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sands of young Iowans are proving each toring high school day they're not such bad kids after all. week, while others

Despite talk of sex orgies and pot smoking, four-letter words and unruly draft protests, the vast majority of Iowa's high school and college students never cross the law. Many of them make good deeds an everyday thing.

While state legislators were complaining recently about profanity at a University of Iowa seminar, a "nude-in" at Grinnell college, sexual promiscuity, beer drinking and marijuana use at Des Moines high schools, most students were quitely "doing their thing."

Like forming teams to help river communities erect sandbag dikes.

"These young people do a tremendous job," said Scott County Civil Defense Director Joseph Dooley in Davenport. "Some of them do it as a lark. Others like the exercise. All of them are impressed with the fact they're serving the community.

"In emergencies the kids are much more likely to volunteer than the parents."

Clinton Mayor Harold Domsalla found that out last week. He said great numbers of high school students were turning out to fill sandbags, but adults were reluctant to help with the back-breaking work.

"We are making good progress," he said of Clinton flood control efforts, "but unless we have better response from the adults, we are apt to find ourselves in a serious situation."

In Des Moines about 15 teenage boys responded to an immediate emergency Sunday when they helped firemen douse fiames from a brush fire at Water Works park. The fiames almost reached two stables housing about 100 horses.

"The fire could have been a catastrophe, but it wasn't," commented Lt. Harry Wray of the Des Moines fire department. "Those boys really helped us. It kind of revives your faith in youth."

Mr. and Mrs. Kenneth Cassatt of Ottumwa have faith in youth. Four Ottumwa high school students raised more than \$400 for brain surgery for the Cassatts' 8-year-old boy, Danny.

Elderly men at the Hamilton county home in Webster City have faith in youth. A group of male students at Iowa Central Community college goes to the home regularly to play cards and checkers or just visit with the residents.

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Members of the St. Paul's Episcopal Indian Mission in Sloux City have faith in youth. Some Morningside college students purchased a 54-seat bus, which is used to transport Indian families to various events in the city.

Also at Morningside, a fraternity provides monthly support money for Huynh Lang, a 9-year-old South Vietnamese boy whose father was killed in military action.

While many college students engaged in Easter vacation hijinks in Florida and California, others made better use of the free time.

More than 40 Grinnell college students spent time in Denver, New York, St. Louis and Des Molnes studying the problems of education, housing, recreation, employment and health among the poor. Nineteen Pella Central college students did the same in Cleveland.

A number of University of Northern Iowa students organized Easter egg hunts for poor children.

IOWA UNIVERSITY ROLE

Kathy Starbuck, head of the Hawkeye Area Community Action Program, said one of every 10 volunteers for the program are University of Iowa students. Most of them tutor underprivileged children.

University of Iowa coed Jane Rosborough of Iowa City spends one and a half hours a week at the Pine school, which provides special education for handicapped children. She's now decided to make special education her major field of study.

A number of Iowa State students are tu-

toring high school students two hours a week, while others spend six to 10 hours a week with young delinquents and children from fatherless homes.

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About 20 University of Northern Iowa students meet at least two hours a week with juvenile delinquents in Black Hawk County. Juvenile Court Judge Forest E. Eastman of Cedar Falls said the meetings help raise the goals of the troubled youngsters.

FUNDRAISERS

Students also are energetic fund raisers. Waterloo's East High has made headlines because of its racial troubles, but there's white-black harmony, too. A group of white

and black students currently is trying to raise \$2500 for new playground equipment at a neighborhood center.

A Biafara Fast day at the University of Northern Iowa earlier this year raised \$3,000.

The Des Moines Inter-City Student Council recently presented a \$1,000 check to the Brian O'Donnell fund to help the Central college football player whose spine was severed in a game last fall.

Members of a University of Northern Iowa fraternity have raised \$2,000 over the last two years by throwing a carnival for the Crippled Children's fund. Most of the money has gone to Camp Sunnyside, a facility for handlcapped children near Des Moines.

Hundreds of University of Iowa students are raising money for the Martin Luther King Scholarship fund, which will provide financial aid for needy Negro students who wish to attend the university. Lora Kluever of Atlantic raised several hundred dollars in her hometown last Christmas vacation.

Dr. Ray Pugh, chairman of the men's physical education department at Drake university said too many adults condemn young people for the actions of the small number of trouble-makers while ignoring student's many worthwhile activities.

"You know," he said, "so often a pat on the back is 100 percent better than a slap in the face."

ORDER OF BUSINESS

The PRESIDING OFFICER. Under the previous order, the Chair recognizes the Senator from Kansas (Mr. Dole), for not to exceed 1 hour.

HANDICAPPED AMERICANS

Mr. DOLE. Mr. President, my remarks today concern an exceptional group which I joined on another April 14, twenty-four years ago, during World War II.

It is a minority group whose existence affects every person in our society and the very fiber of our Nation.

It is a group which no one joins by personal choice—a group whose requirements for membership are not based on age, sex, wealth, education, skin color, religious beliefs, political party, power, or prestige.

As a minority, it has always known exclusion—maybe not exclusion from the front of the bus, but perhaps from even climbing aboard it; maybe not exclusion from pursuing advanced education, but perhaps from experiencing any formal education; maybe not exclusion from day-to-day life itself, but perhaps from an adequate opportunity to develop and contribute to his or her fullest capacity.

It is a minority, yet a group to which at least one out of every five Americans belongs.

Mr. President, I speak today about 42 million citizens of our Nation who are

physically, mentally, or emotionally handicapped.

WHO ARE THE HANDICAPPED?

Who are the handicapped?

They are persons—men, women, and children—who cannot achieve full physical, mental, and social potential because of disability.

Although some live in institutions, many more live in the community. Some are so severely disabled as to be homebound, or even bed-bound. Still others are able to take part in community activities when they have access and facilities.

They include amputees, paraplegics, polio victims. Causes of disability include arthritis, cardio-vascular diseases, multiple sclerosis, and muscular dystrophy.

While you may have good vision and hearing, many persons live each day with limited eyesight or hearing, or with none at all.

While you may enjoy full muscle strength and coordination in your legs, there are those who must rely on braces or crutches, or perhaps a walker or wheel chair.

While you perform daily millions of tasks with your hands and arms, there are many who live with limited or total disability in theirs.

And in contrast to most people, thousands of adults and children suffer mental or emotional disorders which hinder their abilities to learn and apply what is learned and to cope adequately with their families, jobs, and communities.

Then there are those who are afflicted with combination or multiple handicaps.

NOT JUST THE HANDICAP

For our Nation's 42 million handicapped persons and their families, yesterday, today, and tomorrow are not filled with "everyday" kinds of problems which can be solved or soothed by "everyday" kinds of answers. Their daily challenge is: accepting and working with a disability so that the handicapped person can become as active and useful, as independent, secure, and dignified as his ability will allow.

Too many handicapped persons lead lives of loneliness and despair; too many feel and too many are cut off from our work-oriented society; too many cannot fill empty hours in a satisfying, constructive manner. The leisure most of us crave can and has become a curse to many of our Nation's handicapped.

Often when a handicapped person is able to work full or part time, there are few jobs or inadequate training programs in his locale. Although progress is being made, many employers are hesitant to hire a handicapped person, ignoring statistics that show he is often a better and more dependable worker.

The result is that abilities of a person are overlooked because of disabilities which may bear little or no true relation to the job at hand. The result to the taxpayer may be to support one more person at a cost of as much as \$3,500 per person a year. To the handicapped person himself, it means more dependency.

STATISTICS

Consider these statistics: Only onethird of America's blind and less than half of the paraplegics of working age are employed, while only a handful of

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about 200,000 persons with cerebral palsy who are of working age are employed.

Beyond this, far too many handicapped persons and their families bear serious economic problems—despite token Government pensions and income tax deductions for a few, and other financial aids. I recall a portion of a letter received recently from the mother of a cerebral palsy child in a Midwestern urban area:

There are the never-ending surgeries, braces, orthopedic shoes, wheelchairs, walkers, standing tables, bath tables and so . we parents follow up on every hopeful on lead in clinics and with specialists; we go up and down paths blindly and always ex-pensively . . . I have talked with four major insurance companies who do not insure or infrequently insure CP children ... al-though our daughter is included in her father's group hospitalization plan, many families are not as fortunate. These are just a few of the problems, compounded by the fact we must try to adequately meet the needs of our other "normal" children. In many cases, some kind of financial assistance would enable us and others like us to provide for our children in our homes, avoiding overcrowding of already overcrowded facilities and further adding to the taxpayer's burden costs for complete care.

There are other problems—availability and access of health care personnel and facilities at the time and place the individual with handicaps needs them. In my own largely rural State of Kansas, many handicapped persons travel 300 miles or more to receive the basic health services they require.

Education presents difficulties for many parents of handicapped children. Although a child may be educable, there may be few, if any, opportunities in the community for him to receive an education. Private tutoring, if available, is often too expensive. Sadly, to date, the Council for Exceptional Children estimates less than one-third of the Nation's children requiring special education are receiving it.

In rehabilitation, the Department of Health, Education, and Welfare said recently 25 percent of America's disabled have not received rehabilitation services and do not know where to seek such help. They estimate that at least 5 million disabled persons may be eligible for assistance.

Other problems the handicapped person faces each day include availability and access of recreation and transportation facilities, architectural barriers in residences and other buildings, and many, many more.

STILL A PROMISING OUTLOOK

We in America are still far from the half-way point of assuring that every handicapped person can become as active and useful as his capacities will allow. The outlook for the handicapped person in 1969, however, is not altogether bleak. Unparalleled achievements in medicine, science, education, technology as well as in public attitudes have cemented a framework in which the handicapped person today has more opportunities available to him than ever before. Consider first what government is doing.

THE GOVERNMENT STORY

The story of what the Federal Government, hand in hand with State governments, is doing to help meet the needs of the handicapped is not one that draws the biggest and boldest headlines. Broadly, the story is a "good" one, consisting of achievements in financial assistance, rehabilitation, research, education, and training of the handicapped—a massive effort to help many disabled Americans live as normal, as full and rich lives as possible.

It is, in part, the story of a man who, at age 21, became a paraplegic after sustaining injuries to his spinal cord and head in an accident while on the job.

In 1968, he joined over 2,300,000 other disabled men and women who have been restored to more productive, useful lives since the State-Federal vocational rehabilitation program began 48 years ago.

In 1964, the young man—a high school dropout with a wife and child—was referred to his State's division of vocational rehabilitation where a thorough program of total rehabilitation began. In addition, he was enrolled in a training school and was graduated as a fully licensed insurance agent.

Today—4 years later—he has his own successful insurance business. He and his wife have built a new home and adopted a baby.

It is a measure of America's concern for its handicapped citizens that even 50 years ago, this story could not have been told.

It takes place now because the Congress and the Federal Government initiated and guided a vital, vigorous program of vocational rehabilitation.

Mr. President, vocational rehabilitation is one of many ways the Federal Government works to aid the handicapped. But none of the Federal programs necessarily reaches or helps every handicapped person.

Nevertheless, the role of the Government has been basically successful in terms of numbers assisted, basic research performed, and the movement of increasingly large numbers of persons into more productive, satisfying channels. It demonstrates what Congress and Federal and State governments are doing to help America's handicapped better participate and achieve.

Mr. President, at this point, I ask unanimous consent to have printed in the RECORD, at the close of my remarks, a brief summary of Federal programs for the handicapped.

The PRESIDING OFFICER. Without objection, it is so ordered.

(See exhibit 1.)

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THE PRIVATE SECTOR

Mr. DOLE. Mr. President, it is in the American tradition and spirit that parallel to Government effort there has developed the vital and growing effort for the handicapped by individuals, business and industry, churches and private, voluntary organizations. It is a herculean task to properly assess the many, farreaching effects of the private sectorin health care, education, employment; in research, rehabilitation, by fundraising drives and through professional organizations and groups for the handi-capped themselves. But it is here in the private sector-with its emphasis on the creativity, concern, and energies of our people-that America has become the

envy of the world. Our private economy and the resources of our people have combined to improve the quality of life in America in ways and for persons the Government could not begin to match or reach.

For the handicapped, their achievements have been no less. I shall not today, detail or single out the achievements of the voluntary groups and private enterprise involved in aiding the handicapped. But let the record show that without the sincerity, scope, and success of their efforts-in public information, employment and training, in upgrading health care and education personnel and facilities, in fundraising and in supporting research to conquer or at least minimize the effects of handicapping conditions-the prospects for the handicapped individuals would not be as hopeful as they are today.

WHERE DO WE GO FROM HERE?

Mr. President, as new public and private programs are developed, as old ones are strengthened and some, perhaps eliminated, as we in Congress allocate comparatively limited funds to help the handicapped, the responsibilities and opportunities loom large before us.

We must insure our efforts and money are not misplaced or misdirected—that they do not just promise, but really do the job.

Are we all doing our best to see that all the knowledge, information, money, and other help is consolidated and available to the handicapped person in the form he can use and at the time and place he most needs it?

Is there sufficient coordination and planning between and among the private groups and the Government agencies to avoid multiplicity and duplication so that we best serve America's handicapped?

Are we sometimes engaged in a numbers race—attending to cases that respond more quickly in order to show results to donors, members, and taxpayers, thus sacrificing some attention which should be focused on the really tough problems?

Many handicapped persons of our Nation are no longer helpless or hopeless because of private and public efforts which have helped them to better help and be themselves.

But the fact remains that some of our Nation's handicapped and their families are attacking the very programs and projects created to help them.

Some are disillusioned and disaffected by the programs.

Too often, the information, the services, the human help and encouragement are not reaching the person for whom they were intended and at the time and place he needs them.

Some sincerely believe there may be better ways we can demonstrate our concern and thereby better achieve for the person with handicaps the independence, security, and dignity to which he is entitled.

I am reminded of a statement given recently by the 1968 president of the National Rehabilitation Association:

It is the person, not the program that is of overwhelming importance. It is not the disability that claims our attention, it is the person with handicaps. It is not the maintenance of prestige of a particular profession that matters. It is the contribution of the profession to solving the complex problems of the individual who has handicaps.

When more of this emphasis on the individual better influences the agencies and professions dealing with the handicapped, I believe we can begin to open new, more meaningful vistas for more persons with handicaps.

We have been involved in efforts which have been creditable to date. Of this, there is no doubt.

But are we doing our best?

A highly respected official of the U.S. Department of Health, Education, and Welfare summed up the problem this way:

I do not feel we are spending our dollars public or voluntary—as effectively as we could. We need to take a whole new look at what is going on, where the service is given. We need to try to design new methods and clearer purposes for our efforts. We need to relate our efforts more closely to the needs of a community, to the needs of its individuals. And we need to try to measure, as concretely and specifically as possible what is actually achieved by our expenditures.

Our handicapped citizens are one of our Nation's greatest unmet responsibilities and untapped resources. We must do better.

* PRESIDENTIAL TASK FORCE

With this in mind, I suggest the creation of a Presidential task force or comnission to review what the public and private sectors are doing and to recommend how we can do better.

Composed of representatives of the public and private sectors, this task force or commission could provide an overview of how to provide the handicapped more help and hope.

Such a task force or commission could provide valuable assistance to Congress and the administration as we develop programs and allocate comparatively limited funds for the handicapped.

It could also help private organizations and voluntary groups conduct their efforts more efficiently and effectively.

The goal of a task force or commission, to achieve maximum independence, security, and dignity for the individual with handicaps, should encompass the total needs of the handicapped, not just employment or education or any other

Rather the task force or commission should concern itself with the whole broad spectrum of needs and services, because as I have pointed out the problems of the handicapped do not begin and end with the handicap itself.

Although there are hundreds of areas a task force or commission could review, I am hopeful, if created, it would include the following subjects:

First. Expansion of employment, transportation, and recreation opportunities for the handicapped.

Second. A directory or central clearinghouse to help inform the handicapped person and his family of available public and private assistance.

There are many helpful handbooks and information sources available. But most are not comprehensive and are more accessible to professionals in the field than to the handicapped who really need the guidance and information.

Third. Removal of architectural barriers.

Many persons cannot secure employment or fill their leisure hours because their disabilities bar use of the facilities. It is just as easy to build and equip buildings so that the handicapped and unhandicapped can use them. The Federal Government is doing this now for federally financed structures.

Fourth. More development of health care on a regional or community basis.

This is a tough, but priority matter and one which cannot be accomplished qulckly or inexpensively. But we must begin to move toward more adequate health care facilities and personnel which serve each person at the time and place he needs them.

Fifth. Better serving the special educational needs of the handicapped.

Both the person and the Nation suffer when any educatable child—handicapped or unhandicapped—does not receive an education.

Sixth. Income tax deductions and/or other financial assistance to extend relief to more handicapped persons and their families.

Seventh. More attention on the family of the handicapped person.

These are the people who often need a degree of encouragement, counseling, and "rehabilitation" themselves. Are there services we should provide to family members whose own lives and resources are deeply affected by the presence of a handicapped person?

Eighth. Increased dialog and coordination between private and voluntary groups and Government agencies to avoid multiplicity and duplication.

What is at stake is not the agency, group, or program. What is at stake is the future of the handicapped person with his own abilities and potentialities.

CONCLUSION

. This, then, Mr. President, is the sum and substance of my first speech in the Senate.

I know of ne more important subject matter, not solely because of my personal interest, but because in our great country some 42 million Americans suffer from a physical, mental, or emotional handicap. Progress has been and will continue to be made by Federal and State governments, by private agencies, and individual Americans; but nonetheless there is still much to be done, if the handicapped American: young, old, black, white, rich, or poor is to share in the joys experienced by others. The task ahead is monumental, but I am confident that there are forces in America ready and willing to meet the challengeincluding, of course, many of my distinguished colleagues who by their acts and deeds have demonstrated their great interest.

EXHIBIT 1

FEDERAL PROGRAMS FOR THE HANDICAPPED DISABLED VETERANS

The program of services for disabled veterans as we know it today began with enactment of the Soldier Rehabilitation Act, which was passed unanimously by Congress June 27, 1918 (P.L. 178, 65th Congress). Under this law, the Federal Board for Vocational Education, created by legislation the year before, was authorized to organize and offer vocational rehabilitation programs for disabled veterans. The program was finally closed out July 2, 1928. In the program's 10-year existence, about 675,000 veterans applied for training. About 330,000 completed their courses satisfactorily and were considered rehabilitated, and about 98 percent of them were employed at the time their training was completed or terminated.

Soon after the U.S. entered World War II, planning began for vocational rehabilitation programs for disabled servicemen returning from that war.

On March 13, 1943, after much discussion over whether the veterans program should be allied with the civilian vocational rehabilitation program, the House passed a bill authorizing a separate veterans' program. It was signed into law 11 days later as P.L. 16, 78th Congress, and covered veterans who served in the armed services between Fearl Harbor Day, December 7, 1941, and the declared end of the war. This legislation set into motion an effort which, before termination, benefitted several hundred thousand disabled veterans.

When the U.S. entered the Korean conflict, the Congress enacted legislation to insure that the men who fought there could receive the same services as World War II veterans. By 1955, about 36,000 Korean veterans had received vocational rehabilitation training for service-connected disabilities.

Later legislation made it possible for veterans disabled after the conclusion of the Korean conflict to receive rehabilitation and other services of the Veterans' Administration. This includes peace-time veterans and the veterans of the Vietnam war. In 1968 alone, 5,192 veterans participated in vocational rehabilitation training, bringing the total number since the program began to 721,000.

Disabled veterans who need prosthetic and sensory alds can obtain them from the Veterans Administration. In 1968 prosthetic appliances and services were furnished to about 465,000 disabled veterans, including 5,400 Vietnam veterans. Approximately \$10.2 million was spent in 1968 for the procurement and repair of prosthetic and other related appliances.

Last year, too, requests for grants were approved to help pay for special automobiles for 2,850 veterans because of loss of hands or feet or severe eye impairment. Expenditures for this benefit in 1968 totalled almost \$3.5 million, bringing the total cost to \$83.6 million since this program was enacted in 1946.

Another special benefit for disabled veterans is the grant program for acquiring specially-adapted housing for those who need braces, crutches, canes, or wheelchairs. Grants totaling \$4.4 million were made to 460 veterans in 1968. Since the program began in 1948, 9,705 grants at a cost of \$92.7 million have been awarded.

With the creation of a new Department of Medicine and Surgery December 31, 1945, the Veterans Administration set in motion a new pattern of care and rehabilitation service for sick, injured and disabled veterans entering VA hospitals. A special rehabilitation service was developed; selected hospitals were specially staffed and equipped for certain disabilities such as spinal cord injury, bilindness, epilepsy, amputation and other conditions.

PROGRAMS FOR DISABLED CIVILIANS

A rehabilitation program for disabled civillans was not enacted simultaneously with the veterans' program because of opposition that it was not practicable and also not the responsibility of the Federal Government.

Two years later—June 2. 1920—President Wilson signed into law the Civilian Vocational Rehabilitation Act (P.L. 236, 66th Congress). The bill, known as the Smith-Fess Act, is one of the oldest grant-in-aid programs for providing services for individuals. At that time, services under the act, were confined to counseling, job train-

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ing, artificial limbs and other prosthetic appliances, and job placement. It provided for an appropriation of \$750,000 for fiscal year 1921 and \$1 million for fiscal years 1922 to 1924 and for payments to States cooperating in vocational rehabilitation of persons disabled in industry. Federal funds were to be matched by the States and were not to be used for institutions for handleapped persons except when individuals entitled to benefits of the act, required special training. In its first year, the vocational rehabilita-

In its first year, the vocational rehabilitation program helped rehabilitate 523 disabled persons. Authorization for the program was renewed by Congress several times until 1935, when the Social Security Act included permanent authorization. This action demonstrated the consensus of congressional thought that vocational rehabilitation should be a permanent program in the United States. Continuing to grow, the program rehabilitated 11,890 persons in 1940.

The entry of the United States into World War II caused a manpower shortage which gave disabled persons who had been rehabilitated an opportunity to show the nation that the disabled could be productive, capable workers. Many employers began calling for more rehabilitated workers than the vocational rehabilitation program, despite its success, was prepared to provide. For more than 20 years since its enactment, the program had been limited in scope and uncertally financed. Some States had excellent programs, but many did not. Development on a national scale had been uneven.

Legislation in 1943 helped solve some of these problems, and other legislation in later years helped to shape it into the more meaningful and effective program it is today.

In 1943 after an attempt to combine the Veterans' and civilian vocational programs was defeated, the Vocational Rehabilitation Act Amendments of 1943 (P.L. 113, 78th Congress) were signed into law. The 1943 law superseded the 1920 legislation and broadened the vocational rehabilitation programmore liberal financing, increased State services, and broadened the concept of rehabilitation.

Rehabilitation services were extended to the mentally handlcapped and the mentally ill. Separate State agencies for the bilnd were incorporated into the Federal-State rehabilitation program. In addition, the now 50 States, and Fuerto Rico were all placed on the same footing with respect to Federal grants. An improved provision of the 1943 law was coverage for specified corrective surgery or therapeutic treatment necessary to reduce or eliminate a disability. Administration of the program was transferred from the Commissioner of Education to the Federal Security Agency. In 1950, 59,597 persons were rehabilitated.

There were problems, however. Partly because the financial system was becoming inadequate and because there was no provision for research, professional training, and other features, essential progress was not being made.

Legislation in 1954, supported by President Elsenhower, was an effort to remedy these problems. While retaining the basic pattern of services, the 1954 amendments (P.L. 565, 83rd Congress) made sweeping improvements. They included provisions for research, demonstration, and training activities. The Federal share was increased on a formula basis, to give greater support to States with relatively large populations and relatively small per capita income. It initiated a new system of project grants for improvement and extension of services. For the first time, the use of Federal grants to expand, modernize and equip rehabilitation facilities and workshops was also authorized.

In 1954, Congress also amended the Hill-Burton hospital survey and construction act to provide Federal grants to help construct rehabilitation facilities.

While in 1960, 88,275 persons were rehabilitated under the vocational rehabilita-

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tion program, by 1965 it had mushroomed to over 135,000 persons.

The 1965 amendments to the vocational rehabilitation act (P.L. 89-333) were designed to bring the public and voluntary agencies into a closer working alliance. It expanded and enlarged the program by broadening its legal and financial base. Services to the severely disabled, the mentally retarded, the deaf, and other handlcapped individuals were increased. A national com-mission on architectural barriers to rehabilitation of the handicapped was established. Federal financial support was extended to local areas for funding more vocational rehabilitation programs. In a drive to build more rehabilitation facilities and workshops, funds were authorized for a comprehensive program to improve the workshops and to construct more vocationallyoriented rehabilitation facilities. Grants to States to conduct comprehensive State-wide planning by agencies designated by the Governors were also provided.

In 1967 Congress took further steps to improve rehabilitation programs for the Nation's disabled. The 1967 amendments (P.L. 90-99) extended and expanded grant authorizations to States for rehabilitation services. Provisions were made to establish a national center for deaf-bilind youth and adults and to extend services to disabled migrants, and their families. In addition, the 1967 amendments required State agencies to provide services to the handicapped without regard to their residence locations.

Finally, just this past year, Congress passed another bill amending the vocational rehabilitation program. The bill increased the Federal share for basic support of State programs from 75 to 80 percent, beginning in fiscal 1970, and established a minimum allotment of \$1 million for each State to increase efficiency, expand services, and reach more clients. The 1968 amendments (P.L. 90-391) also extended programs of grants for innovation, for special projects and for rehabilitation facilities construction and staffing.

The bill established a new vocational evaluation and work adjustment program to serve those who are disadvantaged by such reasons as physical or mental disability, youth, advanced age, low educational attainment, ethnic or cultural factors, or prison or delinquency records, especially in association with poverty.

Evaluation may include preliminary diagnostic studies to determine whether the individual is disadvantaged, has or will have an employment handicap, and needs rehabilitation services. Work adjustment services include appraisal of the individual's pattern of work behavior and development of work habits, work tolerance, and social and behavior patterns suitable for successful job performance.

Establishment of the social and rehabilitation service in 1967 also brought about an expansion of the Federal Vocational Rehabilitation Agency, and its transfer to the Division of Mental Retardation, under the newly-named Rehabilitation Services Administration. In 1961, President Kennedy appointed the President's Panel on Mental Retardation and gave them a mandate to recommend a national plan to combat mental retardation.

The Maternal and Child Health and Mental Retardation Planning Amendments of 1963 (P.L. 88–156) carried out several recommendations of the panel. This act provided funds to assist the States in planning comprehensive State and community programs for the mentally retarded. The Social Security Amendments of 1965 (P.L. 89–97) extended comprehensive planning grants to the States, enabling implementation of their comprehensive plans to combat mental retardation.

The Mental Retardation Facilities and Community Mental Health Centers Construction Act of 1963 (P.L. 88-164) authorlzed grants to Stales to construct facilities to serve the mentally retarded. It also provided grants to assist in construction of university-affiliated facilities to provide an interdisciplinary approach for clinical training of specialized personnel and for demonstration of new service techniques. The Mental Retardation Amendment of

The Mental Retardation Amendment of 1967 (P.L. 90-170) extended these two programs and established a new grant program to pay part of the compensation of professional and technical personnel in community facilities for the retarded, for initial operation of new facilities, or of new services in a facility. Projects have been approved for construction of 242 community facilities to serve over 63,000 retardates.

In 1963, Congress authorized the hospital improvement program to support projects to improve services in State mental retardation institutions. This program is assisting about 100 of the 169 existing facilities.

The Vocational Rehabilitation Amendments of 1968 (P.L. 90-391) authorized projects for rehabilitation of mentally retarded persons not eligible for vocational rehabilitation due to age, severity of handicap, or other reasons. The first appropriation for this program is being requested for 1970.

Today, there are 90 rehabilitation agencies with 800 offices operating nationwide and in four territories. They serve nearly 700,000 handlcapped persons each year at a State-Federal cost of over a half-billion dollars.

PROGRAMS FOR THE BLIND

One of the first pleces of legislation providing Federal aid for handicapped persons was approved March 3, 1879, under the title "An Act To Promote the Education of the Blind." This law set up a perpetual trust fund of United States Bonds, the income from which, in the amount of \$10,000 a year, would go to the American Printing House For the Blind in Louisville, Kentucky, so that books and other materials could be distributed among the schools for the blind throughout the country. Subsequent amendments gradually increased the authorization for this program. In 1956, it was \$410.000 a year. Then in 1961, Congress removed the ceiling from the annual appropriation and made it an amount to be determined by Congress. In fiscal year 1968, the printing house served some 19,000 blind children with books and other teaching materials at a cost of \$1.5 million.

The printing house was originally designed to serve blind children. In 1931, Congress enacted the so-called Pratt-Smoot Act (P.L. 787, 71st Congress) to "Provide Books for the Use of the Adult Blind Residents of the United States." This legislation formed the basis for the Federally-supported library service to the blind vested in the division for the blind and physically handicapped in the Library of Congress.

In 1933, an amendment to the act made available for distribution talking books, or phonograph records, in addition to the Braille books already used.

As commercial firms became interested in producing talking book records, a 1939 amendment gave preference to "nonprofitmaking institutions or agencies whose activities are primarily concerned with the blind." A 1942 amèndment provided maintenance and replacement of talking book machines as well as the talking books.

Then in 1952 Congress enacted an amendment removing the word "adult" from the act, clearing the way for blind children to also benefit from the program. In 1966, another amendment extended the program to include other physically handlcapped persons. In 1968, 140,000 handlcapped readers received catalogs from which to select reading matter and circulation of the containers, and reels, and volumes, was over 5.265.000. The expenditure for the program in 1968 was \$5.6 million.

One aspect of the vocational rehabilitation program is the emphasis given to adjustment,

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training, and placement of blind persons in competitive employment. Attention was first focused on this severely disabled group as a result of the passage of P. L. 113 in 1943.

The amendments to the vocational rehabilitation act in 1954 made a limited amount of training and research money available, so employment opportunities for bilnd workers have been greatly expanded. In 1968, 6,800 bilnd and 12,000 visually-limited persons were placed in a variety of occupations. In addition, special workshops for the blind now employ approximately 5,000.

Another phase of employment for the blind was made available through the provisions of the Randolph-Sheppard Act (P. L. 732) in 1936 which gave preference for operation of snack bars, vending stands, and other facilities of Federal properties to qualified blind persons. Installation of facilities, training, and supervision of blind operators are responsibilities of the State licensing agencies. In 1968, 3.259 blind persons earned \$16.6 million, an average of \$5,580 per operator.

EDUCATION OF THE HANDICAPPED

In 1864 President Abraham Lincoln signed into law a bill establishing a national college for the deaf later to be known as Gallaudet College, and in 1879, Congress enacted legislation giving federal financial aid to the American Printing House for the Blind. Unfortunately, these two programs were the extent of Federal aid for education of handicapped children for the next three quarters of a Century.

In 1954 Congress enacted the cooperative Research Act (P. L. 83-531) for research grants in education. In 1957, \$675,000 of the \$1 million appropriated under the Act was earmarked to be spent on research on education of the mentally retarded.

In 1958 Congress passed the captioned films for the Deaf Program (P. L. 85-905). Originally aimed at cultural enrichment and recreation, amendments in 1962 and 1965 broadened the program into a flexible, comprehensive instructional program for the deaf, including teacher training. 1967 legislation extended the program to include all handicapped children requiring special education.

Legislation in 1958 (P.L. 85-926) authorized grants to educational institutions to help train professional personnel to train teachers of mentally retarded children. In 1961, Congress enacted legislation authorizing support for training classroom teachers of the deaf (P.L. 87-276).

(P.L. 87-276). In 1963, these programs for training personnel to work with handicapped children were expanded to include teachers of children who are "hard of hearing, speech impaired, visually handicapped, seriously emotionally disturbed, crippled, or other health impaired," as well as mentally retarded and deaf. The same legislation (P.L. 88-164) authorized grants for research and demonstration projects in education of handicapped children, A 1965 amendment to this program authorized construction, equipping, and operation of facilities for research and related purposes.

The year 1965 saw enactment of a great body of legislation to ald in the education of handicapped youngsters. The Elementary and Secondary Education Act (P.L. 89-10) provided programs through local education agencies to reach handicapped children in low income areas. It also provided support for supplemental services including special instruction for the handicapped and for innovative programs. A 1965 amendment to this act (P.L. 89-313) provided grants to State agencies directly responsible for educating handicapped children. This brought assistance to State-operated or State-supported schools for the deaf, retarded, etc., not eligible under the original act.

Also in 1965 Congress enacted the National Technical Institute for the Deaf Act (PL. 89-36) authorizing establishment and operation of a postsecondary technical training facility for young adults who are deaf. This Institute, which is being established at the Rochester Institute of Technology, Rochester, New York, complements Gallaudet College, which provides a liberal arts program.

1966 saw more legislation for education of the handicapped. There was the Model Secondary School for the Deaf Act (P.L. 89-694) which created a model high school as part of Gallaudet College to serve deaf children of the Washington, D.C. area. Planned to offer a full curriculum and the normal extracurricular activities of high schools, this model high school for deaf children may lead to formation of other similar schools throughout the country.

Also in 1966, Congress passed further amendments (P.L. 89-750) to the Elementary and Secondary Education Act, which authorized funds to assist the States in improvement of programs and projects for the education of handicapped children at preschool, elementary, and secondary levels. The 1966 amendment also required establishment of a National Advisory Committee on Handicapped Children to make recommendations concerning programs carried on for handicapped children by the Office of Education.

In addition, the Congress undertook a bold precedent, establishing the Bureau of Education for the Handicapped to administer all Office of Education programs for the handicapped. The Bureau of Education for the Handicapped has made major strides in stimulating a local, State and Federal partnership for improvement of education for handicapped children.

The 1967 amendments to the Elementary and Secondary Education Act further broadened and extended the program of services to the handicapped. Regional resource centers were authorized to determine special education needs of handicapped children referred to them, develop educational programs to meet these needs, and assist schools in providing such programs. The 1967 legislation also authorized establishment and operation of centers for deaf-blind children, programs designed to improve recruiting of educational personnel and to improve dissemination of information on educational opportunities for the handicapped.

The 1967 Mental Retardation amendments (P.L. 90–170) provided support for training professional personnel and for research and demonstration activities in physical education and recreation for mentally retarded and other handicapped children.

The most recent piece of legislation for education of handlcapped children was enacted in the Handicapped Children's Early Education Assistance Act of 1968 (P.L. 90 538). It authorizes grants to public and pri-vate agencies and organizations for estabblishment of experimental preschool and early education programs which show promise of developing comprehensive and innovative approaches for meeting special problems of handicapped children. This legislation recognizes that the most rapid learning period comes in the years before school traditionally begins. The programs engendered by this legislation should do much to identify handicapped children early and to help give them a better start toward full, productive lives.

EMPLOYMENT OF THE HANDICAPPED

Once a handicapped person is rehabilitated and able to support himself, he often encounters tremendous difficulties in securing meaningful employment. A case is not considered closed, in the vocational rehabilitation program, until the disabled person is on the job, and has satisfactorily adjusted in the eyes of both the disabled person and his employer.

For many reasons, employers are reluctant to hire the handicapped. The Federal Government is trying to change this attitude among employers and the public and has met with some success.

In addition to the placement program of

the vocational rehabilitation program, the Bureau of Employment Security, through State and local employment services, provides direct employment counseling and assistance to physically and mentally handicapped persons seeking work. Public information and educational activities directed toward employers and labor organizations are part of the effort made under these programs. Selective placement techniques are also used to help match the physical demands of a job to the physical capacities of a worker.

The President's Committee on Employment of the Handicapped, a voluntary group of about 600 men and women, has made great accomplishments in the past 20 years to promote greater employment opportunity for qualified handlcapped men and women. Operating within the Department of Labor and within a budget that until last year had a ceiling of only a half million dollars, the Committee maintains working relationships with the 53 cooperating governor's committees, and with the various Federal Departments, Agencies, and Commissions. The Com-mittee works to help assure that the handicapped are considered for their abilities, and to help facilitate development of maximum employment opportunities for them. The peak of its activity, although it goes full steam throughout each year, is in the first full week of October, National Employ the Physically Handicapped Week.

The Department of Labor is also involved in training the handlcapped. Enactment of the Manpower Development and Training Act in 1962 widened the opportunity for the Department to develop meaningful training programs for handlcapped workers. It was estimated that by the summer of 1966, well over 25,000 handlcapped persons had received training under MDTA and over 20,000 of those had already obtained jobs.

HOUSING FOR THE HANDICAPPED

The Federal Government is involved in several programs concerned with housing for the handicapped or disabled. The Housing Assistance Administration of the Department of Housing and Urban Development provides loans and contributions to local housing authorities which, in turn, provide decent, safe, and sanitary housing for low-income families at rent they can afford. Handlcapped persons of limited income are among those eligible for benefits under this program, established by the U.S. Housing Act of 1937 (P.I. 75-412).

The Housing Assistance Administration also provides low-interest, long-term loans to private nonprofit corporations, consumer cooperatives, and public agencies for new and renovated rental housing, dining facilities, community rooms, and workshops for the elderly and the handicapped whose incomes are above the levels set for admission to public housing projects, but below that needed to pay rents for available private housing. This program was enacted by the Housing Act of 1959 (P.L. 86-372).

The Housing Act of 1961 (P.L. 87–70) established a grant program for public and private groups to develop new or improved means of providing housing for low-income persons, the physically handicepped, and families. Demonstration of means to provide housing is specifically authorized by this legislation.

The Housing and Urban Development Act of 1965 (P.L. 89-117) authorized rent supplement payments to help assure privatelyowned housing is available to low-income individuals or families of low income. The handicapped are among those eligible for this program if their income does not exceed the maximum amount established in the area for occupancy of federally-aided, lowrent public housing.

ARCHITECTURAL BARRIERS

Related to housing. Congress in 1968, passed legislation to insure that certain buildings financed with Federal funds are April 14, 1969

designed and constructed to be accessible to the physically handlcapped (P.L. 90-480). This legislation applies to any public buildings constructed in whole or part with Federal funds. The only exceptions are privatelyowned residences and buildings or facilities on military installations intended primarily for use by able-bodied military personnel.

This legislation was passed after recommendations were made by the National Commission of Architectural Barriers to Rehabilitation of the Handicapped, authorized by the Vocational Rehabilitation Amendments of 1965 and appointed by the President in 1966.

The legislation should spur States and local governments to enact legislation and regulations so that all public buildings, not only those built with Federal funds, will be so constructed that the disabled will be able to fully utilize them. Some 45 States have laws or resolutions already, but many of them are not strong enough to have much effect. Only a few municipalities thus far have taken similar action.

ASSISTANCE FOR THE NEEDY BLIND AND TOTALLY DISABLED

The Federal Government is involved in programs of support for needy blind persons and for permanently and totally disabled persons through social security legislation enacted in 1935 and 1950. Under these public assistance programs, the Government provides grants to States and the States, in turn, provide three forms of assistance: cash payments for food, clothing, shelter, and other basic needs; medical or remedial care recognized under State law, through payments directly to hospitals, physicians, dentists, and other providers of care; and social services, such as counseling on personal problems, help in finding better housing, referral to community resources, and homemaker services.

These programs are available to needy blind persons so that they may attain or retain their self-support or self-care capability and to people over age 18 who cannot support themselves because they have a permanent and total physical or mental impairment.

In 1967 the number of persons receiving ald to the blind in the States and territories with programs in operation totaled over 82,000. Combined, total expenditure of local, State, and Federal funds for this purpose was over \$86.9 million, and the average payment for all individuals participating nationwide was \$90.45 per month. Under the program for the permanently and totally disabled, there were 646,000 recipients receiving a total of \$573.5 million, averaging \$80.60 per monthly payment.

SOCIAL SECURITY DISABILITY INSURANCE

The basic social security program which provides benefits to the worker when he retires also provides cash benefits to covered disabled workers under age 65 and to their dependents for as long as the worker is unable to engage in "substantial gainful activity." In 1967, over two million disabled workers and dependents received social security cash benefits totalling over \$147.8 million. Under the 1965 social security amendments, use of trust funds was authorized to pay the cost of rehabilitation services provided by the State vocational rehabilitation agencies to certain disability insurance beneficiaries.

The "Medicare" Act passed in 1965 included a little-publicized but valuable new arrangement for restoring more disabled people: It authorized the Social Security Administration to transfer from trust funds for retirement and disability benefits certain amounts for vocational rehabilitation services to disabled workers receiving social security benefits. A limit of one percent of the total benefits being received placed a control on how many funds could be transferred each year. These funds are used by the Federal-State

Vocational Rehabilitation Program to pay for services to disabled beneficiaries, most of whom can be restored to activity and work, thereby resuming their payments into the trust funds. For this year, \$18,077,000 was transferred for this work.

SUMMARY

The above Federal programs have been described briefly and quite possibly some programs may have been unintentionally overlooked in our research.

At any rate, the summary may be of assistance to those interested in the problems and programs concerning handicapped Americans.

Mr. PEARSON. Mr. President, I should like to express great pride in, and ask to be associated with this most excellent statement just made by my distinguished colleague. He speaks of a problem which, in his own words, affects every person in our society and every fiber of our Nation.

Here is, then, a definition coupled with a solution and, treated with sympathy and yet with reason, an approach, I am sure, that will yield to progress.

I think that one point he so clearly set forth is the challenge. That is when he asked all of us:

Are we doing our best to see that all the knowledge, the information, and money, and other help is consolidated and available to the handicapped person in the form he can best use and in the time and place he needs it most?

I think he answered that question by saying a little later on that we must do better. He makes a proposal which is specific in its recommendations, and is an enormous contribution, I think, to a very great problem.

I look forward to the other proposal that he shall be making in the days ahead in regard to what is, really, one of the great problems facing this country in the last third of the 20th century.

I congratulate my distinguished colleague. I am very much pleased to be here today when he makes his first speech in the Senate.

Mr. COTTON. Mr. President, will the Senator from Kansas yield?

Mr. DOLE. I yield.

Mr. COTTON. Mr. President, I should like to join my friend, the other distinguished Senator from Kansas (Mr. PEAR-SON), in commending the distinguished Senator from Kansas (Mr. Dol. for his contribution this afternoon.

I have served in this body many years. I do not know that I have ever heard a new Senator make a greater contribution in what he characterizes as his first speech in this body.

He talked on a subject which is close to the hearts of all Americans. This country has grown so fast, with over 200 million people in it, with a huge Government requiring complicated machinery, that it is a supertask for us to try to see that some of the less fortunate people in this country are not ground under the wheels of the massive instrument that we have played our part in creating.

I predict for the junior Senator from Kansas a long and distinguished career. I venture to say that although his contributions, I am sure, will be great, he can always remember with pride the fact that his first contribution was on a subject which is so important to all Americans.

As a Member of the Senate, I join in congratulating the distinguished Senator from Kansas on the masterly speech he has just delivered.

Mr. MATHIAS. Mr. President, will the Senator from Kansas yield?

Mr. DOLE. I yield.

Mr. MATHIAS. Mr. President, I should like to join the senior Senator from Kansas (Mr. PEARSON) and the Senator from New Hampshire (Mr. Cotton) in commenting on the speech which the junior Senator from Kansas (Mr. DOLE) has just completed-a speech which addresses itself to a problem which is becoming increasingly felt as one of the serious problems in America today. The subject has a humanitarian impact because it deals with the problems of the individual, but it also has a social and economic impact because it affects the way in which we, as a nation, deal with problems that touch the lives of so many of our citizens.

The Senator has treated the subject in great depth, with thoroughness, and with understanding. I can only say that this is typical of him. He and I entered the other body on the same day. We came to the Senate on the same day. I have known him very well in the intervening years.

The remarks of the junior Senator from Kansas today are evidence of the promise of the enormously valuable service which he will render in this body as the years pass by.

I wish to express my appreciation to him for his valuable contribution.

Mr. DOLE. Mr. President, I thank my distinguished colleagues for their patience and their kind remarks.

Mr. HRUSKA. Mr. President, the junior Senator from Kansas is to be commended for his statement to day on problems faced by the handicapped. This statement, in many ways, typifies the man who made it. It is well prepared, thoughtful, and above all, it is a warm and human examination of the problem.

The Senator from Kansas, during his four terms in the House of Representatives, established himself as a man who truly cares about people and does his best to aid them. His emphasis is not on statistics, but on the people involved. This is as it must be. The dollars spent, the programs generated, mean nothing unless they benefit those in need.

The problem of aiding the physically, mentally, or emotionally handicapped is not one to be solved by government alone. In the end it is people who must help. People will provide jobs, training, and dignity. A partnership of government, local and national, and the private sector of our economy is the wise way of approaching the question of assistance to the handicapped. It is the way highlighted by the able Senator from Kansas.

There is one final point I wish to make, Mr. President. In mentioning specific causes of disability, there is one the Senator from Kansas left out—service to our Nation. A great number of our citizens have made the sacrifice of health and well-being for the cause of peace. The distinguished Senator knows well the problems of which he speaks today. He knows the vitality that remains in the human soul despite injury to the body. He has demonstrated how well a