Executive Summary

Science is currently engaged in the search for answers to questions about aging—in body and mind, in family and work, in politics and society. These answers would transform our lives and our lifestyles. They would add years, health, abilities, accomplishments, relationships, and meaning to life and aging. From biology to behavioral science, we stand at the threshold of discovery.

In November 1990, Congress authorized the Task Force on Aging Research to assess progress in the scientific understanding of aging, to advise where the search for these answers should be concentrated, and to make recommendations for allocation of resources in the support of research. The Task Force applauds Congress for its foresight in recognizing the importance of aging research, especially in a time of fiscal restraint, and for requesting the guidance of the research community in planning for its future support. After more than two years' effort by more than two dozen Federal agencies and scores of experts in the field of aging research, three overarching observations can be made that argue for increased support for aging research:

- Past research has provided an impressive knowledge base.
- The current aging of the American population and the coming tidal wave of aging baby boomers constitutes a compelling argument for increasing public investment in aging research.
- 3. Real potential exists for major scientific advances in the near future.

As stipulated by Congress, the Task Force has 38 members, including four Members of Congress (two from the Senate and two from the House); the Assistant Secretary for Health and the Assistant Secretary for Planning and Evaluation, from the Department of Health and Human Services (DHHS); the Surgeon General of the Public Health Service; the Under Secretary for Health (formerly Chief Medical Director) of the Department of Veterans Affairs (DVA); the Director of the National Institute on Aging (NIA) and representatives from other Institutes within the National Institutes of Health (NIH); the directors of six additional Federal agencies deeply concerned with aging research; and three members of the general public.

To accomplish its task, the Task Force reviewed past federal reports containing research recommendations and then solicited new recommendations from scientists, scientific and professional associations, and Federal advisory bodies. Drawing on the resulting pool of almost 2,800 recommendations and the expertise of their research staffs, Task Force members formulated their own highest priority recommendations for future research. In developing their recommendations, they gave special attention to the predominance of women among older people and to the changing ethnic and racial composition of the older population. The resulting 192 recommendations propose research initiatives that encompass a broad spectrum of issues:

- 1) Biological Processes
- 2) Diseases and Disabilities
- 3) Mental Disorders
- 4) Health Care
- 5) Social and Behavioral Functioning
- 6) An Aging Society
- 7) Economic Security
- 8) Social and Supportive Services
- 9) Special Populations
- 10) Research and Data Resources

To fully implement the research initiatives recommended by the Task Force, the \$841 million currently being spent annually by the DHHS and DVA on all forms of research on aging issues—biological, medical, health services, psychological, social, economic, and demographic—would have to be significantly increased over the next five years. The five-year total of approximately \$1.1 billion (in 1994 dollars) represents an upper bound to the estimate of required additional funding above current annual expenditures.

The recommendations contained in this report are those of the Task Force and do not represent the policies of the DHHS, DVA, or the Administration. While the Task Force deems them to be important and supportable, the recommendations were not made in the context of consideration of other competing high priorities and overall budget constraints.