrialized way of life has destroyed the useful and satisfying roles which the aged played in the rural and small town family society of an earlier era. The skills and talents of our older people are now all too often discarded.

A detailed description of some of the principal problems to which this legislation addresses itself is shown in appendix A.

RECOMMENDATIONS

Based on findings of the White House Conference on Aging and other related studies, the President in his special message to the Congress on elderly citizens, February 1963, made the following recommendations:

The heart of our program for the elderly must be opportunity for and actual service to our elder citizens in the home communities. The loneliness or apathy which exists among

many of our aged is heightened by the wall of inertia which often exists between them and their community.

We must remove this wall by planned, comprehensive action to stimulate or provide not only opportunities for employment and community service by our elder citizens but the full range of the various facilities and services which aged individuals need for comfortable and meaningful life. * * *

The Federal Government can assume a significant leadership role in stimulating such actions. To do this, I recommend a 5-year program of assistance to State and local voluntary organizations for planning and developing services; for research, demonstration, and training projects leading to new or improved programs to aid older people; and for construction, renovation, and equipment of public and non-profit multipurpose activity and recreational centers for the elderly.

A detailed list of the President's recommendations which are pertinent to this legislation follows:

COMMUNITY PLANNING FOR SERVICES FOR AGED

1. Provide Federal grants to States to establish and expand services for the elderly.
2. Provide Federal grants to public and private nonprofit organizations for research and demonstration projects leading to new programs for the elderly.
3. Provide Federal grants to public and private nonprofit organizations for construction, renovation, and equipment of multipurpose activity centers for the elderly.
4. Provide Federal assistance to assure that communities provide health and social services needed by residents of group residential facilities.

EMPLOYMENT

5. Direct Federal agencies to make employment opportunities available on the basis of ability, not age.
6. Increase funds for Federal-State employment service to strengthen its counseling and placement services for older workers.
7. Provide Federal grants to public and nonprofit private organizations for demonstration projects to stimulate expanded employment opportunities for older people.
8. Direct the President's Council on Aging to reappraise problems of employment opportunities for the elderly.

CONSUMER INFORMATION

9. Expand information services to consumers regarding food and drugs.

EDUCATION

10. Encourage Federal-State programs of general university extension for older people seeking advanced education.
11. Enable States to establish programs of basic education for older adults.
12. Increase library services program.

NEED FOR THE LEGISLATION

The need for this legislation is supported by the careful analysis of the findings of several committees of both Houses of Congress—committees which, incidentally, have developed, assembled, and published what is undoubtedly the largest and most authoritative body of information on older citizens of this Nation.

The Federal programs affecting older persons cut across the responsibilities of many departments and agencies, yet at the present time these programs are without a central core of direction and coordination. The programs are now being administered by the Office of Aging, under the jurisdiction of the Commission of Welfare in the Department of Health, Education, and Welfare.

The General Subcommittee on Education report on the "Problems of the Aging," dated October 1962, stated:

* * * it was readily apparent, from the initial field hearing in Sacramento, Calif., through our final hearing in Washington, that there exists confusion and frustration in this field. The need for coordination at the Federal level as well as at the State level is acute. The need for dynamic leadership was quite apparent.

The report of the Senate Special Committee on Aging, "Developments in Aging," Report No. 8, dated February 11, 1963, expressed its views on the need for effective organization of Federal programs in aging as follows:

* * * The measures taken with respect to coordinating, highlighting, and giving drive to a multiplicity of Federal programs in aging, have been sporadic, spasmodic, piecemeal, hesitant, and futile.

* * * Responsibility for developing programs to serve the needs of older persons is, of course, a shared responsibility. It involves the Federal Government, the States and their communities, and voluntary agencies and organizations at all levels. This partnership of governmental and voluntary agencies is in accord with our time-tested American tradition; it best takes advantage of the essential contribution the individual himself must make in creating a secure, healthful, and meaningful climate for the later years.

* * * The opportunity to share in this responsibility has caught the imagination of many of the States and scores of communities and organizations over the past decade. The variety of approaches and programs developed is almost infinite, reflecting the many-faceted nature of older people and the older population, the needs perceived by sponsoring agencies, and the knowledge and resources available to them. While these developments have come rapidly and while they reach across the entire country, they are nevertheless spotty, often inadequately conceived, and generally undernourished.

* * * Our committee's recent field hearings provided ample evidence of the desire of the States and communities to carry out their vital roles in this partnership. Effective performance of their roles, however, is dependent on effective performance of those functions which are the responsibility of

the Federal partner. And our hearings made it clear that we lack anything even approaching effective performance on the part of the Federal partner.

This legislation constitutes a double-barreled answer to these problems.

First, it would establish a high-level agency—an Administration on Aging—that would devote its full attention to the developments of solutions to their social and economic problems. This agency would function not only as a sympathetic and respectful ear and voice for the elderly, but would function positively in terms of serving as a clearinghouse of information on the problems of the aged and aging; assisting and advising the Secretary on the manifold matters affecting the elderly; administering the grants provided by the act; developing, conducting, and arranging for research and demonstration programs in the field of aging; providing technical assistance and consultation to State and local governments and private organizations; preparing and publishing educational materials dealing with the problems and potentials of older persons; gathering statistics in the field of aging; and stimulating more effective use of existing resources and available services.

Second, the bill authorizes funds for a 5-year period for programs designed to promote the well-being of our older citizens. The major portion of this appropriation would be authorized for grants to the States for community planning, demonstration projects, training of personnel, and related programs. A smaller percentage of the appropriation would be used for grants to public or nonprofit private agencies, organizations, or institutions for research, training, and demonstration projects in the field of aging.

The establishment of an Administration on Aging will not automatically solve the problems of our older people. But, establishment of such an organization, providing it with the personnel, funds, and the authority necessary to give full attention to those problems, will be a major advance in devising the means of dealing with them.

The Administration on Aging, headed by a Commissioner appointed by the President, subject to confirmation by the Senate, would have coequal status with the Social Security and Welfare Administrations. Thus, the older population would be meaningfully represented in the upper echelons of the Federal Government.

The proposed Administration on Aging would establish a specific high-level agency with power and responsibility to take action. It would have full-time responsibility, backed by professional knowledge and ability, and the strong desire to represent effectively in the Federal Government our 18 million older Americans.

TESTIMONY ON FEDERAL ORGANIZATIONS FOR AGING

Testimony relating to an aged and aging bill was first heard by the General Subcommittee on Education, chaired by Representative Cleveland M. Bailey, in the 87th Congress, 2d session. The subcommittee at that time heard testimony on H.R. 10014, a bill introduced by Representative Fogarty and almost identical to the present bill, H.R. 3708. The following year, the Select Subcommittee on Education, chaired by Representative John H. Dent, held a series of hearings on H.R. 7957 (later modified and reintroduced as H.R.

10088), the Fogarty bill, September 17, 18, and 19, 1961. At these hearings it became clear—particularly after testimony by Secretary Anthony J. Celebrezze of Health, Education, and Welfare, and Congressman John E. Fogarty—that the major point at issue was whether we need to create an operating agency within the Department of Health, Education, and Welfare, headed by a Commissioner appointed by the President and confirmed by the Senate, or whether the continued vesting of authority in Health, Education, and Welfare, under the Commissioner of Welfare as an Office of Aging, would prove adequate.

During these hearings, 17 witnesses placed themselves on record as being in favor of creating a new operating agency in Health, Education, and Welfare to be known as Administration on Aging. It is significant that 17 of the 18 witnesses who testified favored this proposal.

Selected letters in support of this legislation, received from State agencies charged with administration programs for the aging, are shown in appendix B.

EXPERT WITNESSES

It is interesting to note the background and affiliation of witnesses who favored this legislation. They came from local, State, and national organizations on aging. They included representatives of unions, voluntary and professional organizations, and religious organizations. Most impressive in establishing the expert qualifications of these witnesses were these facts: The witnesses included executives of State commissions or agencies on aging, former Federal executives, the executive directors of three associations of retired persons (National Retired Teachers Association, American Association of Retired Persons, and the Association of Retired Persons, International), representing a paid membership of more than 700,000 individuals; the executive director of the Committee on Older and Retired Workers of the United Steelworkers of America; chairman of the Division of Gerontology; Institute for Human Adjustment, University of Michigan, and member of the Michigan Commission on Aging; the acting president of the National Council of Senior Citizens; secretary of the National Conference of Catholic Charities; coordinator of the United Auto Workers older and retired workers programs; chairman of the Maryland Commission on the Aging; provost of the University of Rhode Island; and many Members of Congress.

All agreed that an operating agency over and above those in existing departments was imperatively needed.

SUMMARY OF MAJOR PROVISIONS OF THE BILL

The bill provides for the creation of an operating agency known as the Administration on Aging within the Department of Health, Education, and Welfare, under the direction of a Commissioner on Aging. The bill authorizes to be appropriated \$5 million for the fiscal year ending June 30, 1966, and \$8 million for the fiscal year ending June 30, 1967, and for the fiscal year ending June 30, 1968, and each of the 2 succeeding years, such sums may be appropriated as the Congress may hereafter authorize by law for community

planning and coordination, demonstration programs, and training of special personnel.

It further authorizes \$1.5 million for the fiscal year ending June 30, 1966, and \$3 million for the fiscal year ending June 30, 1967, and for the fiscal year ending June 30, 1968, and each of the 2 succeeding years, such sums may be appropriated as the Congress may hereafter authorize for grants by the Department of Health, Education, and Welfare to public or nonprofit private agencies, organizations, and institutions for study, development, demonstration, and evaluation projects relating to the needs of older persons.

The bill provides for the establishment of a 16-member advisory committee with the Commissioner on Aging serving as Chairman.

COMMITTEE ACTION

As a result of the favorable findings by the Select Subcommittee on Education, both the subcommittee and the full Committee on Education and Labor gave this legislation overwhelming bipartisan approval.

SECTION-BY-SECTION ANALYSIS OF THE BILL

Section 1. Short title

This section provides that the act may be cited as the "Older Americans Act of 1965."

TITLE I—DECLARATION OF OBJECTIVES: DEFINITIONS

Section 101. Declaration of objectives for older Americans

This section contains a congressional finding and declaration that the older people of the Nation are entitled to, and it is the responsibility of the governments at all levels to enable our older people to secure, equal opportunity to the full and free enjoyment of objectives in the following areas:

- (1) Adequate income in retirement.
- (2) Best possible physical and mental health.
- (3) Suitable housing.
- (4) Restorative service.
- (5) Opportunities for employment without discrimination on account of age.
- (6) Retirement.
- (7) Meaningful activity.
- (8) Efficient community services.
- (9) Benefits of research knowledge.
- (10) Freedom, independence, and the free exercise of individual initiative in planning and managing their own lives.

Section 102. Definitions

This section contains the definitions of several terms as used in the bill. "Secretary" will mean the Secretary of Health, Education, and Welfare. "Commissioner" will mean the Commissioner of the new Administration on Aging. The term "State" will include the District of Columbia, the Virgin Islands, Puerto Rico, Guam, and American Samoa. The term "nonprofit institution or organization" will mean one which is owned and operated by one or more corporations or

associations no part of whose net earnings inures to the benefit of any private person.

TITLE II—ADMINISTRATION ON AGING

Section 201. Establishment of Administration

This section establishes an Administration on Aging within the Department of HEW. It provides that the new Administration will be under the direction of a Commissioner on Aging who will be appointed by the President, by and with the consent of the Senate.

Section 202. Functions of the office

This section describes the duties and functions of the Administration. The Administration will serve as a clearinghouse for information related to the problems of the aged and aging; assist the Secretary in matters pertaining to the problems of the aged and aging; administer the grants provided under the act; provide for research and demonstration programs in the field of aging; give technical assistance and consultation to States and their political subdivisions with respect to programs for the aged and aging; prepare, publish, and disseminate educational materials dealing with the welfare of older persons; gather statistics in the field of aging; and, finally, stimulate more effective use of existing resources and available services for the aged and aging.

TITLE III—GRANTS FOR COMMUNITY PLANNING, SERVICES, AND TRAINING

Section 301. Authorization of appropriations

This section provides that the program of grants provided for by this title will be carried on for 5 fiscal years, beginning with the fiscal year ending June 30, 1966. The section authorizes \$5 million for the first fiscal year of the program and \$8 million for the second fiscal year. However, the bill provides that for the last 3 fiscal years of the program only such sums may be appropriated as the Congress may hereafter authorize by law.

The sums appropriated to carry out this title may be used by the Secretary to make grants to States for projects for the following purposes:

- (1) Community planning and coordination of programs for carrying on the purposes of this act.
- (2) Demonstration of programs or activities which are particularly valuable in carrying out such purposes.
- (3) Training of special personnel needed to carry out such programs and activities.
- (4) Establishment of new or expansion of existing programs to carry out such purposes, including the establishment of new or expansion of existing centers providing recreational and other leisure time activities, and information on health, welfare, counseling, and referral services for older persons and assisting such persons in providing volunteer community or civic services. No cost of construction, other than for minor alterations and repairs, may be included in the establishment or expansion referred to in this paragraph.

Section 302. Allotments

Subsection (a) of this section describes the manner in which sums appropriated for grants under this title will be allotted among the several States. These allotments will be made as follows: First, the Virgin Islands, Guam, and American Samoa will be allotted an amount equal to one-half of 1 percent of the sum appropriated, and each other State will be allotted an amount equal to 1 percent of such sum. Then the remainder of the sum appropriated will be allotted among the several States pro rata on the basis of the relative number of persons in each State who are 65 or over.

Under subsection (b), if a State notifies the Secretary that some of the funds allotted to it for a fiscal year will not be required for carrying out its State plan (if any), such funds will be available for reallocation from time to time to other States which need funds for carrying out their State plans in excess of those previously allotted to them, and will be able to use such excess amounts for projects approved by the State during the period for which the original allotment was available. These reallocations will be made on the basis of the State plans so approved, after taking into consideration the population age 65 and over. Any amount reallocated will be deemed part of the State's allotment under subsection (a).

Subsection (c) provides that the State's allotment for a fiscal year may be used for grants to pay part of the cost of projects described in section 301 and approved by the State prior to the end of the year (or prior to July 1, 1967, in the case of the first year's allotment). To the extent permitted by the State's allotment, the payments with respect to a project will be equal to 75 percent of the cost of the project for the first year of the duration of the project, 60 percent of such cost for the second year, and 50 percent of the cost of such project for the third year. However, at the request of the State such payment may be less than such percentages and grants may not be made under this title for any project for more than 3 years or for any period after June 30, 1972.

Section 303. State plans

This section prescribes the requirements which a State plan must meet for approval. These are the following:

(1) It must provide a single State agency to be the sole agency for administering or supervising the administration of the plan. This agency must be the one primarily responsible for coordination of the State's programs and activities related to the purposes of the act.

(2) It must provide for such financial participation by the State or communities within the State as the Secretary may by regulations prescribe in order to assure continuation of desirable activities and projects after termination of Federal financial support.

(3) It must provide for the development of programs and activities for carrying out the purposes of the act. These will include the furnishing of consultative, technical, or information services to public or nonprofit private agencies, and for coordinating the activities of such agencies and organizations to the extent feasible.

(4) It must provide for consultation with, and utilization of, the services and facilities of appropriate State or local public or nonprofit private agencies and organizations in the administration of the plan and the development of such programs and activities.

(5) It must provide for such methods of administration as are necessary or appropriate for the proper and efficient operation of the plan. These must include methods relating to the establishment and maintenance of personnel standards on a merit basis, but no authority is given the Secretary to exercise any authority with respect to the selection, tenure of office, and compensation of any individual.

(6) It must set forth principles for determining the relative priority of projects within the State.

(7) It must provide for approval of projects of only public or non-profit private agencies or organizations and for a hearing before the State agency for any applicant whose application is denied.

(8) It must provide that the State agency will make such reports to the Secretary as may reasonably be necessary to enable him to perform his functions under the title and for the keeping of the appropriate records.

The Secretary may not finally disapprove any State plan without first affording the State reasonable notice and opportunity for a hearing.

Subsection (b) provides that when the Secretary finds that a State plan has been so changed that no longer it complies with the requirements described in the preceding paragraph, or that in the administration of the plan there is a failure to comply substantially with any such requirement, he may, after appropriate notice and hearing, discontinue further payments to the State until he is satisfied that there will no longer be any failure to comply.

Subsection (c) provides that any State which is dissatisfied with the Commissioner's action in failing to approve a State plan or in withholding payments may obtain judicial review of his action in the U.S. court of appeals. Such review will be in conformity with the substantial evidence rule. The decision of the court of appeals will, in turn, be subject to review by the Supreme Court on certiorari.

Section 304. Costs of State plan administration

Ten percent of each State's allotment for a fiscal year (or \$15,000, whichever is larger) will be available for paying one-half of the costs of the State agency in administering its plan.

Section 305. Payments

Payments under the title will be made in advance or by way of reimbursement and in such installments as the Secretary may determine.

TITLE IV—RESEARCH AND DEVELOPMENT PROJECT

Section 401. Project grants

This section authorizes the Secretary to make grants or contracts for the following purposes:

(1) To study current patterns and conditions of living of older persons and identify factors which are beneficial or detrimental to the wholesome and meaningful living of such persons.

(2) To develop or demonstrate new approaches, techniques, and methods (including multipurpose activity centers) which hold promise of substantial contribution toward wholesome and meaningful living for older persons.

(3) To develop or demonstrate approaches, methods, or techniques for achieving or improving coordination of community services for older persons.

(4) To evaluate these approaches, techniques, and methods, as well as others, which may assist older persons to enjoy wholesome and meaningful living and to contribute to the strength and welfare of the Nation.

Grants under this section may be made to any public or nonprofit private agency, organization, or institution, and contracts may be entered into under this section with any of the foregoing, and also with individuals.

Section 402. Payments of grants

In carrying out this title the Secretary may, as he deems it appropriate, require the recipient to contribute money, facilities, or services for carrying out the project. Payments under this title may be made in advance or by way of reimbursement, and in installments and on such conditions as the Secretary may determine.

TITLE V—TRAINING PROJECTS

Section 501. Project grants

The section authorizes the Secretary to provide for the specialized training of persons employed or preparing for employment in carrying out programs related to the purposes of this act. This may be accomplished through grants or contracts with any public or nonprofit private agency, organization, or institution.

Section 502. Payments of grants

This section provides that the Secretary may, where appropriate, require the recipient of any grant or contract under the title to contribute money, facilities, or services for carrying out the project. Payments under this title may be made in advance or by way of reimbursement, and in such installments and on such conditions as the Secretary may determine.

TITLE VI—GENERAL

Section 601. Advisory committees

This section creates in the Department of Health, Education, and Welfare an Advisory Committee on Older Americans for the purpose of advising the Secretary of Health, Education, and Welfare on matters bearing on his responsibilities under this act and related activities of his Department. The Committee will be composed of the Commissioner, who will be Chairman, and 15 persons, not otherwise in the employ of the United States, appointed by the Secretary without regard to civil service laws. The appointive members must be persons who are experienced in or have demonstrated particular interest in the special problems of the aging.

The term of office of Committee members will be 3 years except that the terms of office of the members first appointed will be so adjusted that an equal number of new members will be appointed each year.

The Secretary is also authorized to appoint technical advisory committees for advising him in carrying out his functions under the act.

Members of the Advisory Committee or of any technical advisory committee will receive the usual per diem and travel and subsistence allowances.

Section 602. Administration

In carrying out the purposes of the act the Secretary may provide consultative services and technical assistance to public or nonprofit private agencies, organizations, and institutions; he may provide short-term training and technical instruction; he may conduct research and demonstrations; and he may collect, prepare, publish, and disseminate special educational or informational materials.

The Secretary is authorized to utilize the services and facilities of other Federal agencies and other public and nonprofit agencies in accordance with agreements with them.

Section 603. Authorization of appropriations

This section provides that the programs provided for in titles IV and V of the act will be carried out for the 5-year period beginning with the fiscal year 1966. For the fiscal year 1966, this section authorizes the appropriation of \$1,500,000, and for the fiscal year ending June 30, 1967, the appropriation of \$3 million. However, for the next 3 fiscal years of the program the Congress may hereafter authorize by law.

APPENDIXES

APPENDIX A

DETAILED DESCRIPTION OF THE PRINCIPAL PROBLEMS OF THE AGING HEALTH

Millions of older Americans enjoy relatively good health and many of them can be almost as active as they were when they were years younger. Many of those with disabilities have learned to live with them and accept their limitations.

But, most have become the prey of at least one disease that will stick with them as long as they live. It is part of the toll the years have taken. It is grim evidence that the causes and cures are still to be found for the diseases that come with age.

And it is dramatic proof of the health-care problem faced by older Americans who are caught between rising medical and hospital costs and their low, relatively fixed incomes.

Statistically, here is the health report of today's older Americans:

More than 12 million have at least one chronic condition such as high blood pressure, arthritis, diabetes, heart disease, or mental disorder.

More than half of those with a chronic ailment have some limitation on their activities.

More than 800,000 older people are in institutions.

About 1,250,000 elderly people are invalids who, though not in institutions, are unable to get along without help from others.

Tragically, many of those with serious conditions would be in better health if known preventive and restorative services had been promptly used. Until more is known about the causes and cures of chronic diseases, the most potent weapon against them is early detection and prompt treatment.

Part of the problem lies with the older people themselves. They delay going to a physician until it is too late. This is obvious from one of the studies of the national health survey which showed one out of four people 65 or over had not been to a physician for 2 years or more.

Sole responsibility, however, cannot be placed on the older people for this. They have not been made fully aware of the need for regular medical checkups, the dangers of self-doctoring, or the methods of accident prevention.

Many older Americans do not get the care they need, because they are too proud to accept charity or other outside financial help. And they do not want to be a burden on their families.

Many make the mistake of treating themselves when they really need to see a doctor. Others use medications which have worked on similar symptoms in neighbors or friends. They want to avoid the cost, or they may be afraid of treatment and hospitals.

Others are the victims of poor nutrition because they are caught by food fads, poor food habits, or lack of interest in eating, primarily because they have to eat alone.

Accidents—many of them preventable—also take a high toll among older people. They have nearly twice as many home accidents as the average adult and three times as many fatal accidents.

Part of the fault for the poor health of many of the aged also must be borne by physicians, communities, States, and the Federal Government, which have been slow in starting health programs for them.

A positive recent step was the passage of the Community Health Services and Facilities Act of 1961, designed to help States and communities start or expand comprehensive care services outside hospitals for the chronically ill.

But, for this generation as well as future generations of older Americans, much remains to be done both in detecting chronic diseases early and in finding their causes and cures.

A great deal of research is already underway. With the brilliant success of science during the 20th century in controlling infectious disease and in improving nutrition and sanitation, the main spotlight of research has now been trained on the diseases of the later years.

In the past 10 years, hundreds of millions have been spent by Federal, State, and local governments and by scores of voluntary agencies for research on diseases affecting older people.

Surgery, medicines, and medical care never dreamed of in 1900 are now in use. They have done much to ease the pain and sufferings of illness. And, they have helped to add 21 years to the average life expectancy at birth since 1900. But these marvels of science have also made the treatment of illness—both for the old and for the young—increasingly complex and costly.

EMPLOYMENT

Employment plays varying roles in the lives of older Americans. For many, it is a principal source of income to provide the necessities of life. For others, it provides the therapy of usefulness, belonging, and well-being. To many older people, employment is the badge of status in the family and the community and the center from which social contacts radiate. To some it is one of these things and to others it may be all of them.

Employment, thus, has different meanings for different older Americans, depending upon their individual needs and wants. It means full-time remunerative work for one; for another, a part-time job to supplement a pension income; for still another, voluntary work in his home community or even abroad in the Peace Corps. To others employment means a place to go every day—and the paycheck is a minor consideration.

As the needs and wants relating to employment differ among older Americans, so do the opportunities for satisfying those needs and desires. For the opportunities of obtaining or retaining employment are subject to many severe restrictions. A major restriction lies in the practices in our society. Many older persons are barred from work by age discrimination in hiring or in selection for retraining. Others are forced to quit work because of compulsory retirement policies.

A sample survey in 1956 of job orders placed in State employment service offices showed that 58 percent had an upper-age restriction. A new survey is now being conducted and hopefully will show some improvement. According to recent surveys of firms with pension plans, 9 out of 10 companies employing 1,000 or more workers have mandatory retirement policies, and there appears to be little or no inclination on the part of employers to discontinue these policies. In fact, available evidence points to an increasing number of employers who are establishing compulsory retirement at a fixed age—this in an era when the span of life is growing.

Opportunities for employment are limited also by the climate of the labor market. There is the increasing competition from mounting numbers of young jobseekers for whom new jobs cannot be created fast enough in an economy which has experienced an average annual unemployment rate of 5.5 percent for the past 5 years. Complicating the situation are new job requirements created by new technology, geographical movements of industry and the accompanying movements of jobs, and plant mergers.

Limitations in job opportunities arise also from the qualifications of the elderly person himself. They may include such factors, as declining health and physical ability on the part of some, limited skills or skills no longer in demand in the fast-changing labor market, lack of sufficient education for many of the new jobs, and waning ability to move about to seek work where it may be. Many an individual creates his own restriction by the limitation he puts on wages, hours, working conditions, and the location of work.

If the problem of employment of older Americans is to be dealt with adequately, we must understand not only their varying needs for employment but also the many obstacles and difficulties standing in their way. To make opportunities in employment available for elderly persons, we need to do two things. First, we need to identify those elderly persons who want to earn money and concentrate our job development efforts for this group. Second, we need to provide opportunities for other elderly Americans to satisfy their needs for useful activity through community, public service, and other kinds of noncompensatory activities.

Enlarging work opportunities for older people will require action on a number of fronts. It will involve—

- gaining acceptance of the principle of employment on the basis of ability rather than age;

- gaining an understanding on the part of employers of the qualifications of many older persons for available employment;

- providing opportunities for retaining older workers and upgrading their skills and providing more opportunities for vocational rehabilitation;

- encouraging the adoption of flexible retirement policies based on an individual's capabilities, needs, and desires, rather than his age;

- developing part-time employment opportunities for those who need or desire to work but who cannot or do not wish to work full time.

Steps also need to be taken to provide more adequate counseling, placement, job development, physical restoration, and other services to assist older people in choosing and retaining or reentering employ-

ment. Too often such services are denied the older worker on the erroneous premise that age alone makes such help fruitless. A more positive outlook is needed on the part of those serving older persons and on the part of the older persons themselves.

HOUSING

A suitable place to live—a house, an apartment, whatever it may be—is a necessity for the older American who wants to live a useful and independent life, just as it is for a younger person.

Housing for older people today is for active, self-reliant persons who are living longer, healthier, and more meaningful lives. It is designed for efficient, dignified living and avoids the needless struggle to maintain large homes.

But, an adequate home for an older person is often quite different from what would be adequate for a younger person. Older people today have smaller incomes, their health is usually poorer, and, of today's nearly 18 million people 65 or over, nearly one out of four lives alone.

It is important, therefore, that older people have access to housing which is adequate but low cost, is modest in size and efficient to maintain, and is so designed that it will help them avoid accidents.

It is also particularly important that their homes be close to public transportation, since many of them do not have cars; that it be close to adequate shopping facilities, so that normal activity is sustained; and that it be near recreational, church, cultural, and other community centers, so that they can be active in community life.

By these basic standards, much of today's housing for older people is far from adequate.

Of the people 65 or older who head households, about one-third live in dilapidated housing, deteriorated housing which may or may not have all plumbing facilities, or in housing that, though sound, lacks some or all plumbing facilities.

In addition, many older Americans live in housing units which are too large, too costly, or too inefficient or unsafe for the special needs which come with age.

A recent foundation-financed study of quality of housing of persons receiving social security payments showed that—

45 percent of all aged living in households were classified as being in need of better accommodations, based on the quality of the housing or the living arrangements with relatives;

80 percent were living in houses at least 30 years old, and 40 percent living in houses at least 51 years old; and

the aged in poorest health, by and large, occupied the poorest housing.

Despite the unpleasant view these facts conjure, the outlook for improvement is bright. For in no area of Federal housing programs has progress during the past 2 years been more dramatic than in housing for the elderly. The progress has been based on cooperation between private groups and governmental agencies with emphasis on local initiative and local action.

RETIREMENT PLANNING AND COUNSELING

The adjustments many older Americans face when they retire are as drastic as any they have ever faced in their lives.

Consider, for a moment, the adjustments an older person would need to make if—

his income was cut at least in half;
leisure time replaced the hours he worked;
the regulatory of his work no longer existed;
his association with coworkers ended; and
he no longer had his work to occupy his mind.

Many of today's older people have successfully made the adjustments associated with retirement. Many others have not.

Recognizing the difficulties in getting used to retirement, some of the Nation's employers, unions, and civic and government leaders have set up retirement planning and counseling programs in recent years.

The programs have generally had two purposes:

To tell the people nearing retirement about the adjustments they will have to make and to help change their attitudes about retirement; and

To give them factual information about social security, health, housing, social welfare, investments, recreation, civic activities, legal matters, community resources, and other matters with which they may have had no previous experience.

How extensive retirement planning and counseling are among employers and unions is difficult to measure. But it has been estimated that about one-third of the large employers have some type of program. Two of the Nation's biggest unions have a full-time staff working on such programs. Local school systems, recreation departments, and libraries have offered assistance.

Several of the Federal Government's agencies have retirement preparation programs and others are considering them.

The development of retirement preparation has been led by a dozen or so universities, which have been influential in getting employers and unions interested.

The results are hard to measure because the programs have been in operation only a short time and because they vary considerably in quality. But there is no doubt these efforts have been helpful in many cases and should be expanded.

In addition to these efforts to help older Americans with their retirement adjustments more and more communities are providing counseling services for them when they have retired.

Many older people need personalized counseling when they are confronted with such decisions as: what to do next; how to change their living arrangements; how to deal with upset family relationships. Some encounter deep emotional problems. Many need help in determining what to do about serious health problems. How to manage on shrunken income is a major problem in itself.

If such counseling is available, it is usually part of a general community service for persons of all ages. But in a few large cities special agencies have been set up for older people.

Unfortunately, this useful service often is not available. All too frequently, the money, personnel, and inspiration to establish it in communities, either within existing agencies or as a separate function, do not exist.

Employers, unions, community leaders, and others have an important role in helping people with their retirement adjustments and difficulties. A tiny beachhead has been won, but it needs to be greatly enlarged.

Most of all, those nearing retirement should be encouraged to look ahead and plan for the adjustments they will need to make.

EDUCATION

Education offers many opportunities for an adult to continue as part of the community. One of the less obvious but important values of preretirement education is the reminder to persons approaching full retirement that education for education's sake can be stimulating and enjoyable. Some older people welcome the chance to learn a new language, to be guided into greater appreciation of music or art, or to experience for the first time the joy of painting, modeling, orchestration, or discussion. Basic elementary education, when classes are offered in convenient neighborhood locations, is eagerly accepted by older adults who lacked educational opportunities when they were growing up.

Colleges and universities, community colleges, and public school adult education agencies in several States are offering courses especially designed to meet these increased needs. Many libraries have developed special services and programs for their older patrons.

For the majority of older Americans, the financial barriers to continuing education must be removed—or drastically lowered—if all who want to follow this road to a place in the community are to have the opportunity to do so.

CREATIVE ACTIVITY AND RECREATION

Retirement offers unlimited opportunities to enjoy old hobbies or to develop new ones. Retirement also means that people have time to learn and practice new skills in a wide range of arts and crafts, home repair, maintenance, and beautification—things that many people have wanted to do before but never had the time to do until they retired.

Travel, participation in organizations, and recreation also open up ways for older people to make new friends and meet new people. One of the demonstrated values of senior citizens centers is the chance they offer many older persons to find new interests after retirement. Many persons no longer feel at loose ends after being welcomed into an activity center. The companionship, acceptance, and interest of his peers are often all that an older person needs to renew his interests in life and the world around him.

For some, the extent of their participation is limited by fear of involvements that will make too many personal demands on their time or energies. They may go no further than thumbing through the available reading material or listening to a discussion or watching a movie. But gradually, the warmth of others' interests brings more response. A card game may be tried—or a simple responsibility accepted. Soon, a satisfying activity is found, and some degree of community participation follows. For many, the centers become the doorways to an active, outgoing role in their community, as a

volunteer there or elsewhere, as a participant in political activity, as a student, or an active church member.

There are now over 700 senior activity centers in the country offering opportunities in arts and crafts, education, and recreation. Similar opportunities are offered by approximately 3,000 clubs sponsored by welfare and recreation departments, local chapters of national voluntary organizations, religious groups, and labor organizations. While there has been a phenomenal increase in the number of such centers since the White House Conference on Aging in January 1961, many more are needed to provide bridges to community participation for the older Americans who have not yet discovered a way to adjust to their new-found leisure.

CARE OF THE AGING

One fact stands out as we grow older: the years force our body to pay a toll. We may be rich. We may be poor. We may have the best medical care. We may have none. We may carefully choose our diet. We may not.

But, the toll for each added year is inevitable, and the effect is at least a gradual decline in our ability to be active.

Medical science and the other sciences each year are discovering new ways to slow down the decline and new ways to rehabilitate us if we are incapacitated by sickness or injury. But scientific inquiry is a slow and painstaking process, and many of the secrets of life and health are still locked in the vault of time.

Thus, we see among our older Americans several million—mostly in their seventies, eighties, and nineties—whom the toll of years has made frail and disabled. They need special care and attention to be active at all or to regain lost strength and abilities. They need someone to care.

Out of their needs and the needs of other older people in the past, special kinds of health services and living arrangements have grown—nursing homes, homes for the aged, home health care, homemaker services, foster homes.

Unfortunately, the need for such services and home arrangements far exceeds the supply, and those available are often very inadequate or too expensive.

The result: Many disabled older Americans are in their own homes when they should be in homes for the aged, or in nursing homes, getting more care and medical attention. At the same time, some are in nursing homes or other institutions when they could be at home if help were available there. Others live with their families because help in their own homes is lacking.

But, with the growth in the number of older people and the realization that they have special needs, the situation is gradually improving.

This is mainly due to an increased interest in disabled older people on the part of States, communities, and private organizations.

The kinds of services and living arrangements for the dependent older person vary widely.

In some cities, a wide variety of service is available to the older person who is well enough to stay at home but too disabled to do such chores as cook, clean, or shop.

Examples of good services, excellent care, effective rehabilitation, coordination of programs and facilities could be cited. But for the most part, such services are spotty, fragmentary, not nearly adequate to the need.

Services in the home should include such aids as homemaker services, meals on wheels, shopping aid, visiting-nurse services, and counseling and other social services.

Homemaker services usually consist of sending a trained woman into private homes to help with shopping, cooking, and cleaning, perhaps to help the older person dress and get about the house, and to provide a friendly link with the outside world. The homemaker may be needed only a few hours several times a week, or she may come more regularly.

It is a flexible service and a beacon of hope to many aged people.

But there are homemaker services for the aged in only 40 States and in only 134 communities. Even where the service exists, the number of homemakers actually available is often very small.

The prospects of expanding these services, appear encouraging, through both voluntary organizations and public agencies. Starting on July 1, 1963, 75 percent of the costs of such programs can be provided by Federal funds in local public assistance programs. Also, funds for research and demonstration projects in this field are available to health and welfare agencies.

A homemaker program for older people in every community is now a reasonable goal, a justifiable hope.

"Meals on wheels" is the usual term given a variety of portable meal services by which warm meals are made available to older people in their own homes, usually once a day. But at the last count, only 25 of these programs were in effect.

This service is sometimes combined with shopping aid and homemaker service. The combination makes it possible to help both these who like to prepare their own meals and those who need to have them prepared.

Visiting-nurse services have been provided in most urban communities since 1900, but many more visiting nurses are needed. Their job is to check on the physical condition of the older person, to be sure his medicine prescription has not run out, or to provide any other care that might be needed and that they can professionally give.

In a few communities, coordinated home-care programs are offered in order to extend many hospital services directly into the home. Under such programs, the older person's needs are met primarily by his family, with the help of a team of professionals—nurse, doctor, social workers, nutritionist, and physical or occupational therapist. In 1960, however, only 33 such programs had been established in the United States.

Even broad home-care services do not assure everything a disabled older person might need. He may require a friendly visitor, or legal protection of one kind or another. If he is receiving public assistance or other financial aid, such help may be readily available, but, otherwise, he or his family may have difficulty in finding it.

Information and referral services are of great assistance to older persons and their families, but again complete services of this kind are offered by only a few communities. For the older person, more is frequently needed than the information and advice. He may

also need help in getting to the agency which can assist him, or he may need guidance in order to avail himself of the services set up for him.

Casework services, while a part of the total welfare program, are only beginning in many places to be extended to persons who are not currently receiving public assistance.

Recent changes in the social security law have broadened the possibility of these services reaching people whose needs are not complicated by lack of money for the basic necessities. But in far too many places today no casework or counseling services exist for other older people or those concerned with their care.

Even if adequate community services were available—which would permit many older Americans to remain in their homes long after their physical abilities had diminished—some would eventually need more supervision or more intensive care than can be brought into their homes.

The next step for some would be a special type of home, such as a boarding home, group-care residence, foster home, or home for the aged—or in many cases a nursing home.

HOMES FOR THE ILL OR DEPENDENT

Homes for the aged, foster homes, and other group residences today give hope that a much better situation will exist in the future than we have seen formerly—when all too often the home was institutional in character and provided little more than basic shelter and food to the residents. We see, today, experimental designs and imaginative architecture, and the development of programs of services that show much more regard to the very real needs of older people—to enable them to live with dignity and in comfort.

Church groups and fraternal orders have been leaders in pioneering new concepts and designs in varied types of housing for the elderly. The Federal Government has played an important role in the program of mortgage insurance for residential facilities, in working with local housing authorities to build public housing especially designed for the elderly, and in the direct loan program of the Community Facilities Administration to assist in construction for low-income residents.

In 1961, more than half a million older Americans lived in 23,000 nursing or other types of homes providing nursing or supportive services.

Many of these nursing homes, unfortunately, are unsatisfactory by any modern standard. Many are converted residences. Many are deteriorated and actually unsafe. The number of “acceptable” nursing home beds is far short of the need.

All States have licensing programs for nursing homes. Because of the shortage of well-designed, well-equipped, and well-staffed homes, however, the licensing standards often represent scarcely minimal requirements.

The Public Health Service defines the various kinds of homes serving the aging according to type of care provided:

Skilled nursing homes which provide skilled nursing care as their primary and predominant function. In 1961, there were 9,700 of this type with 338,700 patients.

Personal-care homes which primarily provide domiciliary personal-care functions but may also provide some skilled nursing care. In 1961, there were 11,100 with 207,100 residents.

Residential-care homes which have primarily residential or sheltered-care functions but which also provide some skilled nursing care. In 1961, there were 2,200 with 47,000 residents.

Very few of even the best skilled nursing homes provide restorative and rehabilitative services.

Yet, there is evidence that physical rehabilitation for chronically ill bed patients over 65 could restore many within a year to ambulation and partial self-care and that many so restored would not require continued institutional care.

Some of the inadequate medical-care and restorative services in nursing homes are due to the traditional attitude toward them as the last stopping place, the point of no return.

APPENDIX B

Selected letters supporting this legislation received from State agencies charged with the administration of programs for the aging are shown as follows:

STATE OF INDIANA,
COMMISSION ON THE AGING AND AGED,
Indianapolis, Ind., March 31, 1964.

Hon. PAT McNAMARA,
*Labor and Public Welfare Committee,
Congress of the United States, Washington, D.C.*

MY DEAR SENATOR: I have received copy of H.R. 10088 which I understand is before the full Committee on Education and Labor.

I write you urging your favorable reaction to this bill which provides for a separate administration under the direction of a Commissioner on Aging to be appointed by the President by and with the advice and consent of the Senate.

Title III of this bill in relation to grants for community planning, services, and training is of special interest to the Indiana Commission on Aging and Aged. Our limited budget permits us to do very little experimentally and the availability of funds as provided in this act for demonstration projects is certainly commendable.

Our limited budget prohibits our indulging in any sizable research activities and without such research, we have to guess much more than we should be required to do.

As various activities are inaugurated in the State of Indiana, these activities have to be carried out under the direction of persons who lack specialized training and whose effectiveness would be greatly increased were specialized programs made available to them. This proposed bill would make this additional feature a possibility.

May I urge your careful consideration of this bill.

Cordially yours,

Dr. GEORGE E. DAVIS,
Executive Director.

COMMONWEALTH OF KENTUCKY,
COMMISSION ON AGING,
Louisville, Ky., October 21, 1963.

Congressman JOHN H. DENT,
House Education and Labor Committee,
Washington, D.C.

DEAR SIR: At a recent Kentucky Commission on Aging meeting our commission endorsed the Older Americans Act of 1963 (H.R. 7957 and S. 2000).

This bill, as you know, does the following:

(1) Creates an Administration on Aging in the Department of Health, Education, and Welfare.

(2) Provides grants for community planning; for training of personnel to carry out the programs; and for study projects.

We feel it is essential to secure Federal funds in order to develop programs at the community level and if programs are not developed at the community level there is little use of promoting programs from the Federal and State level that can't be implemented.

Any support you can render in helping enact this legislation will be greatly appreciated.

Sincerely,

DONALD L. BECKHART,
Executive Director.

MISSISSIPPI COUNCIL ON AGING,
Jackson, Miss., October 4, 1963.

Congressman JOHN H. DENT,
House Education and Labor Committee,
Washington, D.C.

DEAR CONGRESSMAN DENT: We in Mississippi are in needs of funds for community planning and coordination of programs, in the interest of our aging population. I have copies of H.R. 7957 and S. 2000, and believe that the provisions of these bills will aid us greatly in developing and carrying out our programs.

Let me urge you, therefore, to use your influence to get this bill out of committee and, if possible, passed during this session of Congress. Many of the States need just such an impetus as the passage of this bill will give them; hence, we solicit your cooperation to that end.

Thanking you for your assistance, I am,

Very sincerely,

H. J. MASSIE, *Executive Director.*

UTAH COUNCIL ON AGING,
Salt Lake City, Utah, October 28, 1963.

HON. JOHN H. DENT,
House Education and Labor Committee,
House of Representatives, Washington, D.C.

DEAR SIR: It is our understanding that your committee is now studying H.R. 7957, the Older Americans Act of 1963. We sent for a copy of this bill and have studied it very carefully. It is the wish of our council that I convey to you our desire to solicit your support

in recommending this bill for passage to the U.S. House of Representatives.

We have discussed several projects, such as protective services for senior citizens, meals-on-wheels, senior citizens' volunteer bureau, State institute on aging, preretirement demonstration program for State employees, senior citizens roster, State fair building and exhibit for senior citizens, which are just a few of the projects we would like to see become a reality. The major obstacle to promoting these projects is the fact that we do not have sufficient funds to promote them nor to hire administrative persons to follow them through. Several senior citizen groups are now using converted buildings and could benefit if this bill were passed, inasmuch as the bill would provide money for renovating and building multipurpose recreation activity centers. I have been in touch with faculty members at three of the universities in the State and they all express an intense desire to participate in research projects if funds were available. Because of the very limited budget of our State council on aging, we have found it necessary to reduce the secretary's time to four-fifths of a full tour of duty. We are now working with three volunteer groups to solicit the assistance of workers to assist us with our office work on a volunteer basis with no compensation. We believe the people in the State and the social organizations are ready to become involved in these programs.

We feel that if this bill were passed, it would certainly enable us to move into the areas mentioned above and, together with the senior citizens of the State, help them to help themselves improve the status of the senior citizen. We often hear comments that such great sums are being spent to put an American on the moon and so little is spent to take care of our social problems, such as the problems confronting the senior citizens, right in our own backyard. With the passage of this bill, we would certainly be giving much needed help and consideration to these problems that confront us in our own backyard.

If you feel it would be helpful for your committee for me to be more specific on our projects, or to elaborate on the statements I have made, I would appreciate it very much if you would write me. Thank you for your interest in the senior citizens throughout the United States.

Sincerely yours,

EDWARD Y. OKAZAKI, *Director.*

LETTERS OF SUPPORT

STATE OF CALIFORNIA,
CITIZENS' ADVISORY COMMITTEE ON AGING,
Sacramento, April 23, 1965.

HON. PATRICK McNAMARA,
*Chairman, Senate Committee on Labor and Public Welfare, U.S. Senate,
Senate Office Building, Washington, D.C.*

DEAR SENATOR McNAMARA: On behalf of the members of the Citizens' Advisory Committee on Aging, it is a pleasure to inform you that the committee has again reaffirmed, by resolution, its support of the provisions of the Older Americans Act of 1965.

This is important legislation for the State of California when you consider California today has approximately 1,575,000 persons 65 years of age and over. As an advisory body in State government and the Governor on the needs of California's older population, the committee has consistently endorsed the enactment of both State and Federal legislation for the expansion of services, planning, and development of facilities for older persons. We have long felt that this is of primary importance since we believe that all levels of government must share in this responsibility.

The committee is aware that no local community in California is completely satisfied with the extent of services actually available to their older residents. Public hearings and meetings of the committee in several communities throughout California in recent years have documented all too clearly the gaps in services and the need for more effective organization and coordination at both State and local levels.

The grant provisions of your bill, S. 811, would go to those purposes, together with needed efforts in the areas of research, demonstration, and training. We have received nothing but favorable response on the part of local organizations, senior clubs, and others interested in the field of aging who have reviewed and discussed the contents of your bill with us. As indicated in the House approval of the bill by an overwhelming margin, we feel that this measure is long overdue and will be well received and utilized in California upon its final passage.

Sincerely,

WILLIAM D. BECHILL, *Executive Secretary.*

STATE OF HAWAII,
COMMISSION ON AGING,
Honolulu, Hawaii, February 3, 1964.

HON. PAT McNAMARA,
Senate Office Building, Washington, D.C.

DEAR SENATOR McNAMARA: We are happy to inform you that our State commission on aging met January 9 and unanimously voted to support Senate bill 2000 as introduced by you and companion House bill 7957 as introduced by Congressman Fogarty.

We are extremely happy that these bills are being worked on and hope that they will be out of committee and on the floors of the two Houses shortly. There are several aspects, including special studies and research for which it is difficult to get funds, and this alone will be a valuable supplement to our commission's efforts.

Any efforts that you feel you can lend to the passage of these bills will indeed be appreciated by the Hawaii State Commission on Aging.

Aloha nui loa,

ROCKWELL SMITH, *Chairman.*

STATE OF INDIANA,
COMMISSION ON THE AGING AND AGED,
Indianapolis, Ind., March 5, 1964.

HON. PAT McNAMARA,
Labor and Public Welfare Committee,
Congress of the United States, Washington, D.C.

MY DEAR SENATOR: I am advised that the Dent subcommittee has reported the Fogarty-McNamara bill to the full Committee on Education and Labor and that the Subcommittee on Labor and Public Welfare in the Senate will soon hold hearings on the bill. This bill relates to an Administration of Aging, grants to the States, and project grants.

As chairman of the Indiana State Commission on Aging and Aged, I would like to express myself as being in favor of work in the field of aging being carried on by an administration that reports directly to the Secretary of Health, Education, and Welfare. The major interests of the Office of Aging are educational rather than welfare interests. I have a distinct feeling that the Office of Aging suffers from being a child of the Welfare Commission. The number of older people with whom the Office of Aging is concerned has reached such proportions that I think from this standpoint alone there would be merit in reassigning the Office of Aging to the head of the Department of Health, Education, and Welfare.

As one concerned with a program within a State, I would urge consideration for grants to the various States as pilot projects. There are a great many ideas being developed which many of us would like to try out but since they cost money and since our budgets are so limited, we either abandon any notion of trying them out or have to operate long hours trying to find a sponsor who has money he is willing to donate. It is inconceivable to me but several States have discontinued their commissions on aging since the White House Conference on Aging and other commissions have reduced their budgets. It appears that Federal support is indicated if the recommendations coming out of the White House Conference on Aging are to have any likelihood of being carried out.

I would certainly urge your careful consideration of the proposals in this Fogarty-McNamara bill.

Cordially yours,

DR. GEORGE E. DAVIS,
Executive Director.

STATE OF MARYLAND,
COMMISSION ON THE AGING,
Baltimore, Md., April 23, 1965.

Re H.R. 3708, Older Americans Act.

Senator PAT McNAMARA,
*Chairman, Special Subcommittee on Aging,
Senate Committee on Labor and Public Welfare,
Senate Office Building, Washington, D.C.*

DEAR SENATOR McNAMARA: It is our understanding that the above-mentioned bill is now pending before your subcommittee. Since our commission is on record in support of this bill and we are extremely anxious that the Senate give favorable consideration to the bill at the earliest possible date, we are submitting herewith a statement by the chairman of our commission in support of the bill.

In addition to this statement we are enclosing a copy of our latest annual report which enumerates some of the activities of our commission during the past year, together with some other leaflets of our commission. If we can be helpful in any other way in support of the bill, please let us know.

With kindest personal greetings.

Sincerely yours,

GERALD MONSMAN, *Executive Director.*

STATEMENT BY THE CHAIRMAN OF THE MARYLAND STATE COMMISSION
ON THE AGING IN RE H.R. 3708, OLDER AMERICANS ACT OF 1965

My name is Margaret C. Schweinhaut. I am chairman of the Maryland State Commission on the Aging, which commission was established by act of our general assembly in 1959. Seventeen distinguished Maryland citizens comprise our commission, six of whom are heads of the State departments of government most concerned with the problems of the aging. Our commission has a State budget of \$37,500 for the next fiscal year. It has a staff of three full-time and four part-time employees, in addition to volunteer help from retired persons.

Our commission has gone on record as emphatically endorsing H.R. 3708 because of the important contribution which it would make toward strengthening the program on behalf of the aging in our State. After frequent and careful consideration, our commission favors the establishment of an Administration on Aging within the Department of Health, Education, and Welfare. This is not because we have not received the fullest possible cooperation from the Office of Aging, now under the able direction of Dr. Donald P. Kent. We have also had the very valuable guidance and counsel of the Department's regional representative for aging Mr. H. Burton Aycock, and other members of the staff.

However, as has been well said, this is not a matter of personalities, but of principle. We do not believe an office concerned with all aging people of the Nation should be under the Welfare Administration of the Department. It may be true that the connotation of "welfare" may one day change. I hope very much that it will. But today, we must deal with matters as they are today and the term "welfare" today in the minds of people who were born before 1900 has a deeply

tragic meaning. It suggests the deprivation of human dignity; it elicits suggestions such as the one an old gentleman made to me that the Welfare Office be kept open at night and that the street lamp outside be removed so he could ask help without his neighbors seeing him.

The spirit of the White House Conference on Aging was one of the elevation of the status of our seniors in their communities, of stressing the tremendous natural resource our older people represent if we can but direct their energies into proper channels; and it is in this spirit that we have carried our message to every corner of our State. Many of our gains would be lost if the emphasis should shift to one of welfare, and this despite the fact that Dr. Winston (Commissioner of the Welfare Administration) has never had a narrow viewpoint of welfare and would continue brilliantly to exert her energies toward broadening the scope of programs on behalf of older people. However, the very title printed on her stationery would be a handicap.

There is one further point which I believe needs reemphasis. Neither this committee, nor the entire Congress, nor any of the voluntary or official groups in this field are working only to alleviate the problems facing today's older people which by themselves they cannot solve. That is one of our duties, of course. But equally important is the planning for the future to see to it that the same problems do not face every generation of older Americans. Thus the basic administrative structure must be such that as larger and larger numbers of people live longer and longer, direct and speedy involvement of all levels of government and of all voluntary organizations will come to bear upon the situation.

In urging the establishment of this special Administration on Aging, therefore, we are urging a basic and firm core of leadership not just for today or tomorrow, but for 20 and 50 years from now as well. When a check is made of traffic upon a roadway in anticipation of widening that roadway, experts must also be cognizant of the new subdivision now building adjacent to the road and the new shopping center across the way soon to open and the feeder roads which will soon empty into that highway. The constant extension of the lifespan demands the same consideration.

I would be less than honest if I did not admit to a sense of disappointment that our great hopes during the White House Conference have thus far, at least to some extent, been unrealized. Actual trials of programs within the communities where older people live will have to be carried out if we ever hope to involve the community interest in this field. We have in Maryland been successful with a few small projects financially underwritten by citizen groups but there have not been enough actual, touchable demonstrations of what can be done to bring the full force of the community interest to bear. H.R. 3708 gives us this hope.

There is a real danger that the States, following the lead of the Federal Government, will put their commissions on aging under State welfare directors. I wish to point out that should this happen, the State in turn would logically work through the county welfare departments. From 8 years' experience in the State legislature I am familiar with county welfare departments. Most of them are understaffed, underpaid, and hopelessly bogged down with the problems of needy people, generally with means tests of great variety, medical and otherwise, with ascertaining the ability of children to support their aged

parents, with who is and who is not eligible for what assistance, with the problem of foster home care of children, with illegitimacy, with who and who is not employable, and the like. Should the dread day ever come when programs for dignified and independent older people are superimposed upon our already overworked county welfare departments, then indeed this whole effort on behalf of older Americans would represent an exercise in futility.

Congress has itself through recent enactments emphasized the philosophy of the importance of the independent old person. Housing legislation, for example, to make possible independent living for more and more years. Even the recipient of old age assistance may now earn a dollar a day without having it deducted from his assistance check.

We in the States are primarily interested in the quickest possible response to our calls for help. We want action. We want it for our older citizens on the same basis as we have social security legislation—as a matter of right, not as a matter of kindness.

I will enumerate a few kinds of things I am talking about:

There is a great need in our State for licensed practical nurses and nurses aids to work in the nursing homes largely occupied by older persons. Our commission brought together representatives of the departments of health, education, employment security, representatives of hospitals, nurses associations, nursing homes, and others, and arranged for a training program under the Manpower Development and Training Act by which unemployed and underemployed persons are being trained as practical nurses and aids.

Establishing over-60 employment counseling services to find full or part-time employment for the elderly to supplement their retirement income.

Encouraging nonprofit groups, such as churches, to construct nonprofit housing for the elderly with the help of Federal financing programs, especially section 202 of the National Housing Act.

Encouraging counties and community groups to establish nonprofit nursing homes with State and Federal financing help.

Training volunteer retired persons to man information, referral, and activity centers for the aging.

Establishing a friendly visiting service in nursing homes for the friendless elderly.

Establishing telephone reassurance service for the elderly living alone without family contacts.

These are only a few examples of the many things that we are doing, and should do on a larger scale in more communities. Passage of H.R. 3708 with its matching grant program, would be of inestimable help to us to do so.

One further point, Mr. Chairman, I think there is no question that absolutely splendid work has been done by this Special Staff on Aging. There can be no question of this. The sad thing is when we get into a community where older people live, it seems either that this wonderful work never gets right down to the people where they live, in a tangible form. We know, the department knows, we know what the needs are we have isolated them long since. We know what they are. We want to do something about them. How do we do it? State legislatures say, "We can't do it, the cost of education is so great, and all of our money goes into the mental situation, mental hygiene, institutional care of people mentally ill being so great."

With all the other demands on the States, they can't do it. We turn to the counties and say, "You help." They say they can't do it. The only source of income is real estate tax, and in my own locality, there has been a real estate tax in the last 3 years with the result I lost an election. That is a minor result. Counties can't do it. Where do we go? We keep tossing the ball from one to another. Somebody has to say, "All right, here is the case, and here are the dollars to point the way to give us direction by a matter of actual trial."

No State in this country, in my opinion, can escape bankruptcy if we don't find a way, within the foreseeable future, to solve the problem of putting older people into mental institutions.

In Maryland, in one mental institution—and this is not only Maryland, because I talked to other State representatives—but in 1 mental institution in Maryland, and we have 4 major ones, there are 600 people 65 and over; none of whom, according to the doctor in charge of the hospital, has any business being there, not being psychotic in any way.

America has to have a better answer than tossing old people in mental institutions, not only from the point of view of money but from the point of view of humanity itself.

This is one of the answers. In Maryland in 1960 we appropriated in the legislature \$3½ million for hospital care mostly for indigent old people. In 1963 it went up to \$11½ million. How are we going to stand this? We have to find the answer. Every State is in the same boat with us, I am convinced.

This bill will help us to find the answers and to prove whether or not these answers are the right answers or do we look for other answers.

STATE OF NEW JERSEY,
DEPARTMENT OF STATE,
DIVISION ON AGING,
Trenton, April 9, 1965.

HON. PAT MCNAMARA,
*Chairman, Special Subcommittee on Aging of the Senate Committee on
Labor and Public Welfare, Senate Office Building, Washington D.C.*

DEAR SENATOR MCNAMARA: The passage by the House of Representatives of the Older Americans Act of 1965 (H.R. 3708) is a source of great satisfaction to the New Jersey Division on Aging and we hope that the Senate, too, will approve this legislation in the near future.

The provisions of this act will give national leadership to renew the impetus given by the White House Conference on Aging in recognizing the growing number of older people in our society and understanding their needs in relation to the total population. Important as are the specific provisions for stimulating State and local programs, the most important factor in this bill is the establishment of an Administration of Aging within the Department of Health, Education, and Welfare, equal to those of Social Security and Welfare. Such a shift will go far toward changing the Federal focus of "aging" and establishing a national policy that takes cognizance of the revolutionary potential in lengthened life and shortened work years. This relocation will be particularly helpful to the State of New Jersey which long ago recognized that an Office of Aging does not belong within a welfare structure and has its division on aging placed in a nonoperating department where the identification with service-oriented programs is absent.

Confusion in communication and discrimination in receiving funds for demonstrations has resulted. The attached correspondence illustrates the former. Distribution of desired funds through welfare channels successfully thwarted the latter.

The requirement in H.R. 3708 for development of a State plan in order to qualify for Federal funds is a welcome standard. At present, long-range and overall planning is difficult at best, primarily because State budget justifications depend entirely on short-term action which, with limited personnel, is sometimes difficult to fit into a broad pattern. Such a requirement would help to crystallize high-sounding goals into reasoned blueprints for progress with a real potential for accomplishment.

The support provided for projects to help older people at the community level cannot be praised enough. The need for this in New Jersey was spelled out in detail in testimony of this division given in April 1962 before a subcommittee of the Committee on Education and Labor.

While each New Jersey State government agency has an awareness of its responsibilities for older people, progress at the community level has been uneven and frustratingly slow. Inadequacy of financial resources is a major cause. Support for local organizations trying to improve the quality of life in later years and to help prepare people for the new opportunities which improved health and automation can offer is urgently needed. Demonstration funds to experiment with patterns of organization and services to help older people could build on our limited efforts, both State and local, that too often have been discontinued because of lack of money before being adequately developed and evaluated.

An outstanding example of a New Jersey program that began with high hopes, was eminently successful, and was terminated because of lack of financial support, is a recreation program using volunteers under a professional director in a variety of institutions for older people. The facilities served ran the gamut from homes for the aged and boarding homes, where people were in reasonably good health, to nursing homes and long-term care facilities where disability was the predominant characteristic. The change in patients, personally as well as in their relations to the nursing staff, was remarkable. The program was designed for expansion throughout the entire State but because State tax dollars were not available to pay the professional director, the project has been discontinued.

Limited as is our program of a statewide network of services for older people, it is already evident that there is a shortage of people who understand the special considerations of later years. Training for such persons must be made available through the educational facilities of the State. The Older Americans Act will provide much needed funds for Rutgers, our State university, to establish courses of training, taught by qualified instructors, that should make available more personnel for this field. At the present time, we have neither the courses nor the qualified instructors to do this job.

To give new leadership to State planning for older people and stimulate community action to implement the State plans, I urge you to do all in your power to achieve speedy passage of the Older Americans Act of 1965.

Sincerely yours,

Mrs. EONE HARGER, *Director.*

APRIL 13, 1965.

Re files Nos. 15:D and 110A-WA.

Mr. FRED H. STEININGER,
Director, Bureau of Family Services, U.S. Department of Health, Education, and Welfare, Washington, D.C.

DEAR MR. STEININGER: This acknowledges your letter dated April 7 relating to the observance of Senior Citizens Month.

As you know, in New Jersey, major State-level responsibility for this observance, as well as for coordination of all specialized activities relating specifically to the aging, is exercised by the division on aging. I am sure Mrs. Eone Harger, director of that division, is reporting fully to your Office of Aging about the planning and execution of program elements in New Jersey, including particularly the initiating event—a Governor's conference on aging scheduled for April 27.

I would suggest that the sample copy of the "Guide" publication be sent to Mrs. Harger, who will be in the best position to plan for its utilization and notify you of the quantities desired.

Sincerely yours,

LLOYD W. McCORKLE, *Commissioner.*

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE,
April 7, 1965.

Mr. LLOYD W. McCORKLE,
*Commissioner, Department of Institutions and Agencies,
 Trenton, N.J.*

Dear Mr. McCORKLE: We are beginning to hear of some interesting plans for the observance of Senior Citizens Month, which this year has the theme "Community Action for Older Americans." We sincerely hope that big plans are underway in your State.

Most of you have sent the Commissioner the name of the person you have designated to have major responsibility for Senior Citizens Month activities. We are anxious to hear from all of you as soon as possible.

The President's Council on Aging, which has been given responsibility for developing ideas and materials for the observance, is working on a 20-page publication called "How To Make the Most of Senior Citizens Month: Your Guide to Projects and Promotion". Available about April 9, it will be helpful to groups, civic organizations, and activity centers. We will send your Senior Citizens Month representative a sample copy as soon as it is off the press, at which time you can let us know the quantities you need.

Services to the aged have been increasing significantly during the past year. The Welfare Administration, its Bureau of Family Services, and the Office of Aging stand ready to assist you in your work with elderly citizens in your State.

Sincerely,

FRED H. STEININGER,
Director, Bureau of Family Services.
 DONALD P. KENT,
Director, Office of Aging.

STATEMENTS IN SUPPORT OF THE OLDER AMERICANS ACT

STATEMENT OF WILLIAM C. FITCH, EXECUTIVE DIRECTOR, NATIONAL RETIRED TEACHERS ASSOCIATION, AMERICAN ASSOCIATION OF RETIRED PERSONS, AND ASSOCIATION OF RETIRED PERSONS INTERNATIONAL ON S. 811, OLDER AMERICANS ACT OF 1965, BEFORE THE SPECIAL SUBCOMMITTEE ON AGING OF THE SENATE COMMITTEE ON LABOR AND PUBLIC WELFARE, APRIL 12, 1965

As the executive director of three associations of retired persons, the National Retired Teachers Association, American Association of Retired Persons, and the Association of Retired Persons International, I am writing you in behalf of our combined paid membership of approximately 1 million individuals. Our associations are nonprofit, nonpartisan, and are dedicated to helping older persons help themselves and each other toward independence, dignity, and purpose in their later years.

I am taking this opportunity to indicate our support of S. 811, the Older Americans Act of 1965.

My views are based upon 26 years of experience with older persons. I was with the Social Security Administration for 19 years, during which time I served as a social insurance adviser to the State of Israel, in Jerusalem for 1 year. I was the first Director of the Special Staff on Aging in the Office of the Secretary of the Department of Health, Education, and Welfare, and was the staff director for the White House Conference on Aging until accepting my present position 6 years ago.

The concern of our associations in supporting S. 811 is entirely in the interest of encouraging constructive legislation to implement the recommendations of the White House Conference on Aging and to do everything possible to restore equal citizenship opportunities to older Americans who lost them when they passed beyond the chronological age barrier of 65.

Our associations have challenged the action that downgraded the interests and rights of older persons by placing the Office of Aging under the Commissioner of Welfare. As a former director of the Staff on Aging, I feel very deeply that those responsible for such a realignment of responsibility were ill advised. Further, this action is contrary to the White House Conference on Aging recommendation "that the Federal coordinating agency in the field of aging should be given a statutory basis and more independent leadership."

The resentment against the "welfare label" on the national program on aging is not directed toward the able Commissioner of Welfare or without an awareness that a relatively small percentage of older persons qualify for welfare service. It is voiced on behalf of the overwhelming majority of persons over 65 who associate welfare with public assistance and who rightly regard themselves as independent and responsible citizens. They are merely asking for these facts to be recognized in the organizational structure established to represent and serve the older American.

I make these points to correct or prevent any impression that our recommendations are predicated on the basis of personalities or individuals. We are concerned only with the fundamental philosophy and principles which we believe can be positively demonstrated, and encouraged through the Older Americans Act of 1965.

At the time of the reorganization of the Department of Health, Education, and Welfare, there were before Congress identical bills in the House and Senate recommending an independent U.S. Commission on Aging. The hearings before the House Committee on Education and Labor indicated widespread interest and support for such an organization. The testimony documented the need for an independent unit with funds and authority to administer a dynamic program in aging that would recognize the contributions to be made by all Government departments and agencies, but free from the control or domination of any one of them.

Many of us working in the field of aging would still prefer an independent agency. We are, however, anxious to get on with the work that needs to be done and assist those programs that have survived the "drought of neglect" since the White House Conference. The Older Americans Act of 1965 is basic legislation that advances a positive program and provides the necessary foundation to determine the direction of future programs.

I would like to react to specific sections of the bill:

(1) The objectives outlined in title I of the bill, except for minor improvements, are those defined many times at conferences and by the delegates to the White House Conference on Aging. I believe that no informed person in the field would deny their worth. Others might be added but these are regarded as primary goals.

(2) The establishment of an Administration on Aging within the Department of Health, Education, and Welfare would provide the statutory authority for an administration and the appointment of a Commissioner of Aging by the President by and with the advice and consent of the Senate, and would create a position with prestige to deal at a level required to coordinate and originate policy and program activities. This would establish the "independent leadership" recommended by the White House Conference on Aging.

The need to establish an Administration on Aging would correct the injustice that was done when the office in aging was placed under the Welfare Commissioner. It is difficult to explain this location for activities affecting older persons in the light of experience with other programs administered by the Department.

From the earliest days of the social security program every effort was made to emphasize that old-age and survivors insurance benefits came as a matter of right. Public assistance payments were based on need. The distinction between the basic philosophy of the two programs was clearly defined in press releases and educational material.

After more than 25 years of effective publicity and hundreds of conferences recording the need to keep older persons independent, and self-respecting, we cannot expect that the general public will reverse its understanding and support the concept that programs in aging should now be welfare-centered or directed.

(3) The grants for community planning, services, and training are so urgently needed, that any further delay can only result in the collapse or termination of activities and programs that can make the

difference between healthy, meaningful years for deserving older Americans, or substandard living for them as second-rate citizens in the wealthiest, most resourceful Nation in the world.

In retrospect, those of us working with the White House Conference on Aging and the legislation that created it, would have added another title to the act. This would have provided grants to the States to follow through on the Conference recommendations.

One has only to review the fine reports prepared by every State in preparation for the Conference to be reminded of the unrealized potential that grants for planning, services, and training would have made possible.

That suggested appropriations in S. 811 will enable the States to resume their programs and expand their services to match the need and to reclaim the experience and wisdom of the older American as State and local assets as well as undergirding for our national goals.

(4) With members of the medical profession issuing "Blueprints for 100 Healthy Years," it is evident that medical research is making unbelievable strides. Yet everywhere we are reminded of disability and killing diseases that require all of the available knowledge and skill that can be assembled for research and demonstration.

The greatest criticism that has been leveled against medical and social research in aging is the failure to communicate its findings and the delay in implementing them. Title IV with funds for projects grants could overcome this dilemma.

Each of the other titles is equally important and for the most part is self-explanatory. I would like to comment only on one other feature of the bill which establishes an Advisory Committee on Older Americans.

Such a committee will make it possible for citizen interest to be reflected in the programs of the Administration on Aging and will serve as spokesman in interpreting the program through their organizations and communities. This is the kind of partnership which is the ideal of democracy in government.

Rarely has there been legislation before the Congress that has the potential for practical action or that can positively influence the lives of so many.

An Administration on Aging and adequate funds to implement the titles of the bill will distinguish the Older Americans Act of 1965, as the legislation that marked the social maturity of our Nation. Eighteen million individuals may once again feel pride in being old and in being judged by their achievements.

INTERNATIONAL UNION, UNITED AUTOMOBILE,
AEROSPACE AND AGRICULTURAL IMPLEMENT
WORKERS OF AMERICA-UAW,
Detroit, Mich., April 9, 1965.

SENATOR PATRICK McNAMARA,
*Chairman, Special Subcommittee on Administration for Aging, Senate
Labor and Public Welfare Committee, Senate Office Building,
Washington, D.C.*

DEAR SENATOR McNAMARA: It is my understanding that your subcommittee is now considering Senate action on the McNamara-Fogarty bill. The bill as passed by the House is fine except for the

amendments which require State agencies designated under the act to give prior approval to grants for research, training, and demonstration projects. I believe these amendments will seriously cripple the Administrator and the Secretary of HEW in proper determinations as to the wisdom, value, and appropriateness of projects which require review by a competent national advisory panel with a national interest in the problems and needs of older people.

However, in reacting to the overall need for the bill, I would like to address my comments to the question of the administrative location and structure for programs for older Americans in the Federal Government, and I would call your attention respectfully to the fact that there will be a tendency for States and communities to follow similar patterns of organization and structure. And perhaps it is from this point of view that I have my greatest degree of concern.

I worked for 20 years in the Federal Government before I went to work for the United Automobile Workers. I was special assistant to the Under Secretary of Labor in charge of a very large program of research, demonstration, and operational projects for the older workers.

I helped to establish the first Federal Council on Aging and in this respect I think I have some basic understanding of the problems involved in the organization and administration of programs for older people in the Federal Government.

I see the problem as basically one of planning and coordination to maximize the contribution which all agencies of Government, as well as those in the voluntary segment of our society, can contribute to the development of services and programs for older people with a minimum of duplication, overlapping, confusion, and with a maximum of contribution of their own resources and activities, not necessarily engendered by great amounts of additional money but a genuine and committed concern for doing something to bring older people back into our society and into our community and to provide for them a meaningful place and a meaningful role.

I believe in this context the question of organization becomes extremely important. I have spent considerable time as a consultant to the U.S. Department of Labor in trying to revive and pick up and strengthen its services to the older worker. I do not think that a welfare administration or an office of aging within a welfare administration is the proper focal point from which to stimulate this kind of interest and concern on the part of the Department of Labor.

Public health has a large interest in the aging, which I don't think is particularly related or significantly stimulated under welfare administration auspices.

The arguments with regard to the social security concept of rights to benefits as compared to payments of welfare benefits in the case of the indigent is obvious, so I won't go into it in any depth. Suffice it to say there are many facets of Federal and State programming and local activities which are not in the welfare context and in my personal judgment and experience will not respond well to leadership which generates basically from the concept that public welfare is the central coordinating point around which these activities should be conducted.

I also served for 2 years as chairman of the Michigan Commission on Aging and I know some of the basic difficulties involved in getting public welfare administrators in the State of Michigan to assume a proper role and responsibility for services to older people.

I would just like to mention one incident as an indication of the problem.

I was talking one day to our late public welfare administrator about his responsibilities in aging and I said to him: "We see our role as a commission as one of coordination and planning and stimulation of activity. What are you prepared to do to provide the services to older people which are claimed for your kind of agency by the American Public Welfare Association?"

The APWA, incidentally, had just published an outstanding document outlining services in public welfare that could be made available to older people.

His response was to say: If you were able to help us get several million additional dollars for this purpose, I probably would not spend them on the aging because the areas in which we are hurting have to do with chiseling and fraud in connection with the public welfare program in its relation to unwed mothers and other people. Therefore, this is where we would put any additional money and any additional emphasis in our program."

I suspect that many public welfare administrators throughout the country have the same basic attitude with regard to where the pressures lie on them.

I know in Michigan that caseloads for old-age assistance workers have been increased in order to make additional staff available to help in serving children and younger applicants for public welfare.

I also happen to be a past vice president of the National Council on Aging, which is the largest coordinating body of voluntary organizations who have programs and services in the field of aging. This includes representation from labor and management from all of the major voluntary groups such as the YMCA, the Visiting Nurses Association, the Family and Neighborhood Service organizations, and so forth.

When we first were set up, we were set up as a committee within the National Social Welfare Assembly and one of our great problems in getting support and understanding and cooperation, particularly from management representatives and from the community at large was that they kept saying, "You are essentially concerned with the welfare problems of older people and we are concerned with the broad spectrum of their interests and need in the field of education, employment, retirement, recreation, and health."

We therefore took a very profound step. In order that our organization should grow and prosper and function as it was intended to, we divorced ourselves completely from the National Social Welfare Assembly and became the National Council on Aging. Our reasoning was that we would do better under a broader umbrella and would lose the specter of being concerned primarily or exclusively with the welfare aspects of the problems of older people. And that judgment has proven to be very sound indeed.

I would like to call attention to the fact that the grants called for under the bill must be administered by somebody and it seems to me it is a very dangerous thing to presume that they can be intelligently and effectively administered if the principal channel through which they flow to States is going to be the public welfare channel.

We want employment agencies, public and nonprofit; we want colleges and universities; and we want many other groups who have

a broad interest and concern, including national voluntary organizations and their local and State counterparts, to feel there is a place for them to take up responsibility by receiving grants to perform different kinds of training, demonstration, and research that will commit them to a program of services to older people and which will expand our knowledge and understanding of how best these things can be done.

I submit that attempting to administer this grant program under the auspices of the Welfare Administration, and, inevitably, in most places, through the State welfare departments will mean we will be very seriously limiting the range and scope and effectiveness of the utilization of the total resources that are available to serve older people.

Finally, I would like to point out if this decision to place the Office of Aging under the Welfare Administration had been taken with any real concern for the feelings and opinions of people who are knowledgeable in this field, we feel that it would never have been taken.

It was taken without consultation. I know of no expert in the field, no State administrator or State commission person, in fact, I know of no people on the immediate staff of the Office of Aging who were consulted in the decision to make this shift of the Office of Aging and subordinate it to the new Welfare Administration.

I submit, in large measure, it was a decision taken expediently in order to round out a sufficient cluster of responsibilities under the Welfare Administration to justify the grade and title and scope of the position.

I think this is a very shortsighted and very ill-conceived way in which to deal with the problem which is emerging to be one of the most significant and important problems of our times.

I do not question the integrity of Dr. Winston or the Secretary of Health, Education, and Welfare, or the staff of the Office of Aging or anyone else but I submit that we are here dealing with a problem which requires maximum consultation and participation on the part of all groups who have a contribution to make and I do not think that this contribution can be effectively made within the context of a welfare administration.

Other reasons why we support this bill have to do with the grant features. As immediate past chairman of the Michigan Commission on Aging, I know how badly the States need financial incentives to develop programs and take leadership in State planning and local program development. Our Governor, for example, despite all his fine words about State and local responsibility for leadership, has authorized only a nominal increase in appropriations for our State commission on aging. This increase was used to finance salary and expenses for a consultant on housing for the aged, and so we have had only one professional person in Michigan trying to develop programs in our 88 counties and that person has recently resigned because of the impossibility of his responsibility.

State and community planning grants and grants for research, demonstration, and training are an absolute necessity if we are to move ahead and fulfill even a small part of our responsibilities to older people in this great country. The need for more professionally trained personnel to work with older people in the health, education, recreation, rehabilitation, social work, and mental health fields is very

great. In our own programs of day centers for older people, and in preretirement education, we are chronically short of qualified professional staff and this is true of every other agency functioning in this field. The same is true in recreation services generally, in social casework; in adult education; in senior citizens housing, nursing homes, and in many other settings.

Small amounts of money, judiciously allocated to universities and voluntary agencies who offer opportunities for demonstration and training could do wonders to overcome these personnel shortages.

I hope that these hurriedly prepared comments will convey to you and your subcommittee my sense of urgency about the importance of the McNamara-Fogarty bill without the potentially crippling amendments incorporated by the House.

Sincerely yours,

CHARLES E. ODELL,
Director, Older and Retired Workers Department.

TEXT OF OLDER AMERICANS ACT

89TH CONGRESS
1ST SESSION

H.R. 3708

[as amended by the Special Subcommittee on Aging]
IN THE SENATE OF THE UNITED STATES

APRIL 1, 1965

Read twice and referred to the Committee on Labor and Public Welfare

[Omit the part struck through and insert the part printed in italic]

AN ACT

To provide assistance in the development of new or improved programs to help older persons through grants to the States for community planning and services and for training, through research, development, or training project grants, and to establish within the Department of Health, Education, and Welfare an operating agency to be designated as the "Administration on Aging".

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That this Act may be cited as the "Older Americans Act of 1965".

TITLE I—DECLARATION OF OBJECTIVES: DEFINITIONS

DECLARATION OF OBJECTIVES FOR OLDER AMERICANS

SEC. 101. The Congress hereby finds and declares that, in keeping with the traditional American concept of the inherent dignity of the individual in our democratic society, the older people of our Nation are entitled to, and it is the joint and several duty and responsibility of the governments of the United States and of the several States and their political subdivisions to ~~assist~~ *enable* our older people to secure equal opportunity to the full and free enjoyment of the following objectives:

(1) An adequate income in retirement in accordance with the American standard of living.

(2) The best possible physical and mental health which science can make available and without regard to economic status.

(3) Suitable housing, independently selected, designed and located with reference to special needs and available at costs which older citizens can afford.

(4) Full restorative services for those who require institutional care.

(5) Opportunity for employment with no discriminatory personnel practices because of age.

(6) Retirement in health, honor, dignity—after years of contribution to the economy.

(7) Pursuit of meaningful activity within the widest range of civic, cultural, and recreational opportunities.

(8) Efficient community services which provide social assistance in a coordinated manner and which are readily available when needed.

(9) Immediate benefit from proven research knowledge which can sustain and improve health and happiness.

(10) Freedom, independence, and the free exercise of individual initiative in planning and managing their own lives.

DEFINITIONS

SEC. 102. For the purposes of this Act—

(1) The term "Secretary" means the Secretary of Health, Education, and Welfare;

(2) The term "Commissioner" means the Commissioner of the Administration on Aging.

(3) The term "State" includes the District of Columbia, the Virgin Islands, Puerto Rico, Guam, and American Samoa.

(4) The term "nonprofit institution or organization" means an institution or organization which is owned and operated by one or more corporations or associations no part of the net earnings of which inures, or may lawfully inure, to the benefit of any private shareholder or individual.

TITLE II—ADMINISTRATION ON AGING

ESTABLISHMENT OF ADMINISTRATION

SEC. 201. (a) There is hereby established within the Department of Health, Education, and Welfare an Administration to be known as the Administration on Aging (hereinafter referred to as the "Administration").

(b) The Administration shall be under the direction of a Commissioner on Aging to be appointed by the President by and with the advice and consent of the Senate.

FUNCTIONS OF OFFICE

SEC. 202. It shall be the duty and function of the Administration to—

(1) serve as a clearinghouse for information related to problems of the aged and aging;

(2) assist the Secretary in all matters pertaining to problems of the aged and aging;

(3) administer the grants provided by this Act;

(4) develop plans, conduct and arrange for research and demonstration programs in the field of aging;

(5) provide technical assistance and consultation to States and political subdivisions thereof with respect to programs for the aged and aging;

(6) prepare, publish, and disseminate educational materials dealing with the welfare of older persons;

(7) gather statistics in the field of aging which other Federal agencies are not collecting; and

(8) stimulate more effective use of existing resources and available services for the aged and aging.

TITLE III—GRANTS FOR COMMUNITY PLANNING,
SERVICES, AND TRAINING

AUTHORIZATION OF APPROPRIATIONS

SEC. 301. The Secretary shall carry out during the fiscal year ending June 30, 1966, and each of the four succeeding fiscal years, a program of grants to States in accordance with this title. There are authorized to be appropriated \$5,000,000 for the fiscal year ending June 30, 1966, and \$8,000,000 for the fiscal year ending June 30, 1967, and for the fiscal year ending June 30, 1968, and each of the two succeeding fiscal years, such sums may be appropriated as the Congress may hereafter authorize by law, for—

(1) community planning and coordination of programs for carrying out the purposes of this Act;

(2) demonstrations of programs or activities which are particularly valuable in carrying out such purposes;

(3) training of special personnel needed to carry out such programs and activities; and

(4) establishment of new or expansion of existing programs to carry out such purposes, including establishment of new or expansion of existing centers providing recreational and other leisure time activities, and informational, health, welfare, counseling, and referral services for older persons and assisting such persons in providing volunteer community or civic services; except that no costs of construction, other than for minor alterations and repairs, shall be included in such establishment or expansion.

ALLOTMENTS

SEC. 302. (a)(1) From the sum appropriated for a fiscal year under section 301 (A) the Virgin Islands, Guam, and American Samoa shall be allotted an amount equal to one-half of 1 per centum of such sum and (B) each other State shall be allotted an amount equal to 1 per centum of such sum.

(2) From the remainder of the sum so appropriated for a fiscal year each State shall be allotted an additional amount which bears the same ratio to such remainder as the population aged sixty-five or over in such State bears to the population aged sixty-five or over in all of the States, as determined by the Secretary on the basis of the most recent information available to him, including any relevant data furnished to him by the Department of Commerce.

(3) A State's allotment for a fiscal year under this title shall be equal to the sum of the amounts allotted to it under paragraphs (1) and (2).

(b) The amount of any allotment to a State under subsection (a) for any fiscal year which the State notifies the Secretary will not be required for carrying out the State plan (if any) approved under this title shall be available for reallocation from time to time, on such date as the Secretary may fix, to other States which the Secretary determines (1) have need in carrying out their State plans so approved for sums in excess of those previously allotted to them under subsection (a) and (2) will be able to use such excess amounts for projects approved by the State during the period for which the original allotment

was available. Such reallocations shall be made on the basis of the State plans so approved, after taking into consideration the population aged sixty-five or over. Any amount so reallocated to a State shall be deemed part of its allotment under subsection (a).

(c) The allotment of any State under subsection (a) for any fiscal year shall be available for grants to pay part of the cost of projects in such State described in section 301 and approved by such State (in accordance with its State plan approved under section 303) prior to the end of such year or, in the case of allotments for the fiscal year ending June 30, 1966, prior to July 1, 1967. To the extent permitted by the State's allotment under this section such payments with respect to any project shall equal 75 per centum of the cost of such project for the first year of the duration of such project, 60 per centum of such cost for the second year of such project, and 50 per centum of such cost for the third year of such project; except that (1) at the request of the State, such payments shall be less (to the extent requested) than such percentage of the cost of such project, and (2) grants may not be made under this title for any such project for more than three years or for any period after June 30, 1972.

STATE PLANS

SEC. 303. (a) The Secretary shall approve a State plan for purposes of this title which—

(1) establishes or designates a single State agency as the sole agency for administering or supervising the administration of the plan, which agency shall be the agency primarily responsible for coordination of State programs and activities related to the purposes of this Act;

(2) provides for such financial participation by the State or communities with respect to activities and projects under the plan as the Secretary may by regulation prescribe in order to assure continuation of desirable activities and projects after termination of Federal financial support under this title;

(3) provides for development of programs and activities for carrying out the purposes of this Act, including the furnishing of consultative, technical, or information services to public or non-profit private agencies and organizations engaged in activities relating to the special problems or welfare of older persons, and for coordinating the activities of such agencies and organizations to the extent feasible;

(4) provides for consultation with and utilization, pursuant to agreement with the head thereof, of the services and facilities of appropriate State or local public or nonprofit private agencies and organizations in the administration of the plan and in the development of such programs and activities;

(5) provides such methods of administration (including methods relating to the establishment and maintenance of personnel standards on a merit basis, except that the Secretary shall exercise no authority with respect to the selection, tenure of office, and compensation of any individual employed in accordance with such methods) as are necessary for the proper and efficient operation of the plan;

(6) sets forth principles for determining the priority of projects in the State, and provides for approval of such projects in the order determined by application of such principles;

(7) provides for approval of projects of only public or nonprofit private agencies or organizations and for an opportunity for a hearing before the State agency for any applicant whose application for approval of a project is denied; and

(8) provides that the State agency will make such reports to the Secretary, in such form and containing such information, as may reasonably be necessary to enable him to perform his functions under this title and will keep such records and afford such access thereto as the Secretary may find necessary to assure the correctness and verification of such reports.

The Secretary shall not finally disapprove any State plan, or any modification thereof submitted under this section without first affording the State reasonable notice and opportunity for a hearing.

(b) Whenever the Secretary, after reasonable notice and opportunity for hearing to the State agency administering or supervising the administration of a State plan approved under subsection (a), finds that—

(1) the State plan has been so changed that it no longer complies with the provisions of subsection (a), or

(2) in the administration of the plan there is a failure to comply substantially with any such provision, the Secretary shall notify such State agency that no further payments will be made to the State under this title (or, in his discretion, that further payments to the State will be limited to projects under or portions of the State plan not affected by such failure), until he is satisfied that there will no longer be any failure to comply. Until he is so satisfied, no further payments shall be made to such State under this title (or payments shall be limited to projects under or portions of the State plan not affected by such failure).

(c) A State which is dissatisfied with a final action of the Secretary under subsection (a) or (b) may appeal to the United States court of appeals for the circuit in which the State is located, by filing a petition with such court within sixty days after such final action. A copy of the petition shall be forthwith transmitted by the clerk of the court to the Secretary, or any officer designated by him for that purpose. The Secretary thereupon shall file in the court the record of the proceedings on which he based his action, as provided in section 2112 of title 28, United States Code. Upon the filing of such petition, the court shall have jurisdiction to affirm the action of the Secretary or to set it aside, in whole or in part, temporarily or permanently, but until the filing of the record, the Secretary may modify or set aside his order. The findings of the Secretary as to the facts, if supported by substantial evidence, shall be conclusive, but the court, for good cause shown, may remand the case to the Secretary to take further evidence, and the Secretary may thereupon make new or modified findings of fact and may modify his previous action, and shall file in the court the record of the further proceedings. Such new or modified findings of fact shall likewise be conclusive if supported by substantial evidence. The judgment of the court affirming or setting aside, in whole or in part, any action of the Secretary shall be final, subject to review by the Supreme Court of the United States upon certiorari or certification as

provided in section 1254 of title 28, United States Code. The commencement of proceedings under this subsection shall not, unless so specifically ordered by the court, operate as a stay of the Secretary's action.

COSTS OF STATE PLAN ADMINISTRATION

SEC. 304. From a State's allotment under section 302 for a fiscal year, not more than 10 per centum or \$15,000, whichever is the larger, shall be available for paying one-half (or such smaller portion as the State may request) of the costs of the State agency (established or designated as provided in section 303(a)(1)) in administering the State plan approved under section 303, including the costs of carrying on the functions referred to in subsection (a)(3) thereof.

PAYMENTS

SEC. 305. Payments under this title may be made (after necessary adjustment on account of previously made overpayments or underpayments) in advance or by way of reimbursement, and in such installments, as the Secretary may determine.

TITLE IV—RESEARCH AND DEVELOPMENT PROJECTS

PROJECT GRANTS

SEC. 401. The Secretary is authorized to carry out the purposes of this Act through grants to any public or nonprofit private agency, organization, or institution and contracts with any such agency, organization, or institution or with any individual—

(a) to study current patterns and conditions of living of older persons and identify factors which are beneficial or detrimental to the wholesome and meaningful living of such persons;

(b) to develop or demonstrate new approaches, techniques, and methods (including multipurpose activity centers) which hold promise of substantial contribution toward wholesome and meaningful living for older persons;

(c) to develop or demonstrate approaches, methods, and techniques for achieving or improving coordination of community services for older persons; or

(d) to evaluate these approaches, techniques, and methods, as well as others which may assist older persons to enjoy wholesome and meaningful living and to continue to contribute to the strength and welfare of our Nation.

PAYMENTS OF GRANTS

SEC. 402. (a) To the extent he deems it appropriate, the Secretary shall require the recipient of any grant or contract under this title to contribute money, facilities, or services for carrying out the project for which such grant or contract was made.

(b) Payments under this title pursuant to a grant or contract may be made (after necessary adjustment, in the case of grants, on account of previously made overpayments or underpayments) in advance or by way of reimbursement, and in such installments and on such conditions, as the Secretary may determine.

~~(e) The Secretary shall make no grant or contract under this title in any State which has established or designated a State agency for purposes of section 303(a)(1) unless such agency has approved such grant or contract.~~

TITLE V—TRAINING PROJECTS

PROJECT GRANTS

SEC. 501. The Secretary is authorized to make grants to or contracts with any public or nonprofit private agency, organization, or institution for the specialized training of persons employed or preparing for employment in carrying out programs related to the purposes of this Act.

PAYMENT OF GRANTS

SEC. 502. (a) To the extent he deems it appropriate, the Secretary shall require the recipient of any grant or contract under this title to contribute money, facilities, or services for carrying out the project for which such grant or contract was made.

(b) Payments under this title pursuant to a grant or contract may be made (after necessary adjustment, in the case of grants, on account of previously made overpayments or underpayments) in advance or by way of reimbursement, and in such installments and on such conditions, as the Secretary may determine.

~~(e) The Secretary shall make no grant or contract under this title in any State which has established or designated a State agency for purposes of section 303(a)(1) unless such agency has approved such grant or contract.~~

TITLE VI—GENERAL

ADVISORY COMMITTEES

SEC. 601. (a) (1) For the purpose of advising the Secretary of Health, Education, and Welfare on matters bearing on his responsibilities under this Act and related activities of his Department, there is hereby established in the Department of Health, Education, and Welfare an Advisory Committee on Older Americans, consisting of the Commissioner, who shall be Chairman, and fifteen persons not otherwise in the employ of the United States, appointed by the Secretary without regard to the civil service laws. Members shall be selected from among persons who are experienced in or have demonstrated particular interest in special problems of the aging.

(2) Each member of the Committee shall hold office for a term of three years, except that (A) any member appointed to fill a vacancy occurring prior to the expiration of the term for which his predecessor was appointed shall be appointed for the remainder of such term, and (B) the terms of office of the members first taking office shall expire, as designated by the Secretary of Health, Education, and Welfare at the time of appointment, five at the end of the first year, five at the end of the second year, and five at the end of the third year after the date of appointment.

(b) The Secretary of Health, Education, and Welfare is authorized to appoint, without regard to the civil service laws, such technical

advisory committees as he deems appropriate for advising him in carrying out his functions under this Act.

(c) Members of the Advisory Committee or of any technical advisory committee appointed under this section, who are not regular full-time employees of the United States, shall, while attending meetings or conferences of such committee or otherwise engaged on business of such committee, be entitled to receive compensation at a rate fixed by the Secretary who appointed them, but not exceeding \$75 per diem, including travel time, and, while so serving away from their homes or regular places of business, they may be allowed travel expenses, including per diem in lieu of subsistence, as authorized by section 5 of the Administrative Expenses Act of 1946 (5 U.S.C. 73b-2) for persons in the Government service employed intermittently.

ADMINISTRATION

SEC. 602. (a) In carrying out the purposes of this Act, the Secretary of Health, Education, and Welfare is authorized to provide consultative services and technical assistance to public or nonprofit private agencies, organizations, and institutions; to provide short-term training and technical instruction; to conduct research and demonstrations; and to collect, prepare, publish, and disseminate special educational or informational materials, including reports of the projects for which funds are provided under this Act.

(b) In administering their respective functions under this Act, the Secretary of Health, Education, and Welfare is authorized to utilize the services and facilities of any agency of the Federal Government and of any other public or nonprofit private agency or institution, in accordance with agreements between the Secretary concerned and the head thereof, and to pay therefor, in advance or by way of reimbursement, as may be provided in the agreement.

AUTHORIZATION OF APPROPRIATIONS

SEC. 603. The Secretary shall carry out titles IV and V of this Act during the fiscal year ending June 30, 1966, and each of the four succeeding fiscal years. There are hereby authorized to be appropriated \$1,500,000 for the fiscal year ending June 30, 1966, and \$3,000,000 for the fiscal year ending June 30, 1967, and for the fiscal year ending June 30, 1968, and each of the two succeeding fiscal years, such sums may be appropriated as the Congress may hereafter authorize by law.

Passed the House of Representatives March 31, 1965.

Attest:

RALPH R. ROBERTS,
Clerk.

○

