
---

Mr. Chairman and Members of the Subcommittee:

I wish to commend Congressman Rhodes, a member of your Subcommittee, for introducing H.R.6771. This is an important measure, bearing directly and vitally on the health and strength of the United States. I endorse H.R.6771 most strongly and urge you to throw your full support behind it. I am confident that you will do so, when your careful study of the facts reveals to you, as it has to me, how urgently the country needs this legislation.

The direct purpose of H.R.6771 is to provide a relatively small but extremely helpful measure of support for the distinguished but inadequately-financed schools which develop new knowledge of public health protection for all our people in this nuclear age and educate health leaders to apply this knowledge in the public service at all levels of government in the nation. Exhaustive studies by the U. S. Public Health Service, the latest at the request of the Staff of the Interstate and Foreign Commerce Committee, have disclosed a serious shortage of public health personnel throughout the country, especially in the States and local health services. Thousands of budgeted positions are unfilled. Many more local health units should be established and staffed in order to extend protection to people in areas where health services are
wholly absent or spread too thinly. The shortage problem has been well documented in the Staff Report which the Committee published as of March 1, 1957.

The same Staff Report of your parent Committee established the fact that the only source of specialized, comprehensive training for public health doctors, engineers, nurses, social workers, health educators, nutritionists, and other experts who are in such short supply is the eleven university schools of public health. The Staff Report made clear that these schools are in a desperate financial plight, and must find relief from some source if they are to continue operating at present levels, to say nothing of expanding as they should to fill the personnel shortage. In effect, these eleven institutions which provide essential personnel for public service in our federal, State and local health agencies and in our Army, Navy and Air Force, are national institutions. The nation depends upon them. The nation must have them. The nation cannot afford, for the sake of its people's health, to let these institutions founder and go down.

I subscribe wholeheartedly to the view that it is a federal responsibility, and therefore a duty of the Congress to assist the schools of public health as needed in order to overcome the shortage of public health workers. However, I am even more concerned over the fact that lack of funds is preventing these schools from teaching future health officers how to cope with many of the new and highly dangerous health hazards that threaten the American people today.

Recently I asked one of the Deans of the schools of public health to tell me how the schools proposed to use the
funds that would be provided by H.R.6771 and what this would mean to the country. His response was to poll all of the deans and to summarize their replies to my questions. The answers shocked me. They would shock and frighten you and any American who has the safety and welfare of his countrymen at heart in these disturbing times. They revealed that, for lack of funds with which to hire and hold qualified teachers there are terrible gaps among the courses being adequately taught. These gaps vary from school to school. They include such vitally important subjects as Radiation Hazards, Air Pollution, Civil Defense, Disaster Control, Mental Illness, Maternal and Child Health, and Medical Genetics.

The schools report that such teaching assistance as they now receive in categorical grants from various branches of the federal government are helpful, but so restricted as to use and temporary in nature that they do not form the basis for stabilizing a Faculty and buttressing a teaching program permanently at its weakest points.

Some schools are frustrated by financial inability to conduct intensive teaching, as well as research, in the prevention and control of cancer, heart disease and other chronic diseases which afflict our people. The complex health problems of our aging population cry for solution and for the education of future public health workers in the organization and administration of community-wide programs to promote the health and happiness of senior citizens. At the other end of the life scale, much is known to medical science, but much more needs to be learned and taught to public health personnel about the cause and prevention of congenital defects that are
manifested in crippled and mentally-retarded children. The whole field of rehabilitation is one in which the schools of public health should and are anxious to take the lead. In none of these areas are all of the schools financially capable of working at full force. This, from the standpoint of the nation's health and safety, is a distressing situation. It warns us that, unless H.R.6771 or a measure accomplishing the same purposes is passed, not only the extent but the quality of health services in this country will continue to deteriorate below the danger point already reached through lack of this or a similar measure.

Mr. Chairman and Members of the Subcommittee, I ask you:--

If it should become known to the Congress that West Point, Annapolis, or the Air Force Academy were unable to teach the latest developments in military science to future officers for lack of funds and that, for the same reason, the output of new officers for the Armed Forces was falling seriously short of the nation's minimum needs for this top leadership, can anyone doubt that the necessary funds would be provided promptly? Would not the same assistance be extended to a national academy of public health which was in similar difficulties? This is precisely the situation in the only academy of public health the nation has: the eleven university schools of public health. As one who has made it a point to keep aware of the health needs of the country, it is obvious to me that the Congress must come speedily to the aid of these schools as proposed in H.R.6771.
What is asked under the Rhodes bill? Full subsidy? Nothing approaching it. Matching grants? Not even this much. The money which H.R.6771 would enable the Surgeon General of the U. S. Public Health Service to distribute equably among the accredited schools of public health from funds already authorized for public health work would amount to less than one-fifth of the present teaching costs borne by these schools. Moreover, these new funds would not replace, but would be added to non-federal money already being devoted to teaching in the schools. Thus, the schools and their parent States or universities are ready and willing to continue to pay the major share of training health experts for the public service.

The Rhodes bill is designed to repair a weak spot in the armor which the Subcommittee and your whole Committee have had a hand in forging to protect the health of all our people. This is certainly a time when the Congress should stand firm against committing public funds for non-essentials. But who will describe the public health as non-essential? And who but would agree that the present crisis demands that America's greatest resource—the health of her people—must be guarded more zealously than ever before.

My conviction is strong in this matter. I am eager to work in the House for passage of this bill, the Senate counterpart of which has strong bipartisan support. Approval of H.R.6771 by this Subcommittee is a prerequisite to ultimate action that will mean a great deal to the nation. I urge you to use your vote and your influence to bring this about.