in 1947 to about 11 percent by March 1966. In the absence of an overall national effort similar to that of World War II, but with a continuation of present conditions, our veteran population will increase to a point where by the end of this century it should level off at 30 million citizens and will constitute approximately 10 percent of the nation's total population. When we add to this figure, the widows, orphans and dependents the total will approximate 50 percent of the total population.

On June 30, 1967, the average age of the approximately 26 million veterans was 44 years. The average ages of veterans classified by major periods of conflict were - Spanish American War - 89 years; World War I - 73 years; World War II - 48 years; Korean Conflict -38 years; Post Korean Veterans - 28 years. The median age of the Post Korean Conflict veterans will rise to 41 years by the end of this century. The veteran over 65 years of age will not in this century constitute a majority of the veteran population. However, over half of the veterans who served prior to 1955 will be over 65 years of age within the next twenty years.

With all of these considerations in mind we now turn to: (1) the manner in which the nation has accepted and fulfilled in the past its commitments to its veterans, (2) the nature of the Veterans Advisory Commission's responsibilities, the inquiries it has made and the approaches it has employed, and (3) the Commission's general conclusions as to the principles that should guide the nation as it faces its commitments to the veteran population.

The Nation's Commitments

The commitments made are all related in some degree to one another. Veterans of our wars have a strong proprietary feeling for these time-honored obligations. They are well aware that programs designed to fulfill these obligations have not only benefited themselves but have contributed to the health and well-being of the whole nation.

(1) The commitment to compensate disabled veterans for disability incurred in their nation's service and their dependents for the loss of life or earning capacity of the veteran. This commitment has taken many forms during its evolution. It has been extended from simple money payments for the loss of bodily function or death to more fundamental and helpful remedies such as rehabilitation and education for the living veteran. The program has been so designed and so administered that abilities and needs of the individual veteran are carefully considered.