



United States
of America

Congressional Record

PROCEEDINGS AND DEBATES OF THE 79th CONGRESS, SECOND SESSION

"So That Men May Live"

REMARKS

OF

HON. LYNDON B. JOHNSON

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Saturday, April 13, 1946

Mr. LYNDON B. JOHNSON. Mr. Speaker, we have lately won a war to guarantee the freedom of man from oppressions. It was a bloody business. But even from the harsh, cruel, and blind demands of war, man can learn.

War demands courage: a spirit and a will to win. It demands intelligence. And it demands a physical hardihood, a capacity of man's body to measure up to his spirit and his intellect.

In the will to win and the intelligence to win, and the hardihood to win, the peoples of the United States equaled and surpassed the most exacting standards.

SHAMEFUL PHYSICAL STANDARDS

But the shameful fact is that to find the manpower for that job we had to comb through our male population, rejecting for physical and mental defects almost as many as were found good enough for the job. That shameful story is told in the records of Selective Service.

In common with most other men, I try to reject unpleasant things. Unconsciously I try to put them from my mind. Perhaps you have forgotten the story of selective service. Let me remind you of it.

ONE MAN OUT OF THREE REJECTED

Through August 21, 1945, selective service rejected 4,828,000 men before our 15,000,000-man Army was secured. That was a ratio of nearly 1 to 3. But that does not paint the facts sufficiently black.

Selective service was instituted prior to the actual outbreak of hostilities; and for those few months before Pearl Harbor, the inductees were more carefully screened than was true at a later period in the war when we were scraping the bottom of our manpower barrel. And in those early days, 52 men out of every 100 examined were rejected. More than half of the male citizens in what should have been the best years of their lives were not physically or mentally fit for Army service.

NEVER LESS THAN A THIRD

Subsequently standards for admission were drastically lowered. Here are percentage figures from Selective Service during the period from July 1942 through December 1943. Various factors influenced the rejection rate; nevertheless, it did not ever drop below 33 percent. One man out of every three was unfit. Even that low figure of 33 percent was reached only when we first started taking the 18- and 19-year-olds and the first wave of these youngsters materially lowered the percentage of rejections. During this period, the monthly rate of unfit ranged from 33 to 46 percent.

PERCENT UP WITH AGE

The percentage of unfit mounted with the age of the man. In the 18 to 22 age group, approximately a fourth of those examined were unfit. When a man reached 34, the chances were 50-50 that he would be rejected. At 43, the draft rejected 61 men out of each 100.

Well, figures are dull listening, I know. And there are not many more. I will try to make them as graphic as possible. Remember that these figures are telling the story of your country.

Like every Congressman, when I find statistics worked out for the Nation, I like to see how they apply to my State. So I turned through Mr. Hershey's book to Texas—Texas, the home of the rangers, one of the last frontiers, where men are men. Texas, as usual, was a leader, but I was not particularly proud of our leadership, when I read this sentence:

In the South, the rejection rates were above the national average, for educational deficiency and syphilis.

I brooded over these Texas figures—and remember, your State's is not much different. I brooded over them and decided they should be presented in this fashion.

100 TEXANS REJECTED—FOR WHAT REASON?

Here are 100 Texans who were unfit to serve their country. For what reasons were they rejected?

Seventeen of them were suffering from syphilis.

Fourteen were not sufficiently literate to pass Army tests, and this was after Army educational standards had been lowered.

Nine had various types of heart ailments.

Nine were crippled with various types of muscular and skeletal defects.

Eight had bad eyes.

Seven were suffering from mental disease. Incidentally, these figures were set up separately for our white and Negro inductees; and the record showed the mental disease was more common among the whites; syphilis more common among the Negroes.

Six of these one hundred men had hernia.

Nearly five—to be exact, 4.5—suffered from nervous diseases.

Three had tuberculosis, and 2.5 others had some other form of lung ailments.

Three had various degrees of deafness.

THE WHOLE MAN MUST BE CONSIDERED

I will spare you any more of the catalog. I think the point has been sufficiently made, that we were taught a great lesson by the war.

The war taught us that the proud race of Americans is far from perfect. But Americans are famous for one thing. When a wrong is pointed out to them, they will do their best to right it.

Government is a tool fashioned when the people join together to win an objective for the greatest good of the greatest number, and which they could not achieve except through united action. You could multiply the examples of this function of self-help. Our victory over fascism and nazism on foreign shores is a brilliant instance.

THE GOAL: EDUCATION

Very early in our history the people of the United States joined together to lift the level of the Nation's intelligence. Back in my State, one of our founding fathers once said, "a cultivated mind is the guardian genius of democracy." Education of all the people has been a goal of the people united in their Government and working through their Government.

Now we are coming to realize that man is not divisible. We are beginning to understand that the whole man must be considered. That a healthy mind, a healthy body, and a healthy soul are component parts of the whole man; and that what happens to the body will be reflected in the mind and the soul.

NOT ONE SINGLE CHILD PERFECT PHYSICALLY

I go back to my own State to illustrate my meaning—not with generalities but with cold, indisputable facts. Our scientists went into our classrooms—different classrooms in different children of all races and economic strata attend. They examined those children impersonally. Their eyes, their teeth, their throats, their postures, their bodies, their health records. And they found an appalling fact. On the basis of this scientific sampling, they found not one single child who was perfect physically. Each child has some bodily defect.

I hasten to add that those who made the tests tell me this condition is not peculiar to Texas. It just happens that in Texas was conceived the idea of making such a survey.

MIND REFLECTS PAIN

Those same scientists set about to take remedial measures. You may find the details in the records of our State health department or the files of the United States Public Health Service. Suffice to prove my point here is this—to me—startling phenomenon. When those physical defects, or their causes, were remedied, the whole child started to grow. In direct ratio to the improvement in his physical well-being, that child's school grades improved. His mind had reflected the aches and pains of his body. Man has not found any scales with which to weigh the human soul; but I have no doubt that as the body and the mind grow and develop, all the foundations are laid for a happier, a more useful individual—one of the units in a society which is as indivisible as the individual himself.

I am concerned about the whole man. I am concerned about what the people, using their Government as an instrument and a tool, can do toward building the whole man, which will mean a better society and a better world.

HOPE CONGRESS WILL PASS S. 191

Mr. Speaker, I have not taken the time of this House for a lecture on public health, education, or morals. My purpose has been to lay a proper predicate for a bill which I hope this Congress will favor.

That bill is S. 191. It is a bill through which the people working with the device of government, would take one crawling step toward bettering the condition of Americans by expanding their hospital facilities.

A CRAWLING STEP

I urge this bill without pride of authorship. I wrote a somewhat similar bill for the House, but this one will be first to reach us for action. It is, as I said, a first crawling step toward the objective of helping raise the level of man's

physical well-being. It proposes to use the power of the Government and the funds of the people, to make available to the people some of the facilities they need.

S. 191 proposes to appropriate seventy-five millions a year for 5 years for the purpose of assisting the States to build proper hospital facilities. When you divide seventy-five millions among 48 States, and several Territories, the amount for each State is small indeed. As I said, it is a crawling step. But at least it is a step.

I shall not go into the intricacies of the matching plan at this time. I would call your attention to this fact. This is no attempt to federalize the Nation's hospitals. Once a hospital has been constructed with the aid set up in this bill, no Federal employee has the right to exercise supervision or control over its operations.

TEXAS SHORT 1,400 DOCTORS

Right here I should like to interject this thought. Before the Congress starts talking about socialized medicine, we ought to get enough doctors to take care of our people. It wouldn't do much good to have a card entitling you to medical service if there is no doctor to furnish that service.

The fact is that we have right now an acute shortage not only of hospital facilities but of doctors and nurses. In Texas, as an example because I know about Texas, we need 7,000 doctors for our population; we have fifty-six hundred. We are short fourteen hundred. The same picture prevails as to nurses. I think all of the talk about socializing medicine is nonsense and should be laid on the table until we train enough doctors and enough nurses and build enough hospitals. Unhappily, those are things you do not do overnight.

DESERTING RURAL PRACTICE

The hospital or public health center will make the smaller community more attractive to physicians who, more and more, are deserting rural practice for the cities, where they can find all the aids of science at hand for treatment. You cannot criticize the doctor for leaving the community where he does not have the facilities to practice what he has been taught by science. Nor can you expect the doctor to keep abreast of changing methods when the community offers him no facility for using those methods. Recently I heard a speaker say that with the progress medical science has made in recent months, in a brief time all germ diseases will be conquered. That may or may not be so, but we do know that to save lives, the doctor must have a place where he can take the emergency patient; where blood for transfusions is available; where aseptic conditions pre-

vail to minimize the danger of infections; where nurses will watch the patient—and where nurses may be trained to meet the great need in this profession.

There is but one other provision of the bill, to which I would particularly direct your attention.

You will find in several places language substantially providing that services must be provided without charge when the patient is not able to pay.

MASTER ADMONISHED US TO HEAL THE SICK

This is no bold concept; it is established practice in the medical profession. Certainly a hospital is not strictly a charitable institution; you and I who are able to pay should and do pay. We accept it. We make provision for it when we budget our incomes. On the other hand, our Master admonished us to heal the sick. It is our ethical obligation to hospitalize those who need it, and many communities already accept that obligation willingly. Certainly the medical practitioner does not inquire into the ability to pay of the man brought to a hospital by ambulance, suffering from traffic injuries. The doctor's first function is to heal. The money he is paid becomes incidental. His skill, under his oath, is as willingly given free as for the highest fee.

The community responsibility is as great as that of the individual practitioner. In fact, it may well be that the doctors are shouldering today much of the burden which the entire community should bear.

If you prefer to pitch this bill on a cold-blooded business basis, entirely apart from moral and ethical considerations, I believe it good business to keep up the health level of the community.

FLY DOES NOT DISCRIMINATE

A friend once remarked to me the fly which eats at the open privy of a slum area has no scruples about carrying polio to the child in the silk-stocking area. The health of a community can be no better than the health of those least able to afford medical and hospital care.

The community is the sum of its individuals, the State the sum of its communities, and the Nation the sum of its States. The whole man is not divisible; nor the community; nor the State; nor the Nation.

THAT MEN SHALL LIVE

That, then, is the bill. It proposes to spend in 1 year much less than the cost of 1 day of war. It proposes to make these expenditures, not that men shall die but that men may live. It is rooted in the sound American doctrine of local government.

Let us have the courage to spend but a small fraction of war's cost in order that men may live a fuller, more complete life.