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I want to speak plainly and candidly with you about the system we have in the United States for preventing and treating illness.

It is our health delivery system.

For the past several years we have been applying band-aids and tourniquets to a very sick system.

Our system of training doctors and preventing physical and mental illness surely isn't getting the job done. Its shortcomings and evils are widespread, and no one really knows how to wrestle them back into a semblance of discipline or general usefulness.

Congress is going to have to spend a good deal of time trying to come up with a cure.

In the meantime, you and I will have to put up with a tragic distribution of medical personnel and a threatened shortage of 50,000 doctors, 17,000 dentists and 150,000 nurses.

There will continue to be wholesale inefficiencies in hospitals and high medical bills.

Thousands of men, women and children -- particularly the poor -- will not receive adequate health care.

It is deplorable that while we are one of the richest nations in the world, we have a health record in which we can take little pride.

In 1965, according to the World Health Organization, the United States had 148 physicians for every 100,000 people.

Eight nations of the world had better physician-population ratios.

This country is 14th among industrial countries in death of infants during the first year of life.

Clearly one of our most pressing needs starts with training more doctors, nurses, dentists and paramedical help and putting them to work in the right places.

As the President pointed out in his recent health message to the Congress, more than one-third of the counties in America have a shortage of doctors. And some counties have no doctors at all.

The problem is most acute in poverty areas.

It is common in inner city ghetto areas to have only one physician per 4,000, 5,000 or 6,000 people.

In Los Angeles' Watts section, it is one doctor for 4,100 people.

In Baltimore's inner city it is one doctor for 6,600 people.

In Cleveland's Hough section, one doctor for 4,500 people.

In your neighborhood and mine, the ratio is closer to one-tenth that -- one doctor for 500 or 600 of us.

These facts disturb me deeply, as I'm sure they disturb you.

If we are to have adequate medical care, we need to train more doctors and locate them in areas where they are most needed.

We don't need a preponderance of doctors living in college towns where there are medical schools.

In your own field of mental health, the National Institute of Mental Health budget proposes a \$6.7 million cut in training funds for fiscal 1972 and a planned phase-out of the entire \$34 million program in three years.

As I understand it, this will result in the loss of more than 1,000 hospital residency positions nationally.

The President's rationale for this cutback is that we now have 25,000 psychiatrists so we don't need to train many more.

At a time when we are trying to upgrade health care and do more to help those who have mental problems, we talk about cutting back.

Meanwhile, drug use, alcoholism, crime and delinquency are creating horrible emotional problems.

How does this Administration expect us to handle these problems?

There is little evidence that mental illness is declining. On the contrary, there is evidence that it is increasing.

How can we expect emotional stability when we lock young people into slum housing in ghetto communities? When we give them substandard education? When they are hungry and malnourished?

We can't turn our backs on these people.

This country must face up to the problems of its health system.

During the next 10 years the U. S. population will increase by about 30 million people.

That means we will need more health services. We will need more doctors, nurses, and dentists, paramedical personnel, health technicians, research specialists.

At least half of all the children in this country under the age of 15 have never visited a dentist.

We know that the greatest possibility of correcting handicapped conditions exists during childhood. But what are we doing about it?

Between 75 and 85 per cent of the children of low income families never receive the physical examinations that would discover the handicaps and set treatment courses in action.

Health officials report that many crippled children's projects are making little or no progress in including more handicapped children.

Only 773,000 of the 5.3 million low-income women needing it get any kind of family planning assistance at all.

These facts are tragic and frightening.

America must build and build soon a health care system that guarantees us the right to be healthy.

I believe we can do this if we set our minds to it.

And we had better make up our minds pretty soon, for the stakes are our health and our lives.

I believe that good health should have a much higher priority than the convenience of good roads, high-rise apartments or supersonic aircraft.

We have in this country much of the best medicine, the best education, the best management and the most ingenious problem solvers in the world.

We have tens of thousands of dedicated people who are hard at work in the physical and mental health field.

But let us admit that we have a lot of delivery systems that are fashioned from obsolete procedures. We no longer need a simple shot in the arms or a blood transfusion.

We need a total overhaul of our health delivery system. . . beginning with more manpower.

No amount of money today, tomorrow or next week will buy the thousands of doctors, nurses and technicians needed to make a new start on health care.

Therefore, we must begin to train new medical personnel as one of our first goals.

Then I look for our new health system to do several things:

I think the new system we build must make it possible to protect and preserve good health.

This means that everyone must have periodic physical examinations or a preventive medical check. We need a system that not only cures, but that keeps patients well.

Our health delivery system must be a just system. It must secure the same services and guarantees to every American without regard to age, race, income, location, or so-called social status.

The same health care should be available to someone in a ghetto in Philadelphia as in Rochester, Minnesota, the home of the Mayo Clinic.

We must construct a health system that can change in an orderly manner as progress in medical research and health service organizations are made.

Our new system of health delivery must be reasonably priced and sensibly financed.

In short, we must have a health system for young and old, rich and poor, black and white -- not just an adequate system -- not just a good system. We have the resources and the talent and the skills to build the finest health system in the world.

There is also a newer and menacing health crisis in our country -- the drug crisis.

There comes a time when the facts are so overwhelming that delay and procrastination are intolerable.

To put it on the line: We are facing an epidemic of drug abuse and drug addiction.

We cannot treat this epidemic as if it were an ordinary medical-psychological problem.

There are an estimated 30,000 to 40,000 soldiers in Vietnam who have a serious heroin habit.

Our Vietnam servicemen in alarming numbers come home wounded not only by shell and shrapnel, but tragically maimed by mind-altering drugs, by hard narcotics.

Just as intolerable is the increasing traffic of illicit drugs in the grade schools, in our junior and senior high schools and in our colleges. Yes, and in our corporate businesses.

What are we going to do about it?

There is but one answer: an all-out major offensive, a declaration of war on drug trafficking, drug abuse and drug pushers.

We need not just a war, but a victory.

Obviously we must begin to control the flow of heroin and marijuana into the United States.

Of the total amount of heroin imported into the United States, approximately 80 per cent comes from Turkey and 15 per cent from Mexico.

I urge the President again to immediately undertake such diplomatic and economic measures as he considers appropriate with foreign governments to prevent heroin and other drugs from being illegally imported into the United States.

I also propose that the President, acting under the powers of the Reorganization Act, immediately establish a Drug Cure and Control Authority.

It should be established in conjunction with the National Institutes of Health, consolidating all activities of government that relate to the medical and psychological rehabilitation of drug users and addicts.

We need a coordinated effort to eliminate this problem starting at the Federal level and extending to every state and major city.

Of the estimated 100,000 Vietnam veterans suffering from drug addiction, the Veterans Administration has stated that it has facilities and services to treat only 7,000 of them in 1972.

Obviously the Veterans Administration facilities are inadequate.

I am suggesting that the President ask for an emergency appropriation to care for Vietnam veterans suffering from drug addiction.

I also call on the President to convene a White House Conference on problems of drug use, drug addiction, rehabilitation and remedy, and law enforcement against the drug traffic.

There must be a special effort to strengthen law enforcement agencies -- Federal, State and local -- in their efforts to apprehend and convict those who traffic in the illegal drug trade.

The medical and pharmaceutical professions also must show some self-discipline and self-policing on the promiscuous dispensing and prescribing of dangerous drugs.

There must be a national mobilization against the monster of drug abuse.

Here is where you must take the leadership role and insist that this be done.

This country must face up to the drug problem now.

We can't afford to wait.

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