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New Dividends in Health

It is indeed a pleasure to be with you this evening and to participate with you in this occasion because the field and the profession with which you are concerned have such an important bearing upon the subject in which I have been so long and vitally concerned myself -- the subject of the health and welfare of America.

As many of you know, during the past score of years I have devoted major time and attention, as a member and chairman of the Congressional committee in charge of health, education, and welfare appropriations, to the sound and progressive development of programs which would provide appropriate and adequate Federal partnership in the cause of advancing the health of the American people.

One of the most encouraging and progressive programs which we have seen develop during these years -- and one which is fundamental to the greatest gains for human health -- is that of research in the life and health sciences. There has been a tremendous widening and deepening of the endeavor to seek out new knowledge and to bring its fruits to bear upon the conquest of disease. Not too many years ago the fields of research in medical, biological and related sciences presented little that was encouraging to one who also viewed the large and increasing toll of killing and crippling diseases. Research, of course, was underway in many places, even as it was here in our institutions in Rhode Island. But nourishment and encouragement -- and new approaches and views -- were needed. That these were forthcoming, all of us know and it is indeed heartening, as we look back just a few years, to note how far we have come along the road

of progress.

For example, let us take the matter of the support of life sciences research and look at it for a moment. The assistance provided by ^{Federal} funds, which I have diligently sought in Congress because they were urgently needed, represents the proper Federal share for vital research work with all necessary safeguards for preserving the academic freedom of our universities and colleges. This assistance serves as a good index of the sound growth of health research. About 15 years ago this support amounted to only \$3 million. Ten years ago it was around \$46 million. By 1955 it had grown to \$81 million, and this fiscal year it amounts of \$560 million. It has not been an explosive sort of growth, but rather one characterized by progressive expansion determined by the balances among the resources available, at given times through the years, to do the job. By this I mean that every consideration was given and is given -- in our continuing deliberations upon needs and what should be done about them -- to the amounts of skilled manpower available and needed, to the kinds and numbers of facilities, and to the sorts of research endeavors which offered the greatest opportunities for progress. Only after considering such things as these, and after receiving the best scientific opinions, have we in Congress moved ahead with the programs of support for health research which have helped make ours the leading nation in the world in this area of science.

Even as there has been a real forward march along the road of progress in institutions of higher learning in other places, so has there been in our home State, in this University of Rhode Island, and in its College of Pharmacy. There have been substantial new developments here in research endeavors themselves, in training promising men and women in the complex skills of today's

sciences, and in increasing and improving the facilities for research.

The support received through the National Institutes of Health grants programs reflects some indication of this at the University of Rhode Island. In 1949 there was only \$1400 of this support from NIH. In 1959, there was some \$19,847 awarded. But by the last fiscal year, 1960, there was over \$94,000 awarded for research, training, research construction, and research fellowships.

So, today, we can see here at hand the development of broadening activities of an excellent program in higher education in the modern sense, in which research contributes to the whole university and community environment, and in which they in turn enrich and contribute to research. This, I think, also represents a splendid example of the best that has happened and is happening in medical and health research in this country. What is even more stimulating to me is to consider the prospects that lie ahead. With the devoted and enlightened leadership characteristic of this college and university, I am sure that when we stand here, say 10 years from now, and look back upon this time, we shall be even prouder of what will have been accomplished in the forthcoming decade than we are gratified today at the considerable progress made thus far.

This is not to say, of course, that many vast problems do not remain to be solved. As you well know, we have only begun to make inroads against the great killing and crippling diseases like cancer, heart disease, mental illness, and neurological and sensory diseases. Also, related to and stemming from such problems as these diseases, there are economic and social burdens which we must and can do something about. Let us consider for a moment the tremendous aging problem, for example. At the core of the problem are the health and medical aspects of aging. ~~In addition~~ We must find new and better

ways to handle the community, family, and personal burdens imposed by ill health in older people. In the United States population we are acquiring each and every year a net gain of some 350,000 persons in the age group 65 years and over. It is tragic indeed that half of our older people do not have enough income to live at a minimum level of health and decent living standards. Compounding this tragedy is the enormous disease burden: three-quarters of our older people suffer from chronic illnesses or disabling conditions. It is most urgent indeed that there be established and implemented immediately appropriate programs of aid for these senior citizens with respect to their medical and health needs, carried out within the framework of our democratic society. I firmly believe that this can and will be done and that, while we certainly have both technical and other knotty problems to solve in evolving new programs to help our older people, these problems are capable of being attacked and solved if we will but bend ourselves to the task.

My position in Congress has enabled me to support and expedite a good deal of legislation which has helped improve the health, welfare, income, and housing of our older people. We have done much over the past years. But we must do better. Our aging population deserves the very best that we can provide for them. We should seek to increase medical care and rehabilitation for the aged; we should help in developing better housing programs for them; and we should do everything possible to ensure that the limited income of retirement provides the necessities one might expect in a nation of our wealth and accomplishments.

About a year and a half ago, I began to realize that the volumes of words being produced on the subject were serving no useful purpose, and that what was called for was action. I felt the problem to be getting out of hand and even now, I am very much afraid that our efforts are not increasing as rapidly as the older population itself.

In my thinking on the subject of aging, I came to the conclusion that what was needed was a broad national conference. The circumstances I have discussed led me to introduce a bill for a White House Conference on Aging. As you know, this bill was passed and signed, and next January will see the first White House Conference on Aging. All of those concerned in this field, including myself of course, are hopeful that it will become a milestone on the road of achievement toward the solving of some of the many problems of our aging people.

Now let me turn to the brighter side of the health picture for a few moments.

I believe that the biggest dividends our country will reap in the coming years are in the field of health: better health, longer useful living, and greater freedom from disease than the world has ever seen. These are coming -- for us and our children -- from the tremendous burgeoning of medical research about which I have spoken. The big dividends, in human and economic savings, already being won -- though not widely nor well enough known -- make this prediction sound.

It is probable that the past ten years or so have seen more progress against disease in the United States than in any other period in ours or the world's history.

Proving this are such things as: increased life expectancy, striking reductions in infant and maternal mortality, almost incredible advances in life-saving surgery, new vaccines against killers and debilitators like polio and influenza, and a host of new drugs and treatments that cure or ease the ills of many sufferers from diseases like arthritis, diabetes, high blood pressure, and mental illness.

It is clear that major progress against disease and for better health for all Americans has been won in recent years. It is also equally clear that the crusade through medical research and its progress have been achieved because of the splendid partnership of colleges, universities, voluntary and public interests engaged in the attack.

This College of Pharmacy has already taken its place in the new endeavor of the life sciences. I am confident that your interest and your splendid faculty, student body, and facilities will continue to enlarge the horizons which you have already so well opened to the bright future.