

REMARKS OF SENATOR HUBERT H. HUMPHREY  
NATIONAL COUNCIL OF SENIOR CITIZENS INC.

NATIONAL LEGISLATIVE CONFERENCE

Washington, D. C.

June 8, 1977

It is a pleasure to be among my fellow senior citizens. In 1949, at the age of 38, I introduced my first Senate bill in the 81st Congress to improve the quality of the lives of our elderly citizens. My perspective then was quite different from now, having just celebrated my 66th birthday.

But the need was there then, and the need still remains. Much progress has been made, but much more remains to be done. We still do not have a comprehensive national policy on aging. But by the end of this century, there may be over 35 million Americans 65 years of age or older.

America has a dismal record in caring for its aged. Over a century ago, the nation was awakened to a growing population of older citizens, many of whom were physically ill and uncared for. In 1854, Congress responded by setting aside ten million acres of land for use in their care. President Franklin Pierce vetoed this legislation.

From Mr. Pierce's veto until 1935, the federal government did little or nothing to help its elderly. In that year, Congress passed the Social Security Act which provides basic income maintenance for most Americans. In the mid-1960's, through Medicare and Medicaid, the federal government also became responsible for assuring health care for both the aging and the poor.

Looked at historically, this is hardly an impressive record.

There is a pressing need now to assure adequate income; to improve health care and make it more readily available; to expand housing opportunities; to improve social services; to provide employment opportunities and develop a national retirement policy responsive to the needs of older persons; and to develop policies to overcome age discrimination in all areas of our society.

America needs all the talent, experience and wisdom it can muster to achieve a better life for all our citizens. And the elderly need a range of services -- not just sufficient income. The elderly must be brought back into the mainstream of national life.

This nation requires not just more money and services, but a profound change of mind and heart. Americans must come to respect and respond with dignity to the just claims of both young and old.

Other generations linked age and maturity. Gray hairs were the sign of growing wisdom. Robert Browning said:

"Grow old along with me  
The best is yet to be  
The last of life for which the first was made."

Today the emphasis is on youth, not on age and longevity. Ours is the "now" generation. In the country of the young, age becomes a sign of obsolescence, not of maturity.

There are many misconceptions about aging. Old age generally is associated with illness. We constantly need reminding that old age is not a disease.

We find negative attitudes toward aging everywhere. As a consequence, the elderly are becoming a more vocal and civic-minded political force. They are uniting to protect themselves against public indifference.

Organizations such as the National Council of Senior Citizens have given America's senior citizens a public voice. "Senior Power" is a political force to be reckoned with.

Yesterday most of you "fanned out" across Capitol Hill to remind your Senators and Representatives of your needs. I compliment you and I thank you for exercising your Constitutional right to lobby your lawmakers on behalf of all older Americans.

I realize that a trip to this National Legislative Conference is a financial and personal sacrifice for many of you. But I want to assure you that your representatives in Washington appreciate your bringing your concerns to their attention in such a clear and demonstrative fashion.

I believe, as you do, that older Americans should be able to live in dignity, independence and security. I have worked over the years to provide older persons with better nutrition and medical care, with improved access to transportation at reasonable rates, with adequate housing and services for those who are disadvantaged.

As America becomes more aware of the needs of its older citizens, we must redouble our efforts to guarantee their rights in this society.

The last eight years of the Nixon-Ford Administration witnessed some "backsliding" in meeting the needs of older Americans. For eight long years, most of the major programs to help the elderly which had been passed by the Congress were turned back.

It was as though the senior citizens had been exiled from the mainstream of American life -- their needs and problems ignored by the Executive Branch of the United States Government.

With the election of President Jimmy Carter, older Americans felt that the long exile had ended. Their feelings of confidence are well-founded. Since January 20, this Administration has moved forward on more fronts to advance the cause of the elderly than did the previous Administration in eight years.

Most important of President Carter's initiatives in this area are his plan to strengthen the Social Security system and his proposal to put an end to skyrocketing health care costs.

In 1935, the House Ways and Means Committee recommended the Social Security system as a means of assuring "support for the aged as a right rather than a public charity, and in amounts which will insure not merely subsistence but some of the comforts of life." We must make this a reality.

President Carter apparently is headed in that direction. His proposal addresses the short- and long-term problems of the Social Security system in a creative and innovative way.

Briefly, the short-term problems are that the high unemployment of recent years has curtailed Social Security revenues; but benefits have risen with inflation, and since 1975 expenditures have exceeded income. The long-term difficulty is that the Social Security system faces an estimated deficit of 8.2 percent of taxable payroll over the next 75 years.

I will let the expert on this subject, Mr. Califano, provide you with the specific details and the overall goals the President hopes to accomplish in this area.

I applaud the President's initiatives in setting up a study group on national health insurance and in his cost-containment policies.

Health care worries are an anxiety of all Americans, but especially of the elderly.

In the current fiscal year, Americans have spent \$160 billion on health care, almost nine percent of the GNP. But this burden is not evenly distributed. Recent figures show that Americans over 65 account for 44 percent of hospital costs, 29 percent of personal health care costs, and 25 percent of prescription costs.

"A lot of Americans would rather die than get seriously sick," declared BUSINESS WEEK. "For millions, going to the hospital means going broke or close to it."

It was precisely for this reason that in 1949 I introduced a bill to make health insurance available under Social Security. It required repeated legislative efforts and a growing public awareness to finally get such a bill enacted into the program we know today as Medicare.

But Medicare and Medicaid are only partial answers to the growing problems of national health. In 1965, before Medicare, public funds paid only 30 percent of the health costs of the elderly, as compared to 61 percent in 1975.

Yet Medicare beneficiaries now pay more -- in deductibles and co-insurance -- than they did when Medicare was enacted. This is because of rising costs -- hospital costs alone have more than quadrupled since 1965.

The burden of out-of-pocket costs and supplemental insurance premiums severely strains limited retirement incomes. But the biggest fear of older Americans is the long, costly illness that would reduce them to penury.

I have long supported national health insurance. I am a cosponsor of Senator Kennedy's proposal, S. 3, which would include catastrophic coverage. But the real impetus to such a national program will be the Administration's proposals.

The details of financing, access to care, coverage, delivery of services and cost must then be worked out in an exchange among Congress, the Executive branch, the general public and health care providers.

In the meantime, we must continue to address serious problems in our present system. Congress must confront the issue of soaring costs and the incidence of fraud.

As you know, there are two major cost containment proposals now under consideration: the Administration proposal to clamp a nine percent lid on hospital revenue increases, and Senator Talmadge's longer-range approach to curbing costs through prospective payments and incentives. There obviously is plenty of room for better management and new methods of health care delivery.

Interim measures may be required to expand Medicare to include outpatient drugs, home health care and catastrophic coverage. One great advantage of national health insurance is that it may permit a better balance among acute, preventive and chronic health care.

But the concerns of older Americans do not stop at improvements in health care and social security income.

Many Americans are both willing and able to work after age 65. I have supported legislation to prohibit age discrimination in employment, and I have urged that meaningful employment opportunities -- on both a paid and volunteer basis -- be made available so that the skills and experience of our older population can be utilized for the general good of society.

In addition, I support the development of job training programs to prepare women, who for one reason or another, are thrust unprepared into the job market. I have joined in sponsoring the Displaced Homemakers Act of 1977, which would address this problem.

Finally, we need a major effort to understand the increasingly important role of older Americans and to dispel some of the outmoded concepts which continue to exist.

We have a vast, unfinished agenda, including greater access to transportation and recreation and cultural activity, better housing, safe neighborhoods, consumer protection, and continuing educational and employment opportunities.

Centuries ago, the Psalmist cried out:

"Cast me not off in the time of old age; forsake me not when my strength faileth."

The well-being of our American civilization can be measured by our sensitivity to this plea and our recognition of the contributions of older persons in our society.

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REMARKS OF SENATOR HUBERT H. HUMPHREY

NATIONAL COUNCIL OF SENIOR CITIZENS INC.

NATIONAL LEGISLATIVE CONFERENCE

WASHINGTON, D. C.

JUNE 8, 1977

Bill Hutton

Nelson Quirkshank. - Pres Carter  
appointed

Ch. of the Federal Council on Aging

It IS A PLEASURE TO BE AMONG MY FELLOW SENIOR CITIZENS.

IN 1949, AT THE AGE OF 38, I INTRODUCED MY FIRST SENATE BILL

IN THE 81ST CONGRESS TO IMPROVE THE QUALITY OF THE LIVES OF OUR

elderly citizens <sup>medicare</sup> MY PERSPECTIVE THEN WAS QUITE DIFFERENT FROM

NOW, HAVING JUST CELEBRATED MY 66TH BIRTHDAY.

But THE NEED WAS THERE THEN, AND THE NEED STILL REMAINS.

MUCH PROGRESS HAS BEEN MADE, BUT MUCH MORE REMAINS TO BE

DONE. WE STILL DO NOT HAVE A COMPREHENSIVE NATIONAL POLICY ON

AGING. BUT BY THE END OF THIS CENTURY, THERE MAY BE OVER 35

MILLION AMERICANS 65 YEARS OF AGE OR OLDER.

AMERICA HAS A DISMAL RECORD IN CARING FOR ITS AGED. Over A  
CENTURY AGO, THE NATION WAS AWAKENED TO A GROWING POPULATION OF

OLDER CITIZENS, MANY OF WHOM WERE PHYSICALLY ILL AND UNCARED FOR.

In 1854, CONGRESS RESPONDED BY SETTING ASIDE TEN MILLION ACRES

OF LAND FOR USE IN THEIR CARE. PRESIDENT FRANKLIN PIERCE

VETOED THIS LEGISLATION,

*President*  
FROM ~~MR.~~ PIERCE'S VETO UNTIL 1935, THE FEDERAL GOVERNMENT

DID LITTLE OR NOTHING TO HELP ITS ELDERLY. IN THAT YEAR, CONGRESS

PASSED THE SOCIAL SECURITY ACT WHICH PROVIDES BASIC INCOME

MAINTENANCE FOR <sup>MANY</sup> ~~THE~~ AMERICANS. IN THE MID-1960'S, THROUGH

MEDICARE AND MEDICAID, THE FEDERAL GOVERNMENT ALSO BECAME RESPONSIBLE

FOR ASSURING HEALTH CARE FOR BOTH THE AGING AND THE POOR.

LOOKED AT HISTORICALLY, THIS IS HARDLY AN IMPRESSIVE RECORD.

*Here as the program for the future*

THERE IS A PRESSING NEED NOW TO ASSURE ADEQUATE INCOME; TO

IMPROVE HEALTH CARE AND MAKE IT MORE READILY AVAILABLE; TO

EXPAND HOUSING OPPORTUNITIES; TO IMPROVE SOCIAL SERVICES; *Feeding*

*Program*

TO PROVIDE EMPLOYMENT OPPORTUNITIES AND DEVELOP A NATIONAL

RETIREMENT POLICY RESPONSIVE TO THE NEEDS OF OLDER PERSONS;

AND TO DEVELOP POLICIES TO OVERCOME AGE DISCRIMINATION IN ALL

AREAS OF OUR SOCIETY.

h AMERICA NEEDS ALL THE TALENT, EXPERIENCE AND WISDOM IT CAN  
MUSTER TO ACHIEVE A BETTER LIFE FOR ALL OUR CITIZENS, AND THE

ELDERLY NEED A RANGE OF SERVICES -- NOT JUST SUFFICIENT INCOME.

h THE ELDERLY MUST BE BROUGHT BACK INTO THE MAINSTREAM OF NATIONAL

LIFE.

h THIS NATION REQUIRES NOT JUST MORE MONEY AND SERVICES, BUT A

PROFOUND CHANGE OF MIND AND HEART. AMERICANS MUST COME TO RESPECT

AND RESPOND WITH DIGNITY TO THE JUST CLAIMS OF BOTH YOUNG AND OLD.

h OTHER GENERATIONS LINKED AGE AND MATURITY. GRAY HAIRS WERE

THE SIGN OF GROWING WISDOM. THE POET ROBERT BROWNING SAID:

"GROW OLD ALONG WITH ME

THE BEST IS YET TO BE

THE LAST OF LIFE FOR WHICH THE FIRST WAS MADE."

TODAY THE EMPHASIS IS ON YOUTH, NOT ON AGE AND LONGEVITY.

OURS IS THE "NOW" GENERATION. IN THE COUNTRY OF THE YOUNG, AGE

BECOMES A SIGN OF OBSCOLESCENCE, NOT OF MATURITY.

THERE ARE MANY MISCONCEPTIONS ABOUT AGING. OLD AGE GENERALLY

IS ASSOCIATED WITH ILLNESS. WE CONSTANTLY NEED REMINDING THAT OLD

AGE IS NOT A DISEASE.

WE FIND NEGATIVE ATTITUDES TOWARD AGING EVERYWHERE. AS A

CONSEQUENCE, THE ELDERLY ARE BECOMING A MORE VOCAL AND CIVIC-MINDED

POLITICAL FORCE. THEY ARE UNITING TO PROTECT THEMSELVES AGAINST

PUBLIC INDIFFERENCE.

ORGANIZATIONS SUCH AS THE NATIONAL COUNCIL OF SENIOR CITIZENS  
HAVE GIVEN AMERICA'S SENIOR CITIZENS A PUBLIC VOICE. "SENIOR POWER"  
IS A POLITICAL FORCE TO BE RECKONED WITH.

YESTERDAY MOST OF YOU "FANNED OUT" ACROSS CAPITOL HILL TO  
REMIND YOUR SENATORS AND REPRESENTATIVES OF YOUR NEEDS. I

COMPLIMENT YOU AND I THANK YOU FOR EXERCISING YOUR

CONSTITUTIONAL RIGHT TO LOBBY YOUR LAWMAKERS ON BEHALF OF ALL  
OLDER AMERICANS.

I REALIZE THAT A TRIP TO THIS NATIONAL LEGISLATIVE CONFERENCE  
IS A FINANCIAL AND PERSONAL SACRIFICE FOR MANY OF YOU. BUT I WANT  
TO ASSURE YOU THAT YOUR REPRESENTATIVES IN WASHINGTON APPRECIATE  
YOUR BRINGING YOUR CONCERNS TO THEIR ATTENTION IN SUCH A CLEAR  
AND DEMONSTRATIVE FASHION.

I BELIEVE, AS YOU DO, THAT OLDER AMERICANS SHOULD BE ABLE TO  
LIVE IN DIGNITY, INDEPENDENCE AND SECURITY. I HAVE WORKED OVER  
THE YEARS TO PROVIDE OLDER PERSONS WITH BETTER NUTRITION AND  
MEDICAL CARE, WITH IMPROVED ACCESS TO TRANSPORTATION AT REASONABLE  
RATES, WITH ADEQUATE HOUSING AND SERVICES FOR THOSE WHO ARE  
DISADVANTAGED.

AS AMERICA BECOMES MORE AWARE OF THE NEEDS OF ITS OLDER  
CITIZENS, WE MUST REDOUBLE OUR EFFORTS TO GUARANTEE THEIR RIGHTS  
IN THIS SOCIETY.

THE LAST EIGHT YEARS OF ~~THE NIXON FORD ADMINISTRATION~~  
WITNESSED SOME "BACKSLIDING" IN MEETING THE NEEDS OF OLDER  
AMERICANS. FOR EIGHT LONG YEARS, MOST OF THE MAJOR PROGRAMS TO  
HELP THE ELDERLY WHICH HAD BEEN PASSED BY THE CONGRESS WERE  
TURNED BACK.

↳ IT WAS AS THOUGH THE SENIOR CITIZENS HAD BEEN EXILED  
FROM THE MAINSTREAM OF AMERICAN LIFE -- THEIR NEEDS AND  
PROBLEMS IGNORED BY THE EXECUTIVE BRANCH OF THE UNITED STATES  
GOVERNMENT.

↳ WITH THE ELECTION OF PRESIDENT JIMMY CARTER, OLDER  
AMERICANS FELT THAT THE LONG EXILE HAD ENDED. ↳ THEIR FEELINGS  
OF CONFIDENCE ARE WELL-FOUNDED. ↳ SINCE JANUARY 20, THIS  
ADMINISTRATION HAS MOVED FORWARD ON <sup>many</sup> MORE FRONTS TO ADVANCE THE  
CAUSE OF THE ELDERLY. ~~THAN DID THE PREVIOUS ADMINISTRATION IN~~  
~~EIGHT YEARS.~~

↳ MOST IMPORTANT OF PRESIDENT CARTER'S INITIATIVES IN THIS  
AREA ARE HIS PLAN TO STRENGTHEN THE SOCIAL SECURITY SYSTEM AND  
HIS PROPOSAL TO PUT AN END TO SKYROCKETING HEALTH CARE COSTS.

In 1935, THE HOUSE WAYS AND MEANS COMMITTEE RECOMMENDED  
THE SOCIAL SECURITY SYSTEM AS A MEANS OF ASSURING "SUPPORT FOR  
THE AGED AS A RIGHT RATHER THAN A PUBLIC CHARITY, AND IN AMOUNTS  
WHICH WILL INSURE NOT MERELY SUBSISTENCE BUT SOME OF THE COMFORTS  
OF LIFE." WE MUST MAKE THIS A REALITY.

PRESIDENT CARTER APPARENTLY IS HEADED IN THAT DIRECTION.  
HIS PROPOSAL ADDRESSES THE SHORT- AND LONG-TERM PROBLEMS OF  
THE SOCIAL SECURITY SYSTEM IN A CREATIVE AND INNOVATIVE WAY.

BRIEFLY, THE SHORT-TERM PROBLEMS ARE THAT THE HIGH  
UNEMPLOYMENT OF RECENT YEARS HAS CURTAILED SOCIAL SECURITY  
REVENUES; BUT BENEFITS HAVE RISEN WITH INFLATION, AND SINCE  
1975, EXPENDITURES HAVE EXCEEDED INCOME.

L THE LONG-TERM DIFFICULTY IS THAT THE SOCIAL SECURITY SYSTEM  
FACES AN ESTIMATED DEFICIT OF 8.2 PERCENT OF TAXABLE PAYROLL  
OVER THE NEXT 75 YEARS.

L I WILL LET THE EXPERT ON THIS SUBJECT, MR. CALIFANO, PROVIDE  
YOU WITH THE SPECIFIC DETAILS AND THE OVERALL GOALS THE PRESIDENT  
HOPES TO ACCOMPLISH IN THIS AREA.

L I APPLAUD THE PRESIDENT'S INITIATIVES IN SETTING UP A STUDY  
GROUP ON NATIONAL HEALTH INSURANCE AND IN HIS COST-CONTAINMENT  
POLICIES.

L HEALTH CARE WORRIES ARE AN ANXIETY OF ALL AMERICANS, BUT  
ESPECIALLY OF THE ELDERLY.

L IN THE CURRENT FISCAL YEAR, AMERICANS HAVE SPENT \$160  
BILLION ON HEALTH CARE, ALMOST NINE PERCENT OF THE GNP.

↳ BUT THIS BURDEN IS NOT EVENLY DISTRIBUTED. / RECENT FIGURES SHOW  
THAT AMERICANS OVER 65 ACCOUNT FOR 44 PERCENT OF HOSPITAL COSTS,  
29 PERCENT OF PERSONAL HEALTH CARE COSTS, AND 25 PERCENT OF  
PRESCRIPTION COSTS.

~~tb~~  
↳ "A LOT OF AMERICANS WOULD RATHER DIE THAN GET SERIOUSLY  
SICK," DECLARED BUSINESS WEEK. / "FOR MILLIONS, GOING TO THE  
HOSPITAL MEANS GOING BROKE OR CLOSE TO IT."

↳ IT WAS PRECISELY FOR THIS REASON THAT IN 1949 I  
INTRODUCED A BILL TO MAKE HEALTH INSURANCE AVAILABLE UNDER  
SOCIAL SECURITY. / IT REQUIRED REPEATED LEGISLATIVE EFFORTS AND  
A GROWING PUBLIC AWARENESS TO FINALLY GET SUCH A BILL ENACTED  
INTO THE PROGRAM WE KNOW TODAY AS MEDICARE.

h BUT MEDICARE AND MEDICAID ARE ONLY PARTIAL ANSWERS TO THE GROWING PROBLEMS OF NATIONAL HEALTH. In 1965, BEFORE MEDICARE, PUBLIC FUNDS PAID ONLY 30 PERCENT OF THE HEALTH COSTS OF THE ELDERLY, AS COMPARED TO 61 PERCENT IN 1975.

h YET MEDICARE BENEFICIARIES NOW PAY MORE -- IN DEDUCTIBLES AND CO-INSURANCE -- THAN THEY DID WHEN MEDICARE WAS ENACTED.

h THIS IS BECAUSE OF RISING COSTS -- HOSPITAL COSTS ALONE HAVE MORE THAN QUADRUPLED SINCE 1965.

h THE BURDEN OF OUT-OF-POCKET COSTS AND SUPPLEMENTAL INSURANCE PREMIUMS SEVERELY STRAINS LIMITED RETIREMENT INCOMES.

h BUT THE BIGGEST FEAR OF OLDER AMERICANS IS THE LONG, COSTLY ILLNESS ~~THAT WOULD REDUCE THEM TO PENURY.~~

h I HAVE LONG SUPPORTED NATIONAL HEALTH INSURANCE.

I AM A COSPONSOR OF SENATOR KENNEDY'S PROPOSAL, S. 3, WHICH  
WOULD INCLUDE CATASTROPHIC COVERAGE. BUT THE REAL IMPETUS TO SUCH  
A NATIONAL PROGRAM WILL BE THE ADMINISTRATION'S PROPOSALS.

THE DETAILS OF FINANCING, ACCESS TO CARE, COVERAGE,  
DELIVERY OF SERVICES AND COST MUST THEN BE WORKED OUT IN AN  
EXCHANGE AMONG CONGRESS, THE EXECUTIVE BRANCH, THE GENERAL  
PUBLIC AND HEALTH CARE PROVIDERS.

IN THE MEANTIME, WE MUST CONTINUE TO ADDRESS SERIOUS  
PROBLEMS IN OUR PRESENT SYSTEM. CONGRESS MUST CONFRONT THE  
ISSUE OF SOARING COSTS AND THE INCIDENCE OF FRAUD.

AS YOU KNOW, THERE ARE TWO MAJOR COSTS CONTAINMENT  
PROPOSALS NOW UNDER CONSIDERATION:

THE ADMINISTRATION PROPOSAL TO CLAMP A NINE PERCENT LID ON HOSPITAL REVENUE INCREASES, AND SENATOR TALMADGE'S LONGER-RANGE APPROACH TO CURBING COSTS THROUGH PROSPECTIVE PAYMENTS AND INCENTIVES. THERE OBVIOUSLY IS PLENTY OF ROOM FOR BETTER MANAGEMENT AND NEW METHODS OF HEALTH CARE DELIVERY,

INTERIM MEASURES MAY BE REQUIRED TO EXPAND MEDICARE TO INCLUDE OUTPATIENT DRUGS, HOME HEALTH CARE AND CATASTROPHIC COVERAGE. ONE GREAT ADVANTAGE OF NATIONAL HEALTH INSURANCE IS THAT IT MAY PERMIT A BETTER BALANCE AMONG ACUTE, PREVENTIVE AND CHRONIC HEALTH CARE.

↳ BUT THE CONCERNS OF OLDER AMERICANS DO NOT STOP AT IMPROVEMENTS IN HEALTH CARE AND SOCIAL SECURITY INCOME.

↳ MANY AMERICANS ARE BOTH WILLING AND ABLE TO WORK AFTER AGE 65.

I HAVE SUPPORTED LEGISLATION TO PROHIBIT AGE DISCRIMINATION  
IN EMPLOYMENT, AND I HAVE URGED THAT MEANINGFUL EMPLOYMENT  
OPPORTUNITIES -- ON BOTH A PAID AND VOLUNTEER BASIS -- BE MADE  
AVAILABLE SO THAT THE SKILLS AND EXPERIENCE OF OUR OLDER POPULATION  
CAN BE UTILIZED FOR THE GENERAL GOOD OF SOCIETY,

↳ IN ADDITION, I SUPPORT THE DEVELOPMENT OF JOB TRAINING  
PROGRAMS TO PREPARE WOMEN, WHO FOR ONE REASON OR ANOTHER, ARE  
THRUST UNPREPARED INTO THE JOB MARKET. ↳ I HAVE JOINED IN SPONSORING  
THE DISPLACED HOMEMAKERS ACT OF 1977, WHICH WOULD ADDRESS THIS  
PROBLEM.

↳ FINALLY, WE NEED A MAJOR EFFORT TO UNDERSTAND THE INCREASINGLY  
IMPORTANT ROLE OF OLDER AMERICANS AND TO DISPEL SOME OF THE  
OUTMODDED CONCEPTS WHICH CONTINUE TO EXIST.

WE HAVE A VAST, UNFINISHED AGENDA, INCLUDING GREATER ACCESS  
TO TRANSPORTATION AND RECREATION AND CULTURAL ACTIVITY, BETTER  
HOUSING, SAFE NEIGHBORHOODS, CONSUMER PROTECTION, AND CONTINUING  
EDUCATIONAL AND EMPLOYMENT OPPORTUNITIES.

CENTURIES AGO, THE PSALMIST CRIED OUT:

"CAST ME NOT OFF IN THE TIME OF OLD AGE; FORSAKE ME  
NOT WHEN MY STRENGTH FAILETH."

THE WELL-BEING OF OUR AMERICAN CIVILIZATION CAN BE MEASURED  
BY OUR SENSITIVITY TO THIS PLEA AND OUR RECOGNITION OF THE  
CONTRIBUTIONS OF OLDER PERSONS IN OUR SOCIETY.

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