

# Health Care and Health Careers

We in the Health Resources Administration are particularly pleased by the advance program of the American Public Health Association's 1974 meeting. It was our hope that this year APHA would make a special effort to discuss problems that poor people and minority groups face in the area of health care and health careers.

To this end, we have collaborated with APHA to bring about participation by disadvantaged people and groups in the October 20-24, 1974, meetings in New Orleans, La. We have taken this step because we believe there are few things of more immediate importance to the health care industry of this nation than is the effort to bring the benefits of American medical expertise to all our people.

We still do not know enough about the health care of the disadvantaged. We still need to do a great deal of catching up in researching the special health problems in the ghettos, barrios, reservations, and rural backwaters of America. These problems may be nutritional, they may be genetic, they may be environmental. They may derive from a shortage of the most rudimentary kind of medical attention. They may be occupationally related. But whatever their genesis, they exist; they are stubborn; and they have not received their due share of attention in the past.

It is high time we gave them our gravest attention. We have set up a special program in the Office of the Administrator of HRA with explicit instructions to seek out answers to the health care and career problems of the disadvantaged. The Office of

Health Resources Opportunities (OHRO) is specifically designed to apply itself to the problems of poor people, Black people, Native American people, Chicano people, all people who by reason of sex, or age, or race, or economics—or even of simple geography—cannot easily avail themselves of the health care and career opportunities the rest of us take so much for granted.

It was OHRO which—together with the Health Services Administration—led the way in working with APHA to bring about in 1974 the program emphasis on the health of poor people.

And we wish the participants at the New Orleans meeting good luck and much wisdom in their deliberations. One thing is certain: if the needs of the disadvantaged people of America are to be met—as I believe they must be—we are going to have to apply to the problem all the concentrated wisdom and good will we can find.



Kenneth M. Endicott, MD  
Administrator, HRA

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COVER—Old age often brings problems—social dislocation, loss of income, poor health. The authors of the article on page 403 seek to help medical care providers arrive at a better understanding of these problems so that the dying patient will receive the kind of care that will enable him to regard himself “as still part of a humane and caring society.”

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