

(2) The 35 centers to be funded by the end of FY '67 are planned to serve 500,000 persons. Of this population, approximately 100,000 to 120,000 will be women of the child-bearing age. On the basis of the utilization of family planning services when they have been made available elsewhere, 60,000 to 75,000 of these women can be expected to avail themselves of these services at the Neighborhood Health Centers.

Chairman PERKINS. On the health aspects of community action programs, I was certainly impressed when you stated that 50 percent of the poor were not receiving adequate immunization programs and 64 percent of the poor had never seen a dentist and that heart disease is three times more prevalent among the poor.

I have before me a letter that I received from Dr. Russell L. Hall, M.D., of Prestonsburg, Ky., which I think points up the good work in the field of preventive and remedial health. I know in many poor counties, particularly throughout the mining area that I represent, the greatest need perhaps is adequate health service for people. When we enacted the Community Health Professions Act of 1961 it added on to the public health programs and the public health services that our people were receiving, especially children, but by and large so little has been done.

In the Elementary and Secondary Education Act we were able to do a little more in meeting the very basic health needs of pupils which pose learning difficulties, but this doctor writing to me has been so critical of the community action programs over the last 3 years that I thought this letter was most impressive.

He writes this on June 7 and says that he is—

*** greatly pleased by our comprehensive health program for Floyd County. In my 8 years in public health, this is the soundest and best program we have ever had approved. If circumstances permit it to be funded for the full 5 years, the results will not only immensely upgrade the health environment for the young and elderly of Floyd County—it will have woven the pattern for other counties in other States.

Then he goes ahead and discusses the good that is going to flow from this program. I am of the same opinion. We do not have comprehensive health centers under any programs that we have at the present time. Your efforts to provide programs of this kind mean so much more to the people who have been traditionally bypassed that are its beneficiaries. I am most hopeful myself that we can do more in the field of both rehabilitative and remedial health and personally want to compliment the Director, Sargent Shriver, himself, for these broad community action health centers that you have inaugurated. I think it speaks well of your program in this country. Thank you.

Mr. BERRY. Mr. Chairman, you may be interested to know that of those that we have been able to fund with the amount of money appropriated for this fiscal year, probably one which bids fair to have the same productive quality as the one in Denver is in Louisville, Ky. This evidences both the cooperation and coordination of public and private funds both through the medical college, private foundations, as well as our funds. Also in Floyd, Ky.; and in Leslie, Ky., community action health programs have recently been funded.

One of the early things that we did with our limited funds was to give assistance both to the University of Kentucky and the complex of hospitals formerly established by the United Mine Workers, trans-