

Health of mind and body is so fundamental to the good life that if we believe that men have any personal rights at all as human beings, then they have an absolute moral right to such a measure of good health as society and society alone is able to give them.

Mr. DENT. Mr. Chairman, may I interrupt?

Is there a printed copy of the statement?

Dr. ENGLISH. It is just an oral presentation, sir.

Mr. DENT. That is all right.

Dr. ENGLISH. When the Declaration of Independence was framed and when there was language in there talking about the rights of life, it might have meant one thing back in the 17th and 18th century. Today we wonder, as far as the poor are concerned, if that statement doesn't have something to do with their right not to have their lives whittled away by illness.

If we take the next page there you can see that at the present time 50 percent of poor children in this country still have not had adequate immunizations; that 64 percent of poor children have never seen a dentist in their lives; that 45 percent of all women who have babies in public hospitals in this country have had absolutely no prenatal care at all, that an infant born to poor parents in this country has twice the risk of dying before reaching his first birthday, and that the chance of dying before reaching the age of 35 is four times greater for someone in a poor family in this country.

The next chart shows something of our standing in the world as revealed by the 1965 United Nations Demographic Year Book. It shows the United States among other nations of the world now ranking 14th in the infant mortality rates per 1,000 live births. It is the poor among our people that give us that record, and when we look at this more closely we notice that poor families still have three times more disabling heart disease than other families in this country; seven times more visual impairment; five times more retardation and mental disorder, according to the national health survey and that the killer diseases of the poor are still tuberculosis, influenza, pneumonia, diseases that the economically fortunate of us may not have suffered for a generation, and that among the poor who are employed one-third of them have such chronic illness that their capacity to work is severely limited.

We illustrate that on the next page of showing you the difference in incidence of chronic conditions per 1,000 population between families with incomes under \$2,700 a year, and others and you see in orthopedic, heart conditions, arthritis, mental and nervous disorder, the difference between the poor in our country and the rest of us.

I think that the questions we have asked ourselves as physicians in this program, Mr. Chairman, is, with the remarkable advances in modern medical technology that have been made in this country over the last 20 to 25 years, why it is that the poor in this country still have such a record of illness.

I would like to present to you, sir, the answer that was given by Dr. Alonzo Yerby, the former commissioner of hospitals of the city of New York, who is now a professor of preventive medicine at the Harvard School of Public Health. Speaking before the White House Conference on Health a little more than a year ago, he said:

The pervasive stigma of charity permeates our arrangements for health care for the poor and whether the program is based on the private practice of