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U.S. CONGRESS, HOUSE, COMMITTEE ON INTER-  
STATE AND FOREIGN COMMERCE.

AMENDING SECTION 314 (c) OF THE PUBLIC  
HEALTH SERVICE ACT.

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85TH CONGRESS } HOUSE OF REPRESENTATIVES  
2d Session }

AMENDING SECTION 314 (c) OF THE PUBLIC HEALTH SERVICE ACT.

APRIL 2, 1958. Ordered to be printed

Mr. WILLIAMS of Mississippi, from the Committee on Interstate and Foreign Commerce, submitted the following

REPORT

[To accompany H. R. 11414]

The Committee on Interstate and Foreign Commerce, to whom was referred the bill (H. R. 11414) to amend section 314 (c) of the Public Health Service Act, so as to authorize the Surgeon General to make certain grants-in-aid for the support of public or nonprofit educational institutions which provide training and services in the fields of public health and in the administration of State and local public health programs, having considered the same, report favorably thereon without amendment and recommend that the bill do pass.

PURPOSE OF AMENDMENT

The purpose of this legislation is to earmark an authorized appropriation of not to exceed \$1 million for grants-in-aid by the Surgeon General to schools of public health. This sum would come out of the sum of not to exceed \$30 million which by section 314 (c) of the Public Health Service Act is authorized to be appropriated for public health grants to States and local communities. In a similar way there is already earmarked under present law, out of such \$30 million authorization, an amount of not to exceed \$3 million for demonstrations of public health methods and for the training of public health personnel.

HEARINGS

The Subcommittee on Health and Science held 2 days of hearings on this legislation.<sup>1</sup> The witnesses before the subcommittee included State and local public health officers, deans of schools of public health, representatives of voluntary organizations concerned with public health and government departments and agencies.

<sup>1</sup> The hearings were held on H. R. 6771 which differs from H. R. 11414 in form only.

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The testimony was overwhelmingly in favor of immediate enactment of this legislation.

The witnesses stressed the great need for additional public health personnel on all levels of government—Federal, State, and local. Specific examples were given as to the numbers of budgeted public health positions which have remained vacant because the supply of trained health personnel is inadequate.<sup>2</sup>

#### NEED FOR LEGISLATION

The subcommittee and the full committee gave careful consideration to all of the views expressed by the witnesses. The committee feels that this is emergency legislation necessary to enable the 11 schools of public health in the United States to carry on their activities which are vitally necessary if public health programs at all levels of government are not to be seriously curtailed for want of an adequate supply of trained public health personnel.

Recognizing the scarcity of public health personnel, Congress in 1956 enacted Public Law 911, 84th Congress, providing for a 3-year program of graduate traineeships for public health personnel. Recipients of Federal traineeship grants under this program and similar programs sponsored by a number of Federal agencies, States, and local governments attend for the most part the 11 schools of public health which would be qualified to receive aid under the proposed legislation.

Five of these schools are public schools supported mostly by public funds (California, Michigan, Minnesota, North Carolina, and Puerto Rico). The remaining six schools are private schools supported mainly by private funds (Columbia, Harvard, Johns Hopkins, Pittsburgh, Tulane, and Yale). The graduates of these schools for the most part go into public service. Of the 3,000 graduates during the years 1950 to 1955, 70 percent went into Federal, State, and local public service; 22 percent are working for voluntary organizations; and 8 percent are employed in industry and elsewhere where they are concerned with matters of industrial and public health.

In excess of two-thirds of the students attending schools of public health are sponsored by Federal, State, or local governments, and by the World Health Organization. In 1957-58, for example, 717 out of a total of 1,065 (68 percent students) were government sponsored. The governments pay the tuition of these students but tuition on the average covers only 11 percent of the basic teaching budgets of the schools of public health.

The tuition paid by all government agencies for the 717 government sponsored students amounted to \$495,000 (or an average of \$691 per student). The cost to the schools of training these students amounted to \$3,622,000 (or \$5,052 per student). This left a deficit of \$3,127,000 (or \$4,361 per student), which means that State and private funds which support the 11 schools of public health are subsidizing public health training for the Federal Government, State and local governments, foreign governments, industry and other organizations requiring the services of trained public health personnel.

<sup>2</sup> A 1951 study showed 3,230 budgeted but unfilled positions in State and local health departments. Last year 30 percent of local health officer positions were vacant. A 1953 study showed 1,720 additional public health physicians are required to meet minimum standards (1 public health physician per 5,000 population.)

Of the total of 717 governmentally sponsored public health trainees, 533 trainees were sponsored by the Federal Government. The deficit resulting from the Federal Government's paying tuition only rather than the cost of training amounted to \$2,324,413 in 1957-58. Witnesses appearing on behalf of the State-supported schools of public health testified that the State legislatures in their respective States have become increasingly reluctant to appropriate funds for the five publicly supported schools of public health since the majority of students attending these schools are out-of-State students who upon graduation largely fill public health positions in other States or in foreign countries. A survey made of the places of employment of graduates from schools of public health during the years from 1950 to 1955 shows that only 25 percent of the graduates are employed in the State in which they attended a school of public health; 50 percent are employed in other States; and 25 percent in foreign countries. These five State legislatures cannot see why tax moneys supplied by the citizens of these States should be used to subsidize other States, the Federal Government, and foreign governments.

The role of the schools of public health and of their graduates is one of leadership in public health activities of the Federal Government, State and local governments, foreign governments, international organizations, voluntary health organizations, and industry.

Existing Federal public health programs administered by agencies such as the Public Health Service, the Atomic Energy Commission, the Armed Services, and the International Cooperation Administration, are vital in the interest of the health of the American people and the defense and foreign policy of the United States.

The President of the United States, in his state of the Union message for the year 1958, emphasized the importance from a foreign policy standpoint of those United States foreign aid and international health programs under which hundreds of trained public health specialists have given freely of their professional skills to disease-ridden peoples all over the globe, and under which hundreds of students of foreign nations have attended American schools of public health taking with them back home not only knowledge of modern medical techniques to improve the health standards of their people but also a feeling of friendship for the American people.

The witnesses appearing on behalf of the Department of Health, Education, and Welfare acknowledged the financial plight of the schools of public health but raised a question as to the timeliness of this legislation. The witnesses pointed to a provision contained in Public Law 911, 84th Congress, requiring the Surgeon General to call a conference between July 30, 1958, and December 1, 1958, broadly representative of the professional groups which are informed about the training of public health personnel. This conference is to assist the Surgeon General in appraising the effectiveness of the public health traineeship program provided for in Public Law 911 in meeting the needs for trained public health personnel. Upon conclusion of the conference the Surgeon General is directed to submit to the Congress the recommendations of the conference relating to a long-range traineeship program.

The committee has carefully considered the question raised by the Department of Health, Education, and Welfare with regard to the appropriateness of passing this legislation at this time. The Committee feels that the proposed legislation provides a bare minimum of

support for schools of public health which is urgently needed by these schools, and that any delay in making these emergency funds available would seriously impair the ability of the schools to provide the number and quality of training opportunities which they must make available if the Federal, State, and local programs in the field of public health are to be adequately supplied with trained public health personnel.

Perhaps the Department feels that the proposed legislation may prejudice the chances of securing more far-reaching legislation at a later date.

Certainly Congress in enacting Public Law 911, 84th Congress, did not provide for a conference to develop long-range planning for the training of an adequate supply of public health personnel with the intent of precluding any immediately needed aid for the hard-pressed schools of public health.

Should the long-range recommendations to the Congress which may be made by the conference recommended legislation going beyond the bare minimum contained in H. R. 11414, the next Congress would in no way be barred from considering and enacting additional legislation designed to provide for the training of an adequate supply of public health personnel.

The committee has concluded on the basis of all of these considerations—namely the financial plight of the schools of public health, the urgent need for the training of additional public health personnel, the importance of public health programs at all governmental levels for the welfare and security of the American people, and the unreasonableness of the situation which compels the 11 schools of public health to subsidize Federal, State, and local governments—that H. R. 11414 should be enacted promptly so that the Federal Government can assume as soon as possible a proper share of the financial burden placed on schools of public health.

The committee hopes that to the maximum extent possible any funds made available pursuant to this legislation will not be used for the replacement of funds now secured from private and other public sources, but that these new funds will be used for the improvement and expansion of existing programs and the inauguration of new programs.

The legislation does not contain a statutory formula for the distribution of funds to be made available to schools of public health. Rather, the committee expects that the Surgeon General, after consultation with the schools of public health, will work out an acceptable formula just as the Surgeon General now consults with the States in connection with the distribution of public health grants made available pursuant to section 314 (c) of the Public Health Service Act.

The reports of the departments and agencies are as follows:

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE,

January 28, 1958.

HON. OREN HARRIS,

*Chairman, Committee on Interstate and Foreign Commerce,  
House of Representatives.*

DEAR MR. CHAIRMAN: This letter is in response to your request of May 21, 1957, for a report on H. R. 6771, a bill to amend section 314 (c) of the Public Health Service Act, so as to authorize the Surgeon General to make certain grants-in-aid for the support of public or nonprofit

educational institutions which provide training and services in the fields of public health and in the administration of State and local public health programs.

The bill would supplement the existing authority of the Surgeon General so as to permit him to make grants-in-aid, under such terms and conditions as may be prescribed by regulations, for the support of public or nonprofit educational institutions which provide comprehensive professional training, specialized consultative services, and technical assistance in the fields of public health and in the administration of State and local public health programs. The bill would authorize the use for this purpose of not to exceed \$1 million of the amount annually appropriated under section 314 (c) of the Public Health Service Act. The existing annual appropriation authorization of \$30 million in section 314 (c) would not be changed.

The types of educational institutions which meet the qualifications specified in the bill are basically the eleven schools of public health. Five of these schools (University of Minnesota, University of North Carolina, University of Michigan, University of California, and University of Puerto Rico) are State-supported schools. The remaining six schools (Yale University, Johns Hopkins University, Columbia University, Tulane University, Harvard University, and University of Pittsburgh) are private nonprofit educational institutions.

The schools of public health, together with other types of schools which specialize in such fields as nursing and engineering, perform an essential role in the training of professional public health personnel for Federal, State, and local governments and voluntary health organizations and associations. In addition, a sizable number of students attending these schools come from foreign countries and, after graduation, work abroad. Almost all of the graduates of the schools of public health obtain employment in either public or quasi-public agencies.

There is already precedent for Federal participation in the costs of training professional personnel for essential public health work. Section 314 (c), which the bill would amend, already authorizes States to use Federal grants under that section for training public health personnel, and authorizes the Surgeon General to provide such training. Also, the public health traineeship program inaugurated by title I of the Health Amendments Act of 1956 (now section 306 of the Public Health Service Act) provides Federal traineeships for the graduate training of professional public health personnel; approximately half of the traineeships financed by this program are for training in the 11 accredited schools of public health.

Funds available to the Surgeon General to provide training under section 314 (c) and under Title I of the Health Amendments Act of 1956 cannot be used for the type of direct institutional support contemplated by H. R. 6771. The Congress did, however, include in the Health Amendments Act of 1956 a provision calling for a national public health training evaluation conference later this year. This provision (sec. 306 (e) of the Public Health Service Act) reads as follows:

“(e) The Surgeon General shall, between June 30, 1958, and December 1, 1958, call a conference broadly representative of the professional and training groups interested in and informed about training of professional public health personnel, and including members of the advisory committee appointed pursuant to subsection (d), to assist him in appraising the effectiveness of the traineeships under this

section in meeting the needs for trained public health personnel; in considering modifications in this section, if any, which may be desirable to increase its effectiveness; and in considering the most effective distribution of responsibilities between Federal and State Governments with respect to the administration and support of public health training. The Surgeon General shall submit to the Congress, on or before January 1, 1959, a report of such conference, including any recommendations by it relating to the limitation, extension, or modification of this section."

In our judgment, consideration of any legislation for enlarging or modifying the role of the Federal Government in the support of public health training should await the holding of this conference and the submission of the Surgeon General's report on its deliberations and recommendations. The factual data which will be developed in connection with the conference and the expert evaluation of training needs, and of the most effective methods of meeting these needs, which will emerge from the conference, will provide a comprehensive and authoritative basis for determining whether additional Federal financial assistance is necessary and, if so, what the nature and extent of such assistance should be.

We recommend, therefore, that legislative action on H. R. 6771 be deferred pending consideration of the report of the training evaluation conference which will be submitted to the Congress by January 1, 1959.

The Bureau of the Budget advises that it perceives no objection to the submission of this report to your committee.

Sincerely yours,

M. B. FOLSOM, *Secretary.*

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EXECUTIVE OFFICE OF THE PRESIDENT,  
BUREAU OF THE BUDGET,  
Washington, D. C., January 27, 1958.

HON. OREN HARRIS,  
*Chairman, Committee on Interstate and Foreign Commerce,  
House of Representatives, Washington, D. C.*

MY DEAR MR. CHAIRMAN: This letter is in reply to your request of April 11, 1957, for the views of the Bureau of the Budget on H. R. 6771, a bill to amend section 314 (c) of the Public Health Service Act, so as to authorize the Surgeon General to make certain grants-in-aid for the support of public or nonprofit educational institutions which provide training and services in the fields of public health and in the administration of State and local public health programs.

This bill would amend section 314 (c) of the Public Health Service Act to enable the Surgeon General to make grants to public and nonprofit institutions which provide public health training. The amount of the grant would be limited to \$1 million from the amount annually appropriated under the authority of section 314 (c).

The objective of the proposed measure is, in our opinion, an important part of the larger problem of the scope and adequacy of currently available public health training in the United States. At the present time, the Public Health Service is undertaking a comprehensive study of this broad subject which is to culminate in a conference next July. This conference will consist of about 100 participants representing professional and educational groups in-



formed on the subject of public health training. The issues to be studied will include an appraisal of the present capacity of training facilities, necessary expansion of present staff and facilities and methods and sources for financing needed training. The conclusion of this study will be reported to the Congress as required by law, before January 1, 1959.

In view of the interrelationship between the objective of this proposed bill and the study now under way by the Public Health Service, we would urge that action on H. R. 6771 be deferred until the results of the study can be evaluated and the total needs of public health training can be appraised.

Sincerely yours,

ROBERT E. MERRIAM,  
*Assistant Director.*

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DEPARTMENT OF JUSTICE,  
OFFICE OF THE DEPUTY ATTORNEY GENERAL,  
*Washington, D. C., January 29, 1958.*

HON. OREN HARRIS,  
*Chairman, Committee on Interstate and Foreign Commerce,  
House of Representatives, Washington, D. C.*

DEAR MR. CHAIRMAN: This is in response to your request for the views of the Department of Justice concerning the bill (H. R. 6771) to amend section 314 (c) of the Public Health Service Act, so as to authorize the Surgeon General to make certain grants-in-aid for the support of public or nonprofit educational institutions which provide training and services in the fields of public health and in the administration of State and local public health programs.

The bill would amend section 314 (c) of the Public Health Service Act (42 U. S. C. 246 (c)) by adding thereto a provision which would earmark \$1 million of each year's appropriation to the Department of Health, Education, and Welfare to enable the Surgeon General to make grants-in-aid for the support of public or nonprofit educational institutions which provide training and services in the public health field and in the administration of State and local public health programs.

Whether the bill should be enacted involves a question of policy concerning which this Department prefers to make no recommendation.

The Bureau of the Budget has advised that there is no objection to the submission of this report.

Sincerely yours,

LAWRENCE E. WALSH,  
*Deputy Attorney General.*

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DEPARTMENT OF LABOR,  
OFFICE OF THE SECRETARY,  
*Washington, D. C., June 20, 1957.*

HON. OREN HARRIS,  
*Chairman, Committee on Interstate and Foreign Commerce,  
House of Representatives, Washington, D. C.*

DEAR CONGRESSMAN HARRIS: This is in further reply to your request for this Department's views on H. R. 6771, a bill to amend

section 314 (c) of the Public Health Service Act, so as to authorize the Surgeon General to make certain grants-in-aid for the support of public or nonprofit educational institutions which provide training and services in the fields of public health and in the administration of State and local public health programs.

There presently is a shortage of trained persons actively engaged in public health programs, and this Department favors reasonable measures to alleviate this shortage. However, I would prefer to leave detailed comment on this particular proposal to the Department of Health, Education, and Welfare, which would administer its provisions.

The Bureau of the Budget advises that there is no objection to the submission of this report.

Sincerely yours,

JAMES T. O'CONNELL,  
*Under Secretary of Labor.*

#### CHANGES IN EXISTING LAW

In compliance with clause 3 of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as introduced, are shown as follows (new matter is printed in italics, existing law in which no change is proposed is shown in roman):

#### SECTION 314 (c) OF THE PUBLIC HEALTH SERVICE ACT (42 U. S. C. 246 (c))

##### GRANTS AND SERVICES TO STATES

##### SEC. 314. (a) \* \* \*

\* \* \* \* \*

(c) To enable the Surgeon General to assist, through grants and as otherwise provided in this section, States, counties, health districts, and other political subdivisions of the States in establishing and maintaining adequate public health services, including grants for demonstrations and for training of personnel for State and local health work, there is hereby authorized to be appropriated for each fiscal year a sum not to exceed \$30,000,000. Of the sum appropriated for each fiscal year pursuant to this subsection there shall be available (1) an amount, not to exceed \$3,000,000, to enable the Surgeon General to provide demonstrations and to train personnel for State and local health work and to meet the cost of pay, allowances, and traveling expenses of commissioned officers and other personnel of the Service detailed to assist States in carrying out the purposes of this subsection, and (2) *an amount, not to exceed \$1,000,000, to enable the Surgeon General to make grants-in-aid, under such terms and conditions as may be prescribed by regulations, for the support of public or nonprofit educational institutions which provide comprehensive professional training, specialized consultative services, and technical assistance in the fields of public health and in the administration of State and local public health programs.*



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