objectivity? Is there any question that they wouldn't be looking for the full effects of how to make the program effective, and couldn't they have the feedback effect of learning something while they are evaluating?

Dr. CANNON. No doubt, but I think they could improve it by having someone from the outside look at their house.

Mr. KYROS. Thank you.

Mr. ROGERS. Dr. Carter?

Mr. CARTER. I want to congratulate the distinguished gentlemen on their presentations here today. There is in the planning stage now, within this committee, on the advice of our chairman, a plan to evaluate some of these programs.

We do have a very efficient organization in the General Accounting Office which evaluates these things for us, and it is responsible only to the Congress, and not to the executive department, which does do excellent audits for us, and has done them in the past.

This is a very good agency which is responsible to us and does work for us. I don't think it is biased, do you, Mr. Chairman?

Mr. ROGERS. We hope not.

Mr. CARTER. It hasn't been in some work they have done for me. But certainly we would consider, or I would consider, a nongovernmental agency. However, we do have confidence in the General Accounting Office, because they usually——

Dr. CANNON. Dr. Carter, I did not mean that there was bias in evaluation of the program. I think that there are institutions available that can give expert analysis that may be of great value to this program.

Mr. CARTER. Yes, sir.

Dr. CANNON. And knowing those who are administering this program, I have the utmost confidence that they will seek such advice. This doesn't mean that you should not have someone else evaluating it, too.

Mr. CARTER. I believe in evaluation to see where we are and to see if we are spending our money wisely.

Dr. CANNON. My statement about objectivity didn't imply bias.

Mr. CARTER. Thank you, sir. We appreciate that.

Now, so far as open-end authorizations are concerned, as a usual thing they just don't happen in this committee. Usually it is limited to 3 years. Am I not correct in that, Mr. Chairman?

Mr. ROGERS. Yes.

Mr. CARTER. In a general rule that has been followed in the committee, it is usually limited to 3 years in authorizations. So I think that it is in agreement with your paper.

Our bill, I believe, is in agreement with Dr. Brill, also, in that the program concerning migratory workers is for 2 years, as he suggested, and we do have a great many problems with alcoholism, and we do recognize it as a disease.

It is regrettable that some of our governmental agencies haven't taken to this idea, however, because it is very, very difficult for us to obtain admission to a veterans hospital for an alcoholic—very difficult. In fact, it is almost impossible at times.

I should like to see this changed somewhat.