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# THE NATION'S RURAL ELDERLY

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## HEARING

BEFORE THE

### SPECIAL COMMITTEE ON AGING

### UNITED STATES SENATE

NINETY-FOURTH CONGRESS

SECOND SESSION

### PART 6—ROCKFORD, IOWA

AUGUST 18, 1976

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- Part 2. Ottumwa, Iowa, August 16, 1976.
- Part 3. Gretna, Nebr., August 17, 1976.
- Part 4. Ida Grove, Iowa, August 17, 1976.
- Part 5. Sioux Falls, S. Dak., August 18, 1976.
- Part 6. Rockford, Iowa, August 18, 1976.
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(Additional hearings anticipated but not scheduled at time of this printing.)

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THE HISTORY OF THE UNITED STATES OF AMERICA

BY

W. H. RAY

THE HISTORY OF THE UNITED STATES OF AMERICA

## THE NATION'S RURAL ELDERLY

WEDNESDAY, AUGUST 18, 1976

U.S. SENATE,  
SPECIAL COMMITTEE ON AGING,  
*Rockford, Iowa.*

The committee met at 3:35 p.m., pursuant to notice, in the United Methodist Church, First Avenue and Third Street NW., Rockford, Iowa, Hon. Dick Clark presiding.

Present: Senator Clark and Representative Charles E. Grassley.

Also present: Deborah K. Kilmer, professional staff member; David Harf, legislative assistant to Senator Clark; Margaret S. Fayé, minority professional staff member; and Donna Gluck, resource assistant.

### OPENING STATEMENT BY SENATOR DICK CLARK, PRESIDING

Senator CLARK. Thank you very, very much. I really appreciate those of you waiting so very long for us. I apologize.

We have had five such hearings. This is the sixth of six hearings that we are holding in Iowa, Nebraska, and South Dakota.

I am afraid I got a little ambitious. I wanted to ride on one of these minibuses from Sioux Falls to Canton, so I did. I thought I could get down there and back to the Sioux Falls airport, but we didn't get to the airport until about 2 o'clock and you were waiting here at 2:30. Although the plane is pretty fast, by the time we got across Sioux City we were later than planned.

I sincerely apologize for being this late. As a reward, I am going to save you a speech. Instead, what I want to do is just tell you in about 60 seconds what the purpose of these hearings is and then ask Congressman Grassley if he would like to make a statement. We will then go right on with the first panel. In fact, while I am speaking, I wish the first panel would come on up and have seats here. I know John Beer, Paul Schroge, Mr. and Mrs. Judd and, I think, Harry Empting are here. Please come on up here while we are visiting.

We are very pleased to be here in Rockford. These are, of course, official hearings of the Senate Committee on Aging. Our professional staff is here at the table and all of the information is being recorded on a tape here by a stenographer.

### "FAIR SHARE OF SERVICES"

The purpose of these hearings, incidentally, is to try to find out what we ought to be doing in Government, uniquely for rural elderly people. Many of the Federal programs that have been developed over the years for the elderly, as well as others, have been primarily for the

purpose of metropolitan areas and, as is so often the case, people who live in the countryside, or people who live in small towns have not necessarily gotten their fair share of these services.

Now increasingly over the last few years we have been able to extend some programs, particularly congregate meals programs, some of the minibus programs, and so forth, into some of the smaller towns. We have a very long way to go, and that is what this hearing is all about; what kind of transportation needs we have, what kind of nutrition needs, what kind of health care needs, employment, and so forth.

Today our two panels are going to be emphasizing senior multi-purpose centers, and then the second panel is going to be talking about housing. Again, housing and senior centers in small towns—that is the whole emphasis of the hearing, so we are delighted to have you here.

I would like at this time to give the microphone to Congressman Charles Grassley.

**STATEMENT OF HON. CHARLES E. GRASSLEY, A REPRESENTATIVE  
IN CONGRESS FROM THE STATE OF IOWA**

Representative GRASSLEY. Thank you, Senator Clark. It is good to be here with you.

A year ago the Select Committee on Aging of the House of Representatives held hearings in the third district, so I know that I met some of you at that point. We discussed some of the same problems that Senator Clark is interested in hearing from your testimony.

I am not going to read my opening remarks. I am going to submit them for the record, Senator, if I may have permission to do that.

Senator CLARK. Yes.

Representative GRASSLEY. I had eight pages of remarks and they will be made part of the record, so if you have the record sent to you after it is printed you will be able to read them at that time.

I told you, Senator, I would have to leave for an appointment. I have to be there by 4 o'clock, so I will be leaving all of you. The gist of what I was going to say, Senator, revolves around the point that Congress, I think, basically has made a good start on programs for the elderly. I find, however, from oversight hearings held in the House Committee on Aging, that congressional intent has not been carried out as much as it should be. I will use just one example.

**ADMINISTRATIVE REDTAPE**

The point of my off-the-cuff remarks here is that I think that we have to alert the senior citizens in our district, in our State, and particularly their advocates that there are plenty of good programs on the books that are not being adequately made use of by them. Some of this is due to the administrative redtape in Washington. No. 1 is the combination of section 8 under Housing and Urban Development and section 515 under the Farm Administration.

Two years ago Congress mandated that those programs ought to work in tandem. We were just forever and ever trying to get the administrative redtape worked out and getting the necessary agreements signed so that that very good program could actually be doing some-

thing for people in need, particularly in the rural areas. I look at section 209 of the program. My remarks speak to that program as it is supposed to encourage better use of 202 funds. That is another example of a program where we have to work to make sure that the administrative machinery works as we had intended.

I am sure Senator Clark wants to hear your ideas, and of course I do, about new things that need to be done. We also want your thoughts for the record on how you think existing programs could be better administered, particularly as the bureaucracy in Washington is slow in sending down directives to the people at the lower levels of Government.

Senator Clark, I thank you for the opportunity to participate in this program and I will be looking forward to reading the record.  
[The prepared statement follows:]

#### PREPARED STATEMENT BY REPRESENTATIVE CHARLES GRASSLEY

Mr. Chairman, members of the committee, as a member of both the Select Committee on Aging in the House, and the Subcommittee on Housing and Community Development of the House Banking Committee, today's hearings are of particular interest to me. Just last year, the select committee held hearings in Iowa, and the trend of the testimony pertaining to housing for senior citizens was very interesting and enlightening. It became abundantly clear senior citizens prefer to live out their lives in familiar surroundings, if at all possible, and without constantly moving about. In other words, they prefer to live in their own homes as long as they possibly can, and as independently as is possible.

As a representative of over 60,000 senior citizens, I feel it is my responsibility to assist those who want to stay in their own homes to do just that. Clearly, there are a number of ways in which legislators can be helpful in this respect.

For example, programs already exist to assist older persons, via low-interest loans and grants to keep up their residences, and to insulate homes in order to keep utility bills under control. Less directly, but of equal importance, is our ability as legislators to keep down the rate of inflation, to eliminate laws which restrict the amount of income older persons can earn due to their receiving social security, and to minimize the estate tax burden on an elderly heir is crucial to assuring that the older person has enough funds to keep up his or her home. Last, but not least, the provision of social services, and companionship, through the establishment of multipurpose senior centers could well prevent many older persons who might need some sort of outside assistance from having to move into a more care-intensive surrounding.

Of course, some senior citizens, of their own choice or due to necessity (financial or physical), may seek shelter outside their own homes. Various Federal programs exist to assist many of these in finding suitable homes at a reasonable cost. I believe it is the responsibility of Congress to assure that such housing meets the variety of needs that an older person can be expected to face, in as efficient and economical manner as is possible.

Various Federal housing efforts are designed to meet this objective, though it is not clear that the objective is being met. For instance, there is a section of a Federal housing program administered by HUD which instructs the Secretary to consult with the Secretary of HEW in order to insure that housing projects are designed in conjunction with federally funded social service programs, administered through State plans for the elderly. The purpose of this section is not only to insure the coordinated delivery of housing and social services to residents of the federally backed project itself, but also to insure community participation in such services. I have recently written the Secretaries of the two Departments to determine what progress has been made toward meeting the requirements of this section, and feel that Congress must take the lead in seeing that its objectives are met.

#### ADDITIONAL HOUSING FOR LOW INCOME

Much work remains to be done, although some successes have already been realized. For instance, in June the Departments of Agriculture and Housing and Urban Development reached an agreement which should result in additional

housing for low-income, rural citizens, particularly the elderly. More will be said on this and other related matters in the text of my statement.

I am anxious to hear the comments of witnesses here today, and would greatly appreciate any suggestions you might make which could assist Congress in carrying out its efforts on behalf of senior citizens.

At this point, I'd like to briefly discuss some of the Federal programs which exist to assist elderly persons to keep up their homes, meet rental payments charged for clean and decent housing, to receive services, and interact with others at specific sights designated as multipurpose senior centers.

The section 502 and 504 programs, administered by the Farmers Home Administration, provide low-interest, long-term loans to assist with the purchase or repair of an owner's dwelling. The 504 program is of particular import for senior citizens because the interest rates on loans are very reasonable, and some grant money is now available. Funds appropriated under the 504 program can be used for home insulation, roofing repairs, electrical repairs, etc. In addition, the borrower or grantee need not bring his or her dwelling up to standard, which often is unrealistically costly and stringent. The 504 program, I believe, has a great potential to help senior citizens remain in their own homes.

In my opening remarks, I referred to a section of the Housing and Community Development Act of 1974 which is intended to promote the coordinated delivery of housing and social services to the elderly. Formerly, if social services were offered to elderly citizens receiving Federal assistance, members of the community not living in the assisted housing could not receive such services because they were paid for out of rent receipts.

However, the implementation of section 209 means that State plans for the delivery of services under the Older Americans Act or the Social Security Act may now be drawn up in conjunction with housing authorities. As a result, services might be offered at the sight of federally-assisted housing and yet elderly citizens who do not live in that housing could benefit. This, I believe, would mean much more interaction between the older person living in an assisted unit and his peers in the community. In addition, under the Older Americans Act and the community development block grant programs, funds are available for the establishment of and the provision of services through multipurpose senior centers. These, as mentioned above, could be located in federally assisted projects, particularly those developed under the 202 program (to be discussed below). Congress, this year, increased the funding for such centers in the appropriations bill for the Administration on Aging in HEW.

#### EXTREMELY VALUABLE PROGRAM

The 202 program basically provides Federal loans to nonprofit sponsors for the construction of housing for senior citizens. In conjunction with the section 8 housing assistance program which provides rental assistance to low-income households, this program should prove extremely valuable. It is fairly new, however, and thus not enough experience has been gained to assess its impact on meeting the needs of senior citizens.

The 202 program now contains some very important aspects which should prove of great value to senior citizens. For example, a senior citizen can now have a nonelderly person living with him or her in an assisted unit if that person is essential to the care of the senior citizen. Also, if a couple of which one member is a senior citizen, and the other is not, move into a 202 unit, and the older person passes away, the living spouse may continue to reside in that unit. This should prove of great value to spouses who might fear eviction due to the death of the companion, as well as the traumatic aspects of moving to a new home at an advanced age.

Finally, the Departments of Housing and Urban Development and Agriculture recently entered into an agreement which should facilitate the development of multiunit complexes for rural citizens, particularly those living on limited incomes. The agreement involves the Farmers Home section 515 mortgage interest subsidy program and the HUD section 8 assistance program discussed earlier. In October, I learned that the two agencies had the responsibility for administering these jointly, but were hindering their administration due to bureaucratic haggling. As a result, I began consultations with the two agencies to eliminate a number of administrative roadblocks. In June, an agreement was finally reached. Final regulations to carry out the agreement should be issued shortly. As a result, the development of rural housing for low-income citizens should increase.

All of the programs I've described, if administered efficiently and forthrightly can help make the senior years pleasant ones for many. Congress must

see to it that they are administered properly so that senior citizens do not suffer, and so that taxpayers' money is not wasted.

Senator CLARK. Thank you very much, Congressman.

Now we are going to hear from this first panel on senior centers. What we are going to do, so we will have some time for discussion, is to ask people to try to limit their remarks to about 4 or 5 minutes. Then, if you have more than that prepared, we will be happy to put your full statements in the record.

We are going to hear first from John Beer who is a member of the State Advisory Committee on Aging and a resident of Hampton, Iowa. As I understand it, Mr. Beer will discuss the housing needs of the very rural areas, such as Hampton.

Mr. Beer, we would like to hear from you first.

### PANEL ON SENIOR CENTERS

#### STATEMENT OF JOHN M. BEER, STATE ADVISORY COMMITTEE ON AGING, HAMPTON, IOWA

Mr. BEER. Senator Clark, Representative Grassley, members of the staff, other distinguished guests, ladies and gentlemen, in March of last year we had a meeting to discuss the needs of senior citizens, and they came up with five major ones including the handyman, chore services, transportation, senior centers, and the homemaker health aide services. I have not agreed with that myself. One of the greatest needs, I think, for some of the older citizens is companionship. All of these other services, to me, are supplemental to that one thing.

Now, speaking of housing, I live here near a little town—a town of about 150 population. In that town are five widow ladies living alone. Four of those ladies were married to men who worked for a living; they put in their whole life drawing wages. They accumulated enough to buy a little home. The homes of three of the instances are hardly livable—they need a lot of repair work. In fact, one of them, I think—if you repaired it, it would cost more than to build a new house. That, I would think, is vitally important—the same as in most small towns in the area.

In the town of Hampton, they had a survey they made several years ago which showed 300 people living alone, many of them in substandard housing. There were a great many more—I don't remember the number—of senior citizens who were not living alone. The program which was put out a year ago, I think, to help them with their housing needs—I have had quite a bit of trouble trying for the implementation of that.

In fact, one lady that I know of personally applied for help. They came to her in February—tried to call her. She didn't answer the telephone because she was in the hospital with pneumonia, and I was not very well pleased with that situation.

#### FACILITIES ARE INADEQUATE

There are other things in regard to senior centers. The senior centers go a long way toward helping alleviate the other conditions that exist and give people an opportunity to meet together, to have fellowship meals, or congregate meals in a senior center. In many of the small towns the center usually has a card table and some of them have a pool

table. They are small, out-of-the-way places without the equipment for anything more than that. They are far from adequate for the purposes outlined.

I had suggestions from the director of social services for housing needs such as low-cost housing, rest homes, and such as that. That left the problem of low-cost housing. The housing which we have is usually too high priced for that person who is living on social security in a home.

The next problem is to get to these people, and they don't like to be pushed around.

Senator, I think I have probably used up my 5 minutes.

Senator CLARK. That is a good start and we will be coming back with questions a little later.

Paul Schroge, I think, is a retired resident of Rudd. He is actively involved with the senior club at Rockford. As I understand, Mr. Schroge is going to explain the senior club's efforts to renovate the building that they have been given to use as a senior center, and the obstacles that they face in the process of doing this.

Paul, you go right ahead.

#### STATEMENT OF PAUL SCHROGE, RUDD, IOWA

Mr. SCHROGE. Senator Clark, ladies and gentlemen, and neighbors, I don't know just how to start this thing, but I tried to think of what would be interesting to everybody. I have some statistics here—population of area 2. The people 60 years or over make up 19 percent in area 2, which is quite a large number. Floyd County has 18 percent of people 60 years and older. The town of Rockford has 24.3 percent of people over 60 years old, and that is a town of about a thousand people, more or less. That gives us quite a few people to try to serve.

We have a very active group down here and our meeting place is right on Main Street. We are just a block from the post office, if that means anything to a lot of you. We are very small and we need more room. We have had some visitors here in the last 6 weeks. We had 52 of them there one afternoon, so you know that our people are interested in getting this center and would like to keep it going. I am enjoying the work that I am doing with these senior citizens. Of course, I am not a senior citizen yet; I am just a little bit younger than that.

Senator CLARK. That is the way we all are.

Mr. SCHROGE. I will be 69 in September, so you can guess from there on.

We have been fortunate dealing with the township trustees and, I think, the city of Rockford. We have had some buildings given to us. They are not actually given to us—they are on contract with a 99-year lease. We would like to redo these buildings. We could make them into a very good deal.

#### CONVENIENT LOCATION

One building joins right on to us. We have a pool table and we need another one pretty badly. We could move that over there and we could have a nice big senior citizens gathering. We have as high as 65 and 70 when we have pot luck, so there is a lot of interest here. As far as location is concerned, I don't believe that we could get a better location for our senior citizens center than we have right in Rockford,

because it is right on Main Street where we have a meeting. They can go downtown to the congregate meals which, at present, is working out as good as we can expect. Maybe if we remodeled and got things arranged we could have the congregate meals at the center. At the present time it is just impossible for us to do this.

I can't think of anything else that I could add to this right now, only that for us to do this, this meeting comes at a nice time so that we can say something on that and maybe get a little help.

I think that is all I have to say, Senator Clark.

Senator CLARK. That is fine. I do want to say—since this is on multi-purpose senior centers and you are talking about the needs that you have particularly, and Mr. Beer as well—for the first time now we have authorized and appropriated funds under the Older Americans Act that is called title 5 in which we provide for funding for the support of the acquisition, alteration, and/or renovation of these centers. Now that does not mean that everybody can get everything they want, but it does mean for the first time that we have acknowledged that this is a high priority.

I know in the next 4 months, in this period between now and the first of October, Iowa has been allocated almost \$75,000 for that purpose. Then, beginning October 1 of this year through October 1 of next year, there will be an appropriation of almost \$300,000. Now that is for Iowa alone I am speaking of and, although that is not going to go a long way, it is an important beginning. I think it does say, at least, that the Congress has seen what people have been able to do in these centers and feels that it is important.

Now we would like to hear from Mr. and Mrs. C. E. Judd of Thompson. Mr. Judd also has some experience in this whole business and we particularly would like to hear about those experiences in Thompson.

#### STATEMENT OF C. E. JUDD, THOMPSON, IOWA

Mr. JUDD. Senator Clark, Governor Blue, ladies and gentlemen, some wise person has said that a nation's greatness can begin with the manner in which it treats its old people. Most societies cherish their senior citizens, provide for them in their homes, and seek their advice. This was true in this country until about 30 years ago. Now our affluent society geared to the extravagances and conveniences of the young forces these people into comparative isolation to shift for themselves.

In many cases relatives have abandoned them, they are without transportation, and many live in poverty. These peoples have many problems and frustrations, but their most common complaint, regardless of health or economic status, is loneliness.

My remarks to the committee are directed to the need for senior centers, particularly in the small communities. The concept of the Government providing meeting places for senior citizens is certainly not new. A long time ago when I was young it was common practice to provide these meeting places in county and city buildings. The courthouse often contained a large meeting room on the ground floor dedicated to the Grand Army of the Republic and was available to senior citizens at all times.

These rooms were popular gathering places for the older folks. They had organized meetings. They had various kinds of recreation, reading material, and a place for sewing and quilting. With the coming of

many new government services, the courthouses and town halls became too crowded to afford the luxury of a meeting place for old people. In some places the men gathered at the barber shops and pool halls, but these establishments no longer tolerate them.

#### COMPETITION HIGH FOR AVAILABLE SPACE

It is very difficult in a small community to provide an adequate meeting place. In most cases the town councils are generous with the space they have but there are many demands for these meetings and they cannot be designated primarily for senior citizens, nor can they tolerate such groups who just want to spend an afternoon leisurely. In some communities the room made available is at the end of a difficult stairway.

In Lake Mills the senior citizens were elated when it was announced that provision was made for a center for them. The senior citizens did considerable work in planning to make the center a reality. Later it became a community center, rather than a senior citizens center. Apparently after some negotiation, the senior citizens have use of the center along with the rest of the community.

In many cases senior citizens in rural areas are reluctant to ask for help from government agencies—Federal, State, or local. They feel that in doing so they would be surrendering their independence. In Leland there is a strong senior citizens club which refuses to participate in any program or activity involving public funds.

Senator CLARK. What town is that?

Mr. JUDD. Leland.

Many professional people do not adequately understand senior citizens and they are often inclined to treat them as a kindergarten class assuming that a certain period of time can be devoted to reading, another period for exercise, and another for handicrafts—and all present will have to take part or receive a failing grade. These older people vary greatly in their backgrounds, education, mental and physical capacities, and do not all care to do the same thing at the same time.

However, I must say that our area agency staff is to be commended for their hard work and understanding of older people. A senior center should allow ample time and space for each to do his own thing, either alone or in small groups. The area agency on aging working with organized groups can be most effective in bringing its programs to the elderly if there is a senior center in the community, and in this manner the whole program can be more visible.

It is desirable for the entire community to recognize the presence of its seniors and generate support for their programs through public funding from county and local tax funds. Thus, the lives of these people can be enriched and the goals of the Older Americans Act of Congress can be attained.

Senator CLARK. Thank you very much.

Do you have a statement, Mrs. Judd?

#### STATEMENT OF MRS. C. E. JUDD, THOMPSON, IOWA

Mrs. JUDD. Yes. Senator Clark, Governor Blue, and friends I wish to direct my remarks to the senior center at Thompson where we live. Winnebago County has about 2,650 people over 60 years of age accord-

ing to the 1970 census, and of these about 650 are below the poverty level. About 10 percent of the population reside in the Thompson area. The percentage below poverty is about the same as the average for the county. The town of Thompson has a population of around 700 people.

A few years ago Mr. Judd and I made a count of the senior citizens living alone in their homes and there were 56. We may have missed a few. This did not include those who are over 60 who were living with either husband or wife.

In 1969 some of the seniors and other concerned people of the community decided it was time that the community took a hard look at what they were doing for their senior residents. Many things have been done for the young of the community, including much playground equipment, a swimming pool is in the process of being built, various summer recreation activities were being planned for, but nothing was done for the elderly; they were on their own. As a result, the senior citizens club, called the Young at Heart, was organized in the fall of 1969 with 65 members. The community and the town council were very helpful and a lot of interest was generated in this project.

A building which was located on Main Street would be available for our use. It was located on street level with only two or three steps up to the door. This we could use for fixing it up. It had first been used as a hotel but through the years had many tenants, sometimes standing empty, and each had taken its toll. It was in a state of disrepair.

It was then owned by the Veterans of Foreign Wars who had purchased it in part by donations from other groups and individuals. They did not have the money to repair the building so it was offered to the community for use as a place for group meetings. All they wanted to retain was the basement which they fixed up as a bar with an outside entrance and they wanted to retain one small room that they could use to store their equipment.

#### REPAIRS MADE IN JOINT EFFORT

The Lions Club and the senior citizens made extensive repairs to the building. They remodeled and repaired the front of the building, put in new doors, covered with plywood, carpet, and so forth. They paneled some of the rooms and painted others. They put in new ceilings and windows. They built a kitchen with cupboards, counters, and a sink, and remodeled a bathroom.

Organizations and individuals donated an electric stove, refrigerator, a hot water heater, a piano, a pool table, and other various supplies. As the membership of our seniors group is made up of people of many varied interests and skills, we were able to do a lot of the work ourselves or sometimes we got our kids to help us. We have card parties, food sales, coffee breaks, and rummage sales besides donations from members and others who raise the needed money to buy supplies.

The Young at Heart Club spent about \$1,000 from their treasury besides the many, many hours of work during the years. The Lions Club members also spent much money and time. As a result, we ended up with an adequate and cheerful center. There was much more repair being planned as time and finances would allow.

The town council was very generous and paid the bills for the heat, light, and water. We were able to get chairs, large tables, card tables, games, coffee pots, coffee pot liners, and so forth, from Federal and

State funds through the State committee on aging as it was then known. These moneys were administered by the OEO and Mr. Christian, from Mason City, was a great help in this.

When all was going fine, the VFW must have decided that it was rather a lucrative thing they might have in their building so they notified each organization that they would be charged a fee for the use of the building. The seniors were to pay \$10 each time we met and give 10 percent of the gross that we might have each time we had a fundraising activity. Other groups were to pay a larger amount.

A protest meeting was called by the organizations using the building and, as no satisfactory solution was arrived at, we all found another place to meet. The town council cut off their support for payment of the utilities so the building is again, after all these years, standing idle most of the time.

The town council again came to our aid and offered us the use of meeting rooms in the town hall for our meetings. We are able to meet here once a week in the afternoons from November 1 to May 1, and in the evenings the rest of the year. It is a very tightly scheduled place, though we are most grateful for what we have.

#### HOT LUNCHES PROVIDED

We have a congregate meals program in our town serving noon meals Mondays, Wednesdays, and Fridays. The Young at Heart is the sub-contractor for these meals. We rent a small, old school building from the school board for the meal site. During the school year we contracted the hot lunch program to prepare the meals for us and during the summer we had our own cook.

We will admit that we used poor judgment in not having a written agreement instead of a verbal one with the owners of this building in which we had the meetings for over 3 years but, as other groups had been using it with no problems, we went along in good faith. Our advice to other senior groups with like arrangements is to be sure you have a written agreement stating in detail all arrangements decided upon or agreed upon, or what you might contemplate you would like to do. We all think it never could happen to us, but it can, and in many cases it is only four or five individuals who can call all the shots.

Senator CLARK. Thank you very much. It sounds like you are really moving in Thompson. That is good.

Now I also want to hear, before we start our question period, from Harry Empting who is the coordinator for the senior citizens center in Mason City.

#### STATEMENT OF HARRY EMPTING, COORDINATOR, SENIOR CITIZENS CENTER, MASON CITY, IOWA

Mr. EMPTING. Thank you very much.

Senator Clark, ladies and gentlemen, what I want to talk about are some basic priorities. Recently there was a workshop at Fort Dodge and about 200 people attended. We were asked, "What are the three biggest problems with aging?" Those problems were, not necessarily

in this order: loneliness, fixed income, and health. What I have here is a flow chart and it looks like a Rube Goldberg deal with all the lines, but I will explain it.

What we have here is fixed income, health, and loneliness. What I have tried to show is how senior centers, in-home services, and the nutrition program connect into these three basic problems of the aging process.

What I wish to talk about is priorities. I don't think that you can talk about highfalutin programs without getting down to the basics. That is to say, people have to have a roof over their head, they have to eat properly, and they have to have some sort of social outlet. Now these are all basic requirements which all humans require; otherwise, they can die in more ways than one.

#### PRIORITIES MUST BE SET

In conjunction with priorities, I would like to get into workable programs. We have established a lot of priorities in the past without finding out whether they are workable or not. As an example, we talk about transportation as a high-priority item. I think transportation is a priority item; however, I think other areas such as senior centers, nutrition programs, and in-home services are much more important. Obviously you have to have some delivery of these services, but I think that we need to back up a little bit and get back to the basics in that there is really not that much money coming down the pipeline yet for all programs. I think it is important to implement the three previous areas because these are areas that the most needy people require the help in.

In the middle of the chart I have written "nutrition program, senior centers, and meal services". The nutrition program alone can provide a lot of the services that we are talking about. As an example, I have written on the chart that it can provide about the same services as senior centers. It can provide not only nutrition but social, recreational, educational, transportation, information, referral, and, probably one of the most important things, political awareness as well.

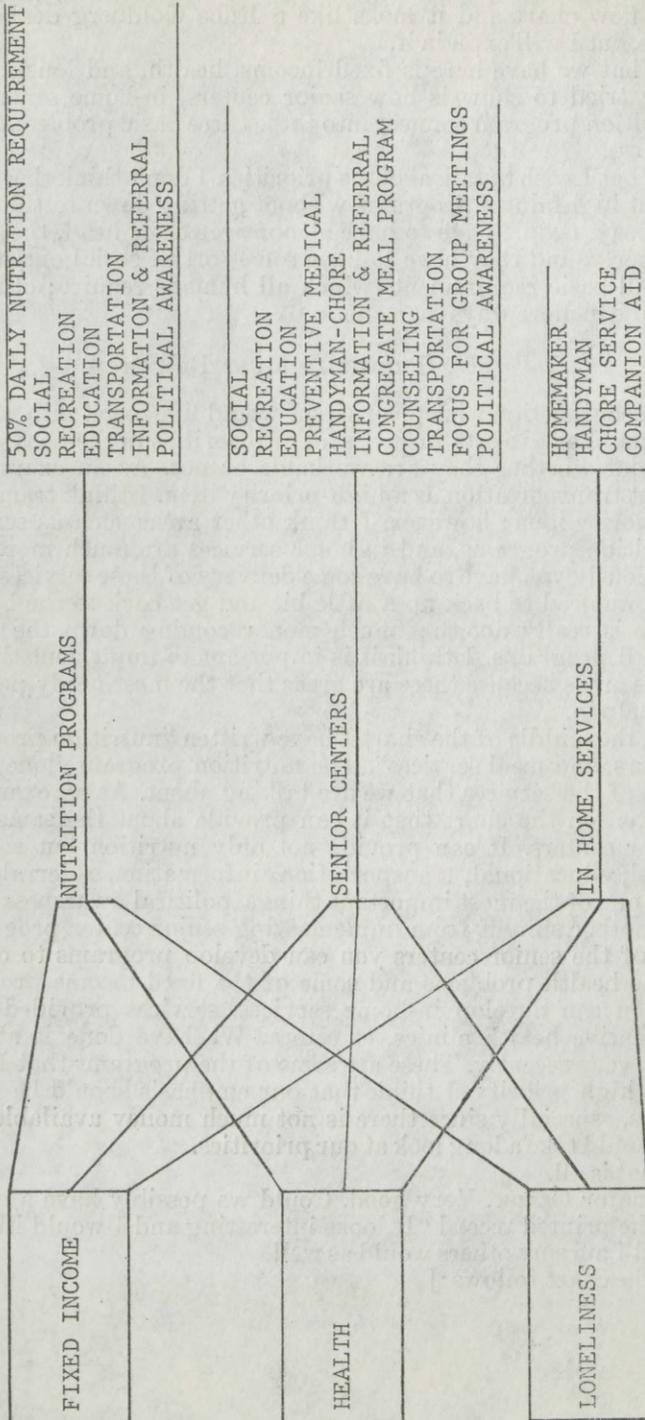
Another spinoff from implementing senior center programs is that out of the senior centers you can develop programs to combat some of the health problems and some of the fixed-income problems. That is, you can develop in-home services, services provided by seniors, preventive health clinics, et cetera. We have done it at our center very, very recently. These are some of the programs that I feel should have high priority. I think that our emphasis should be given to the basics, especially since there is not much money available. Basically, we should take a long look at our priorities.

That is all.

Senator CLARK. Very good. Could we possibly have a copy of that for the printed record? It looks interesting and I would like to look at it and I am sure others would as well.

[The chart follows:]

SENIOR CITIZEN PRIORITIES BASED UPON 3 MOST AGREED UPON PROBLEMS



Senator CLARK. It is difficult to quarrel with your priorities, it seems to me, but I am wondering about this—just in remembering back the five hearings that we have held in the last 3 days. We put a very heavy emphasis on transportation. How would you evaluate that in comparison to the three priorities that you mentioned?

Mr. EMPTING. This position of mine is not very popular, and it is an interesting phenomena. I think what happens is that there is, let's say, 20 or 25 percent of the people that are out there that don't get to come to meetings. That is why I especially wanted to be on this panel today. I think we all should be aware of the needs of these missing seniors.

In other words, we get a certain category of senior citizens that attend these meetings. I think they express input from a lot of people—like area agency people and people like myself.

As an example, I used to believe that transportation was a high-priority item and I convinced a lot of seniors that it was. I still think it is a priority item, don't get me wrong. But, not as important as senior centers, nutrition programs, and in-home services.

I think that another aspect of confusion in this area is that there have been studies done on transportation and, to be frank, I question the sociometric methods that were used and I question those methods in determining a lot of these programs. Of course, the basis for initiating these programs is some form of sociometric method. I don't mean to get complicated here but research methods are where these programs start from and this is where we get off on a lot of weird tangents. I hope I have answered your question.

Senator CLARK. Thank you. Mr. Beer, do the people of your community around Hampton utilize the benefits of this Older Americans Act? I mean by that the nutrition program, the transportation program, or any of the programs under the Older Americans Act. Do you have such things as homemaker or chore aides? What are the most valuable things around Hampton that you see under the elderly program?

Mr. BEER. The social services department has the homemaker chore service and the homemakers aides, and they reach quite a few people.

As far as the nutrition program, I hesitate to say exactly, but I think several years ago before we had any programs the group of people connected with different churches got together and established what we called fellowship meals. Those meals are still going. We served 133 people in Hampton last Friday. In the other area I think the last meal they had was somewhere between 80 and 90. These are all self-supporting. The same thing is true of meals-on-wheels. We have between 20 and 25 meals served to shut-ins 7 days a week.

Senator CLARK. These are all done by local church organizations rather than by any Older Americans Act funds?

Mr. BEER. They are all done by local people some of the time, but most of the time it is donated. We hire a cook and have a little money in the treasury, incidentally.

#### MEAL SITE DIFFICULT TO OBTAIN

As far as the nutrition through congregate meals, we are trying now to establish a congregate meal site. It is very difficult to find the location of a site; I make a little effort to find one. Most of them—the cost was prohibitive. One hotel asked me for \$1,100 a month for space in the

basement. Another building is available for \$95,000 to purchase which would be adequate.

Senator CLARK. Yes.

Mr. BEER. My recommendation would be to build one.

Does that answer your question?

Senator CLARK. Yes. That is good.

Now, Paul Schroge. In Rudd, what services would you like to have available in the center that you don't have now?

Mr. SCHROGE. I am not speaking for Rudd. I live in Rudd, but I am the last address on the mailbox.

Senator CLARK. Your address is Rudd, but you operate here obviously.

Mr. SCHROGE. Yes.

Well, like I say, we have got the congregated meals now and I would say they are operating as good as could be expected under the conditions.

If we get this remodeling done—and I am sure we are not the only ones that would like to have some remodeling done—we have a good setup and could use some more services. We could use a little more transportation assistance and a chore boy. Some of the seniors can't do their own lawn mowing or cleaning the yards. They all try, but that is the kind of thing that is hard for a lot of them. We get along well. They are trying hard with the services we have.

I was reading that Charles City got transportation not too long ago. We have no transportation. There is no bus route in Rockford. Unless you have a neighbor or call a senior citizen, there is no way to do this. There are plenty of them available, but we are all a little bit independent. If we can have the bus come in and take us out rather than call on our neighbor, it would be very nice.

Senator CLARK. Is there a chance that that could happen in the future?

Mr. SCHROGE. Well, we have another meeting scheduled for the third week in September in Charles City. We are independent and we don't care to bother our neighbors for this service. I don't think the average person expects it for nothing; they are willing to pay a little something toward this service. Of course we have another meeting in September. I don't know.

Senator CLARK. How many people do you have in your club here in Rockford?

Mr. SCHROGE. Well, at the present time I think there are probably around 70 some odd.

Senator CLARK. How do you raise money? I understand you have got some unique ways to raise money. What do you do?

#### VARIOUS PROJECTS RAISE NEEDED FUNDS

Mr. SCHROGE. We have got the gals here that can really get it. They have different things. They sell coffee and doughnuts and donate a little bit. They are all good hard workers and they are all willing to do their share. Yes, we have had a lot of fun. The ladies have a little deal there where they have a hat show and, boy oh boy, those old gals are really it.

Senator CLARK. Well, what is a hat show, or should I not ask?

Mr. SCHROGE. Where is our narrator? They put on some of these things that they make, all the way from gowns—one thing and another. They put on six or seven different things. My wife is in on it and when she comes home she is a new gal. [Laughter.]

Senator CLARK. I am not going to ask you any more. I read that story in Time magazine about Mason City, so I am not going to ask. [Laughter.]

I do want to ask the Judds a question, however. I believe it was Mr. Judd, and I am not sure, who talked about sharing the senior center facility with other groups in the community. What kind of effectiveness did that have? I mean, is that a good idea or a bad idea? Do you recommend it in terms of a senior center being used more broadly for other people, too, or what kind of results do you have in that?

Mr. JUDD. I think it was a real good deal as long as it lasted. I think a similar thing could be set up with control in an incorporated group where no one could take the building away. I think it is an ideal thing.

Senator CLARK. We were just discussing here that under the new title 5 program that I mentioned earlier, we are going to have about \$300,000 next year and about \$75,000 for the remainder of this year.

Let me ask Mrs. Judd a question. If we had some more money, what one service would you like to see come to Thompson that is not there, or what one service would you like to see expanded? What don't you have that would be valuable there in Thompson?

Mrs. JUDD. I think it is a little hard to say because each one—their likes and their background are different. I do think there should be something for people who don't care to play cards or do that sort of thing. I don't know just what. I think we would have to work it out. I know we have some in our group—that it is very hard for them to hear, and we have others who have difficulty seeing. There could be some sort of program that could be for those people. Now I don't think it could be done with the whole group, but we could have a place where several people could do things that they like to do, instead of everybody having to sit there and do whatever the majority is doing.

Senator CLARK. What about health care in Thompson? Do you have that?

#### “NO DOCTOR IN TOWN”

Mrs. JUDD. No, it is very poor. We have no doctor in the town. We did have a hospital with two doctors in Buffalo Center, but that is closed and the doctors have gotten—well, they have heard so much about the fun the senior citizens have they decided to be senior citizens instead of doctors. I don't know what else. Their health got bad and they quit. There is really no health care there at all. It is a problem.

Senator CLARK. You have been very good witnesses and we appreciate having you here and hearing your testimony. Certainly it has been very valuable to us. Thank you very much.

Mr. SCHROGE. I have one other thing. I want you to know that the senior citizens of Rockford want you to feel welcome and to look the city over. We enjoy having you here. The Methodists donated this church basement for this. I am glad to have you here.

Senator CLARK. Let me say in response, on behalf of the people here, that we are very, very grateful to you. I know that our staff who have visited you earlier—you made reference to that—have had the greatest

cooperation from you, from the seniors here, from the Methodist Church, from Reverend Robinson, from everyone, and we are very, very pleased that you would go to this effort.

Thank you very much.

Now our other panel today is on housing, as I said. We are going to be hearing from Governor Blue, Joseph Kempf, and Lewis Jacobson.

Let me say, by the way, we have green forms here—I think they are back by the door—and those are available for anyone to make comments on. They will go into the official record. It simply says:

DEAR SENATOR CLARK: If there had been time for everyone to speak at the hearing in Rockford, Iowa, on August 18, 1976, concerning "The Nation's Rural Elderly," I would have said.

Just fill it in and, if you need two, three, or four pages, we will take that. Just mail it to me. You don't really have to remember what the Washington address is; just Dick Clark, U.S. Senate, Washington, D.C. We will be very happy to put that in the record as if it were given here today.<sup>1</sup>

So please avail yourselves of those. We are going to keep the record open for about 30 days. That is, they have to be in our hands within about 30 days to do that.

This is, as I said, a panel on housing. We are going to start off with one of the most distinguished citizens of this State and a gentleman who has contributed, I think, as much, if not more, to the interests of older Iowans than anyone I know. I am referring, of course, to Governor Robert Blue, the former Governor of Iowa and a longtime member of the Iowa Commission on Aging.

Governor Blue, we are just very, very pleased that you are here. I know of your particular interest in housing, which is a longstanding interest. I know that you served on a number of distinguished national committees on this subject, so we are very pleased to have you. Proceed in any way you think appropriate.

## PANEL ON HOUSING FOR THE ELDERLY

### STATEMENT OF HON. ROBERT D. BLUE, FORMER GOVERNOR OF IOWA, EAGLE GROVE, IOWA

Governor BLUE. In the limited time that is allotted, I want to make a few points.

The first point that I want to make is that housing is more than four walls, a roof, and the other things that we think of. Housing is its neighbors, its sidewalks, its roads, its sewer, its water, but most of all its services, and a building that is not located where services are reasonably available is not good housing.

Down at the University of Iowa we have an institute on urban affairs that has been making some studies on accessibility. The more I see the problems that are related to housing, the more I think the Federal Government or other governments would be well advised to require an accessibility study and report before they put money into housing projects. This may be done in connection with some of the projects. I think it is not being done everywhere.

<sup>1</sup> See appendix 2, p. 404.

The accessibility, of course, that I speak of is churches, lodges, doctors, lawyers, dentists, drug stores, grocery stores, schools, and all manner of things that people are interested in because older people are interested in the same kinds of services that other people are. If they are deprived of those services or of their location, then they are being made second-class citizens, so to speak.

Senator CLARK. By "accessibility," you just mean the ability to get into it, out of it, and use it for it to be effective for you; is that it?

Governor BLUE. Accessibility may be that the service is a block or two away and they can walk to it. It may be accessible 10 miles away if transportation is available to them. So it will vary whether the service is accessible, depending upon the means of transportation. In other words, many elderly people are fully ambulatory and they are unable to go where they want to go on foot in the community. Many other people who might be ambulatory so far as walking a reasonable distance cannot drive an automobile because of being handicapped. So the two people might be equally ambulatory, but one would have services available to him whereas the other one would not.

Senator CLARK. I see.

Governor BLUE. I think this is a very major point where the Government puts money into housing.

Senator CLARK. That is right, Governor.

Governor BLUE. In rural areas older people generally have to provide their own transportation. A survey has been made as to the public transportation in the State of Iowa, and it is very, very inadequate. You either provide your own transportation or depend on public transportation.

#### TRANSPORTATION : A MAJOR PROBLEM

A lot of elderly people, as I have just mentioned, cannot provide their own transportation for a number of reasons. One is cost. Another is because of vision. Another is because of insurance. So there are many people who quite naturally provide their own transportation, yet don't use it if they can buy it. There are others that are deprived of it because they don't have adequate resources to purchase it.

I do raise transportation as something that is as large a problem as housing. If we are going to provide public transportation, it is going to have to be subsidized.

We have had some transportation programs in Iowa and a number of them have been quite successful. We have yet to accumulate adequate figures as to cost, and I think this is one of the things that is a priority—to get transportation costed out so that we will know what we are talking about. At the present time we do not know what the cost of these buses and so forth are. I think we will have those figures fairly soon.

Now when you get into the housing that we do have, I think we have an outstanding program so far as the Department of Home Administration is concerned in the State of Iowa. The last, I think, is 200 projects scattered across the State from little communities ranging from \$8,000 to \$10,000 in size. I do fault them, however, for one or two things. One is they will not build, so far as I know, garages in connection with the housing. Well, if they build this farmers home

apartment in a small community where there is no public transportation and they don't provide a garage, we have winter weather that gets pretty rough and these older people can't go out and scrape the ice off the car and run into all the difficulties. So I fault them in this regard.

Senator CLARK. They won't build any garages at all in connection with these?

Governor BLUE. They won't do it now. I have known a section or two, but the policy now, as I understand it, is they won't. I think this is important.

Senator CLARK. I never realized that before.

Governor BLUE. Well, I have got some support for that.

Senator CLARK. I am sure you are right. I just had never thought of it before.

Governor BLUE. You see why I would emphasize that.

As far as I know, they do not make an access to the facilities and services that are available before they commence to finance it, and I think this ought to be done by them. They don't require contracts for transportation. I think when they build the project they ought to have some agreement to see that transportation facilities were available, whether it is locally provided or otherwise, when they locate these buildings. Many of them are located in very, very small communities and the service, if it is going to be provided—the Federal Government is going to have to participate in it.

Now another thing I would like to emphasize briefly is that I understand there is legislation pending before the Congress now with reference to the insulation of homes.

Senator CLARK. Winterization.

#### WINTERIZATION PROGRAM NEEDED

Governor BLUE. Yes, that includes insulation. I think this is very important for two reasons. One, the group or widows alone cannot do this themselves and they need help; they need a handyman to do this. They may not have the funds with which to provide the insulation. Most of these older homes are drafty; they use an excessive amount of heat. The cost of heating fuel is rising rapidly—it is very inflated in price—with the result that people on fixed incomes are having new problems so far as heating their homes. This could be minimized and serve a national purpose. It would take care of a lot of elderly people and it would also help meet the energy problem just as much as in lowering our speed limits.

Senator CLARK. I might say, Governor, we have had two or three witnesses this week who have come in and talked about this winterization program, and it has been one of the most successful that we have heard about. For a fairly reasonable cost they have been able to winterize literally hundreds and hundreds of houses that elderly people live in.

Governor BLUE. Most of those just consist of plastic over the windows and it has to be taken off in the spring—it is not permanent—whereas insulation in the house would be a permanent improvement.

I would recommend further in connection with this that if homeowners were willing to go ahead and insulate their own homes, that they would be encouraged to do this if they could receive a tax break

on it. I would think, so far as landlords are concerned, this would present a situation where Congress might very well say, OK, investment credit can properly be considered for this kind of an improvement. I think this would stimulate a great deal of winterizing that would have long-term benefits, so I would urge this pretty strongly.

The handyman service was spoken of.

Homemaker service—the Federal Government's position is to keep people in their own home. You cannot keep a great many of these people in their own home without the handyman service and the homemaker service. We have it scattered around to a substantial extent in the State of Iowa, but not nearly so much as is needed. This program needs to be expanded, I would say, in every community in the State. Iowa needs the handyman service and the homemaker service if we are going to adequately serve the high proportion of elderly that we have in the State.

Now the next thing that I would like to rush on to is multiservice housing. I call it the Federal Government, because they build a lot of individual separate programs.

They may work pretty well in high population areas, but elderly people, when they go into retirement and move out of their homes, they want to make that the last move. So if they move and if they are ambulatory, they want that kind of service. They also want connected with that service an infirmary or nursing care, and they want to be assured of what kind of nursing care that is going to be when they make their move.

#### SPECIAL FACILITIES NEEDED

A lot of our housing programs are not geared to that 202 program. It is an excellent program, but it does not extend itself to cover multifacilities. People are individuals; some of them want their own room, some of them want an efficiency apartment, some of them want two or three rooms, other people want the nursing services connected. When you run into moving elderly people into a group setting, then you run into personality conflicts, particularly so far as the seniles and the mentally retarded. I, therefore, recommend that there be special consideration given to building facilities for the mentally retarded and the seniles.

Now the seniles and the mentally retarded cause no problem when they are in the nursing some, but if you have them on an ambulatory basis and try to mix them with people like we have sitting around here in this meeting who are intelligent, active citizens, it just does not work. We don't have that kind of a program, but I hope that we can have something along that line.

I don't know whether I have anything else to say or not.

Senator CLARK. I am going to ask you some questions in a little bit. Thank you very much, Governor Blue.

We are going to hear now from Joseph Kempf who is executive director of the Good Shepherd Retirement Association which includes four residential and nursing home facilities in the Mason City area. As I understand it, Mr. Kempf, you are going to talk to us about housing needs in the area, the number of units provided, the number of persons on the waiting lists, and general problems of housing for elderly in rural areas. You go right ahead.

**STATEMENT OF JOSEPH C. KEMPF, EXECUTIVE DIRECTOR, GOOD SHEPHERD RETIREMENT ASSOCIATION, MASON CITY, IOWA**

Mr. KEMPF. Thank you.

Senator Clark, Governor Blue, ladies and gentlemen, Good Shepherd consists of four complexes and it is a nonprofit organization sponsored by 12 Lutheran churches in the Mason City area. The health center and the geriatrics center are care centers that provide three levels of care for 287 people. The Manor downtown is a housing complex for elderly people and it has 116 apartments. Shalom Towers is a 93-apartment complex and 20 percent of those apartments are subsidized apartments.

Now, getting to the need as far as the elderly are concerned, if we are going to move our elderly out of the substandard housing or apartments, the only way that I can see this can be done so our elderly people can afford this is by subsidized housing. Our cost today in constructing apartment units makes it impossible for the people, at least the ones that come to our facility seeking housing. At least 50 to 75 percent of them cannot afford the cost of the housing. Our housing apartment rates for Shalom Towers are from \$98 for an efficiency apartment to \$145 for a one-bedroom apartment which I feel is quite reasonable. Still we have many elderly people on social security, their only means of income, who can't afford to live in these apartments. I will try to answer any questions you may have relative to housing for the elderly.

Senator CLARK. I will have some questions, I think, as we go along.

Now I would like to hear from Mr. Lewis Jacobson who is a resident of the Manor in Mason City, and I would like to know what his judgments are on this.

**STATEMENT OF LEWIS V. JACOBSON, MASON CITY, IOWA**

Mr. JACOBSON. Thank you.

Senator Clark, Governor Blue, ladies and gentlemen, in 1968 the Hotel Hanford Corp. of Mason City ran into financial difficulties, and while this was in progress the Good Shepherd Corp. in Mason City was looking for housing for the elderly. I was on the board of Good Shepherd at the time, so I knew what was going on. Good Shepherd acquired the hotel and converted it into housing for the elderly. They changed the name to the Manor and they restricted residency to people 55 years of age and over. It didn't catch on right away and we had a little difficulty getting the 70 units filled up. As a matter of fact, it went along at a rate for a couple of years at which it was not profitable to us. However, we managed to hang on to it.

In 1971, I was living in Nora Springs. My wife and I were both employed at the bank in Nora Springs. We owned a nice home, but my wife was becoming arthritic. This is a family thing and we knew from experience with other people's families that arthritis does not improve, it just gets worse. We needed to have less work than we required having our own home. We sold the home and we found an apartment to move into.

None was available in Nora Springs, but it is only 10 miles to Mason City so we took one of the apartments at the Manor in Mason City. We lived there 3 years and then, 2 years ago, we moved into a newly

finished apartment, so our accommodations are quite delightful at the present time.

#### AN IDEAL LOCATION

We think this is ideal. We are located right downtown. We are located within a block or two of the shopping area and grocery stores. We are in a health club where a lot of our people spend a considerable amount of time. We have churches of various denominations within just a short walk to the facility. The post office is only a block away. We have a doctor's clinic only a block away and our dentist is located in the area.

Since this facility was once a hotel, there is considerable space on the ground floor that is not readily convertible into apartments, so it has been converted to use for the people who live there. We have 116 apartments and this accounts for about 200 people. These had originally been the sample rooms in the hotel and they have now been converted into cardrooms. We have a pool table down there and we have large rooms where we can accommodate a large gathering of people. We have a library there. It is a very convenient place.

We are provided with one meal a day at noon. We also can get our own breakfast. There is coffee furnished and we can make toast and get our own breakfast in the public facility if we care to do so. However, all of the apartments have facilities for cooking. There is a beauty shop and a barbershop within the facility. Most of the people are retired and it makes for a very congenial group.

By living at the Manor we avoid the usual maintenance chores that you have with a home. Heat, light, and air-conditioning are included in the rental figure, so we don't have that to worry about. The place is privately financed—it is self-sustaining and paying its own way. We think it is a very fine facility and we are happy with the Manor.

Senator CLARK. Thank you very much. I want to ask you a couple of questions.

You talked about having left your own home and moving into the Manor. Is it a good idea? Are you happy with it? I am sure there are a lot of people here now or in the future who will say, "Well, I don't know about leaving my own home and moving into another place." Was it a good move for you?

Mr. JACOBSON. I have been asked that more than anything else, and my answer is that it was a very fine move for us. We are very delighted. Now my wife and I don't sit home very well—we like to travel. As a matter of fact, since we both retired a year and a half ago we have driven the family car 60,000 miles into Mexico, the United States, and Canada. We traveled to the Mideast, so you see we don't stay home very long. A lot of the convenience is the fact that when we want to go away for the weekend or for 3 months, we just pull the door shut behind us and go.

Senator CLARK. So both when you are there and when you are gone, you have a number of conveniences in terms of everything being taken care of for you.

Mr. JACOBSON. Yes.

Senator CLARK. Do you think there is much demand, for example, in Mason City or in this area for that kind of housing? I mean, is it your impression in talking with other people who are close to retire-

ment or in retirement that they would like this kind of facility, that they would like to move into it, or do we have an adequate amount now, in your judgment?

#### MANY RESIST CHANGE

Mr. JACOBSON. Oh, I think there is room for more of this. However, it is just surprising as you talk to people how tenaciously they will hang on to their home and do all that work and have all that worry, concern, and expense to maintain it. It just surprises me. I think this is a fine arrangement, but I do think that it might incur a change, and many people share my thoughts in this.

At the present time the Manor is full, and we have about 35 people on the waiting list. However, you never know exactly how many of those are happy. Some of them may come and make an application, then find out there is none available right now and will go someplace else and make other arrangements and not let us know.

Senator CLARK. I suppose the best thing is to have everybody make their own choice if they really want to stay—if they really want to go to a place like the Manor or anything of that kind.

Can you tell us the range of cost in living at a place of this kind?

Mr. JACOBSON. The range of what?

Senator CLARK. Cost; rental. What is the cost to live there?

Mr. JACOBSON. Oh, the range of cost. Well, it runs from about \$135 to about \$240. It is \$135 for an efficiency apartment, and then it runs up to about \$240 for two singles.

Senator CLARK. Mr. Kempf, just to continue this same discussion, I understand that Shalom Towers is a housing unit for the elderly with 93 units. That was supported by section 202 of the Housing and Urban Development bill. Is section 202 a feasible housing program as far as Mason City is concerned? How could it be improved to meet the needs of the people in this area around Mason City, and in the rural areas in particular?

Mr. KEMPF. At Shalom Towers, or any of the apartment complexes, we have many people come there who cannot afford to live there because their income is not great enough. So they go down the street and rent substandard housing apartments in the neighborhood of \$55 a month instead of \$98 a month. However, 20 percent, as I indicated before, are subsidized in Shalom Towers. The need we really have in Mason City right now is for subsidized housing. We could fill at least 200 units.

Senator CLARK. I was going to ask about that.

Mr. KEMPF. It is very substandard housing. People have to live in an apartment for \$35 and \$55 a month.

Senator CLARK. Do you have any plans for expansion of these facilities?

Mr. KEMPF. Yes. In fact, you probably are aware of the appropriations that were made for the next 3 years for the two programs under the section 8 program. I do not know, Senator Clark, whether those are subsidized programs or not. It was just passed recently.

Senator CLARK. If you really had the section 8, that is, if you really had a program which would supplement rents so that no one would have to pay more than a quarter of their total income in rent, and the

Government subsidized the rents, you are confident that there would be at least a couple hundred people.

Mr. KEMPF. We could rent at least 200 or more and get the elderly people out of the substandard housing.

Senator CLARK. Are there any services provided for elderly people who reside in these facilities, other than just a room?

#### SERVICES LIMITED

Mr. KEMPF. Well, at the Manor we do have cooking facilities and we provide one meal a day. Otherwise, they can do their own cooking in the apartment. The only service we provide is recreational service.

Senator CLARK. You do have recreational services?

Mr. KEMPF. Yes.

Senator CLARK. Governor Blue, I know you are aware that Iowa has various housing complexes for the elderly that were supported by HUD. There is a section 202 complex in Mason City, another one in Garner, and I think there is also one in Eagle Grove. Are the HUD programs, in your judgment, good programs? Are they working in the rural areas or do you have recommendations beyond those you have already made for better use of housing funds for the elderly?

Governor BLUE. Well, as I indicated, I think the 202 program should be expanded to offer at least nursing home facilities. I don't know what their present rate charges are. One of the things about the 202 program is the low rate of interest, and this is one way that the Federal Government can subsidize the building without getting hurt as much as they would in some other ways. The 202 program has been successful pretty largely because it has appealed to nonprofit corporations. Isn't that your experience?

In fact, this is a necessity, and churches and fraternal and labor organizations have been willing to get behind this kind of a program and that, I think, is one of the strengths of it. It has sparked interest on the part of churches and these other groups and got them involved.

Senator CLARK. Now I know that this new section 8 program—or the section 8 program, actually, of the 1974 Housing Act—provided for assistance payments to families who were on lower than average income and is to pay the difference between the fair market price and what the tenant can actually pay. Is that valuable, and do you think that that will work if it were able to get that kind of program in rural areas of Iowa?

Governor BLUE. Probably. It will work the same as the double income or the double homestead credit works. The problem is that the forms which these elderly people have to fill out are complicated. Even if they were rather simple they would get confused and need help in filling them out.

Senator CLARK. The emphasis of your testimony today is really accessibility. You are saying that whatever program we have, whatever kinds of programs on housing or nursing care, whatever program we can consider, we ought to give more attention—as the Government in authorizing these programs, in writing the regulations, and in defining the programs—to what you call accessibility.

Governor BLUE. Well, I emphasize that strongly, but I am also saying that older housing ought to be rehabilitated, and the Federal Government ought to get concerned with rehabilitating an older building. That is what I was really pointing to when I said “insulated.”

"IT IS NOT NORMAL TO LIVE ALONE"

There is another point that I could make. Somebody else suggested it today and I have thought about it a great deal. It concerns the large number of widows who are living alone in houses. You know, we were born into a family—we have a herd instinct. We were raised in a family, we go to school, we marry, we raise a family. It is not normal to live alone. A lot of elderly people down in Florida are shocking their children by shacking up together, so to speak, because of economic reasons. [Laughter.] This is common knowledge.

Senator CLARK. Yes.

Governor BLUE. No kidding. I can see no reason why it could not be socially accepted for two widow ladies to share a home together. They would have companionship, and two people can maintain themselves longer in a home than a single person can. This is not socially acceptable at the present time. I think it could be made socially acceptable and I think it would help solve the housing problem. I think it ought to be given some thought.

Senator CLARK. Well, I want to thank this panel in particular for a number of innovative and interesting ideas about what we are doing, how the housing is being used, for what purpose, and so forth.

Let me try, in a couple of minutes, to summarize what we have learned here today. I thought the first panel—Mr. John Beer talking about what has happened in Hampton, in particular in terms of developing their senior center, was good. Paul Schroge talked about how his center was developed and some of the interesting ways that they raise money—some of the services that are provided there, and how far they have come.

I thought certainly Mr. and Mrs. Judd from Thompson expressed that that community has done a great deal in terms of really beginning now to provide a broad spectrum of services. They point out particularly that they still need health care in Thompson, and that is characteristic, I think, of almost every small community in Iowa, the Midwest, and all across the country.

I thank Harry Empting, the coordinator at the center in Mason City and I hope he has left his flow chart<sup>1</sup> with us so the committee can analyze the priorities that he recommends.

I also thank this panel—Mr. Kempf for talking with us about the Good Shepherd Retirement Association, some of the things they have done, and the fact that they still have a great demand for further expansion of housing units. I am grateful also to Mr. Jacobson, who is a user of one of these facilities, for his views on what he considers to be a great advantage, at least from his and his wife's points of view, in terms of flexibility—going into a place and being able to walk away from it for weeks or months at a time.

I also thank Governor Blue for a number of ideas regarding housing, with particular emphasis on preserving those that are there so that people who choose to live in their own homes can have decent housing, the emphasis on rehabilitation of older housing, and then something that is a favorite topic of his—accessibility of the facilities. Of course it does not mean much if the facilities exist if you can't get to them.

<sup>1</sup> See p. 380.

## TESTIMONY SUMMARIZED

Lastly, I would like to try to summarize really what it seems that we have learned not only from this hearing but from all of the hearings combined. As I say, we have had six hearings: four here in Iowa, one in Nebraska, and one in South Dakota. We have heard principally from people who are over 65 years old themselves in terms of what they feel, what has happened, where they have been, what is going to happen in the future, and what the Federal role ought or ought not to be.

We have heard from a number of people who live on Indian reservations, for example, up in South Dakota earlier today. Of course with the emphasis on these rural problems, we really heard about six or seven things that can be briefly stated.

First we heard over and over again the necessity for transportation, which is part of what Governor Blue is talking about in accessibility—the fact that we must have mobility. If you are stranded out alone and you need to go to a doctor, a hospital, you need to get prescription drugs, groceries, or simply to see someone, transportation is a key to that.

We have heard from witness after witness these last several days about the need for health care in the smaller communities. We realize now that we are never going back to a time when we had a doctor in every small town, or hospitals in the numbers that we once had. But we do need some kind of extension out into the rural areas so that we have the basic kinds of health facilities, so that we have registered nurses—some kind of center or clinic, as small as it might be, in the smallest communities.

We have heard over and over about the need for housing. We have not had a single witness who said if they had more housing they could not use it. Every community we have talked to could use more housing for older people—there is always a waiting list—so that has to be emphasized. And not only new housing but, as we have heard here today, rehabilitation of older housing. We have heard many, many times, and particularly from this first panel today, of the importance of a multipurpose senior center. That is one key to many of the problems that we are talking about. Such a center enables people to come together socially, and also to come in contact with these other services that are being provided under the Older Americans Act and under some other provisions.

We heard a great deal in the last 2 days about the importance of employment for people over 55. We heard about the green thumb program in South Dakota—and now it is being started in Iowa—that hires people over 55 to do a great number of different things. We have heard of other kinds of employment problems. Again, as we have seen in so many of these programs, it is not just a case of employment, it is a case of the psychological factors that go with it—the fact that you get up every day and go to work.

## MANDATORY RETIREMENT CRITICIZED

Certainly we have heard—a pet peeve of mine, at any rate—the fact of mandatory retirement. Society thinks that somehow when you get to be 60, 62, 65, or 70, that you have to retire. I think that is just total nonsense.

There was talk about discrimination on the basis of race or sex. The fact of a mandatory retirement is not a good idea, and we have heard a good bit of testimony about that as well.

We have heard about other things—the homemaker programs and the chore aides who make it possible for people to stay in their own homes.

Then last—and in some ways first—the fact that people just do not have adequate income. So many of these things could be available if they simply had the income. We know statistically that in State after State almost half the people over 65 who live in rural areas live below the level of poverty. That just has to change.

Those are some of the major things that we have learned in these hearings. We hope now that we can go back to Washington with this information and convince other members of the committee, other Members of Congress, and those in administration that it is important to look at the unique problems of rural America when we talk about the problems of the elderly. If we are going to pass a new kind of national health insurance, we better be very careful that we know how that is going to be applied in the smaller communities like this one, the one I was raised in, and others. We must be sure that we have accessibility of health care, not just in the metropolitan areas but in the rural areas as well. In each kind of legislation that we pass we must keep a consensus of this fact, and in the distribution of funds, so the small communities have the benefits that larger communities have.

We thank you very much for coming and we look forward to seeing you often in the future.

[Whereupon, at 4:55 p.m., the committee adjourned.]

# APPENDIXES

## Appendix 1

### LETTER AND STATEMENTS FROM INDIVIDUALS

#### ITEM 1. STATEMENT OF JOHN SUTTON, PRESIDENT, WAPELLO COUNTY (IOWA) FARMERS UNION

I want to thank you for your leadership in bringing these important field hearings on the special problems facing elderly people in rural areas to Iowa, and to our neighboring States of Nebraska and South Dakota. We are glad you are asking the older people themselves to participate in the hearings, to tell you their story from their community, their county. They know the problems we have in our rural areas that complicate the lives of older people—lack of public transportation, lack of health care facilities and of doctors, lack of social services, lack of employment opportunities, poor housing.

When Senator Church, chairman of your committee, called these hearings, he pointed out that approximately 8 million persons, or 27 percent of all Americans, 60 years and older live in rural and farm country. That would mean over 750,000 older people live in rural areas in Iowa. He said, "There is good reason to believe that many are served less adequately than other older persons by Federal programs meant to help them." I am sure your committee, and other Members of Congress, will keep this in mind when you work on the renewal of the Older Americans Act in 1978.

Farmers Union has long recognized the need for special help for disadvantaged people in rural America. National Farmers Union sponsored the first study of poverty in America in 1964 and 1965 which was published under the title "Pockets of Poverty." This pioneering report was followed by the monumental study "The People Left Behind" by the President's National Advisory Commission on Rural Poverty in 1967. We have felt it is important for an organization of family farmers to help provide the leadership to develop programs to meet the needs of less fortunate citizens in their communities.

When President Johnson launched his "war on poverty," we felt there was a need for an employment program to supplement the incomes of older low-income people in rural areas. Many people had lost their farms in the rapid mechanization and growth of farm size in the thirties, forties, and fifties. We lost about 90,000 farmers in Iowa between 1940 and 1969 according to figures presented at our convention last fall. They moved to small towns with limited employment opportunities and lower wage scales. So many farmers and their wives reached retirement age with little or no social security credit or other retirement income.

#### EMPLOYMENT PROGRAM INITIATED

Recognizing this need, Jim Patton, then president of National Farmers Union, Blue Carstenson of his staff, and Lewis J. Johnson, Sr., president of the Arkansas Farmers Union and a member of the National Board, went to Sargent Shriver, head of the Office of Economic Opportunity in 1965, and proposed that an employment program to supplement the incomes of older low-income people in rural areas be launched. They said Farmers Union would act as sponsor of the program.

And so Green Thumb was started in five States. We have wanted the program to come to Iowa for a long time and are so happy that a small Green Thumb program is being started this summer (49 job opportunities). I want to thank you, Senator Clark, Congressman Neal Smith, and others in the Iowa congressional delegation for your successful efforts to get Green Thumb started here and expanded to a total of 28 States, Puerto Rico, and the District of Columbia.

We are glad the program could be expanded to 6,070 job opportunities with the new grant effective July 1, 1976, and to know you are working for additional expansion next year if the 1977 fiscal year appropriations bill for the Departments of Labor and Health, Education, and Welfare is enacted into law.

But we would remind Congress that there are over 5 million Americans, 55 years and older, who would be eligible for employment under such programs as Green Thumb. We estimate there are 70,580 who would be eligible in rural, non-metropolitan areas in Iowa. We have a ways to go.

We know our rural areas need the services provided by these Green Thumb men and women. In other States they do many jobs beyond the conservation and beautification, roadside parks and trails that the name "Green Thumb" implies. They work at a wide variety of essential, worthwhile facilities and services that local sponsors (local and county governments and nonprofit organizations) could not afford to have done otherwise—from deputy sheriffs to fire wardens, from nutrition aides to teachers' and library aides, museum attendants, painting the fairgrounds, or helping to refurbish the county courthouse. They serve as drivers for rural transportation projects. They do outreach work, taking people to the doctor, or to buy groceries, or to the senior citizen center for dinner and a visit. They work at housing repair and winterization for other low-income people. And always the work they do would not otherwise be done—so they do not deny jobs to younger people needing work, which is important with our unemployment rate still standing over 7.5 percent.

Green Thumb provides the opportunity for older rural citizens to participate in the life and work of their community and increases the security provided by the wages they earn. And their wages are spent on Main Street where it is estimated that each dollar turns over seven times before it leaves town. Rural communities gain and save about \$10 for each dollar used on Green Thumb projects. The return to the Federal Government is at least \$5 for each dollar expended in wages.

So we hope you will be able to expand Green Thumb and other such opportunities for our older people.

And we hope you will expand the other programs covered by the Older Americans Act. The nutrition program under title VII is a great investment for America because people well fed are able to meet other problems of being old and alone. Meals-on-wheels is so important to older people without transportation in rural areas and in our towns. But there are so many people who are not able to have these services—which might keep them out of the much more expensive nursing homes, expensive to themselves, their families, and the Nation.

You and others here can speak in more detail about the other programs developed under the Older Americans Act. But we know they are needed in rural Iowa as well as other places. And we know they are a good investment because if we can keep people in their own homes, in their own communities it is cheaper, better for them and their families and our society, and a lot cheaper too.

Again, we appreciate the opportunity for you to hold these hearings and for us to participate in them. We support you in your effort to make life better for our senior citizens.

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## ITEM 2. STATEMENT OF DONNA DAVIS, HAWKEYE VALLEY AREA AGENCY ON AGING, AND PEG ANDERSON, CHAIR, IOWA WOMEN'S POLITICAL CAUCUS

### PROBLEMS OF OLDER WOMEN IN RURAL AREAS

#### INCOME

First, the rural or small town older woman's problems start with the fact that she is female and therefore likely to be one of those who are or become the poorest of the old, themselves poor in much higher numbers than their proportion of the population. It's double jeopardy being old and female.

For example: Using 1970 census data from selected counties in northeast Iowa, we find that even in one of the richest rural counties, 20.2 percent of the older population was below the poverty level. When we look at the age distribution of that "rich" county's poor, we find that more than a third (34 percent) are 65 or older.

We know that most of these are women, because: (1) Women are a higher percentage of the senior population in general; (2) the rate at which females

outnumber males increases as they go toward later old age; (3) because poverty intrudes on those who live long (medical costs, etc.); (4) the poorer aged are often those who live alone and women are 65 percent or more of that group; and (5) because cultural and economic factors all her life have made the woman's earnings (and access to a good social security pension) considerably lower than a man's.

These women and others now 65 and older have generally been brought up to a higher dollar income, thanks to SSI (supplemental security income). But before we reassure ourselves with that and turn away, let's see what that new income level is: Under the July 1, 1976, rules for SSI, the maximum a person can have as income is \$2,144 per year, plus medicaid and food stamps. That still doesn't put them above the poverty line in 1976.

This brings us to some recommendations we'd like to make today, regarding Federal programs designed to help low-income older persons. Many of these recommendations are available to you, Senators, and to the public in an outstanding report by the Federal Council on the Aging, entitled, "The Interrelationships of Benefit Programs for the Elderly," published in December 1975.

Participation of older rural families in means-test Federal programs is not as good as it could be. Although we do not yet have actual hard figures on this, the experience of the staff and volunteers of the Hawkeye Valley Agency on Aging shows that many older rural persons who are probably eligible for Federal benefit programs requiring a means-test do not participate. To prevent this in the future, the attitudes, culture, and education levels of older rural and small town people should be considered in the development, improvement, and administration of benefit programs. They should not be demeaning, threatening, or complicated to apply for and get deserved benefits.

#### RECOMMENDATIONS

(1) We recommend more uniformity in eligibility policies and application procedures, realism in benefits and in assets exclusion (adjust both to the cost of living; currently, SSI benefits are up, but with property reevaluations up and asset limits the same as when the program started, some people could be disqualified without any real income gains to justify it).

(2) We recommend that programs should not penalize people for trying to be more independent and supplement their social security incomes with earnings; such a system hurts most the rural poorer person who doesn't have an "excluded" additional pension income (frequently, the rural older woman).

(3) In consideration of the physical and psychological accessibility of various application centers for the several Federal benefit programs, we recommend the serious consideration of single-point application centers for all programs, located in each county.

(4) Recognizing the culture of small town life, we urge that publicly identifiable stigmas be removed from Federal benefit programs designed for low-income persons. (We hear reports every week of older women who, despite their need and full information about the program, will not take food stamps, because "everyone in town will know" that they are poor.)

(5) Even more effort should be made by administrators of benefit programs to simplify and clarify information on programs. Specifically, this means: Write brochures, speeches, and correspondence in plain, easy English. Print information and application materials in large print, not only because of eyesight problems of some older people but also because research has shown that easy-to-see information is more likely to be read by anyone. (Has anyone here ever had trouble reading and understanding a social security letter or pamphlet?)

(6) Eliminate policies of benefit reduction rates (such as those for veterans and dependents benefits) that actually reduce benefits more than 100 percent of the value of the increased money (whether that money comes from working or from another Federal program, such as increases in social security payments).

(7) Correct the discrimination against aged widows whose husbands' birth-dates were before 1912.

Finally, we recommend amending the Employee Retirement Security Act (1974) which still allows a worker to "opt out" of automatic survivor benefits for a spouse, without the consent or knowledge of the spouse (read: "wife"). And study the actual economic and social effects of discouraging survivor benefits for the usually longer-lived female.

## HEALTH

Older rural people as a group have poorer health care than older urban people, probably for two reasons: First, less access to health care in the immediate area made lifelong preventive health care difficult and impractical. Second, the already high cost of medical care (out-of-pocket expenses for health care are higher now than before medicare) is compounded by the cost, not only of getting to the city or big town but also by the proliferation of specialized health care practitioners needed to treat the whole person.

Medical and health care costs are high for all older people (but proportionally higher for the poorer older woman who outlives a meager or even an adequate income). Medicare doesn't cover the costs of long-term, chronic conditions; it is these that often deplete even the moderately healthy retirement income.

What is needed for the rural and small town older person (who, you understand, is usually a female) is access to low-cost health care of a preventive type (such as health screenings) or for care of chronic health problems. That health care screening should include tests that meet important health care needs of older women: nutritional histories and analyses and Pap smears, as well as the usual blood, urine, and other screening tests provided in such clinics.

We know that the need for, and participation in, health screening or well-elderly clinics would be great in rural counties, based on reports of pilot project programs being run in Iowa right now; but they need to be more widespread. The recent opening of a donation-only community clinic, composed of volunteer physicians and nurses, in Waterloo brought calls and inquiries from many in small towns and rural areas in the surrounding counties; county councils on aging are talking about the need in their own counties. The known need is acute; the hidden need is no doubt much greater.

## TRANSPORTATION

Like income, transportation affects almost everything else of significance in the lives of older rural and small town women, and here especially the fact of being female has had a profound effect.

In the generation which is now the 65-and-older age group in Iowa, there are a great many women who don't drive, not because of lack of money, but because of a sex-bias in their generation that discouraged either their learning to do so or their continuing the practice once it was learned. These moderate-income older women then join the substantial number of less well off (or physically unable) older women and men who need and use transportation services for the elderly in their counties.

The issue of how to provide transportation services to older people in rural areas has been much debated in Iowa. Mass transit approaches waste resources, due to excessive dead-head or down-time of large vehicles going empty over long country routes, and high operating, maintenance, and depreciation costs. The recommendation we would make, then, is that the Federal and State governments should provide more funds to aging programs to continue and expand urgently needed rural transportation for older persons and should focus on the use and development of networks of locally based volunteer drivers who are reimbursed for mileage and maintenance. This system is best equipped to provide door-to-door, on-demand escort and transportation services needed by older and often infirm users of the service.

## HOUSING

In 1975, across America, housing costs equalled 35 percent of an older person's income on the average. At the same time, people under 65 spent only 23 percent of their incomes on housing.

Home ownership is the main asset of rural older persons, outside of their social security pensions. And yet in 1973, 60 percent of all substandard housing was located in rural areas; older people occupied one-fourth of these, a proportion far higher than their portion of the population.

So the question arises: Should we try to maintain and/or bring up to standard the housing of older women in rural and small town areas? Or should more moderate and low-rent housing for older people be sought for these counties?

Although with the existing boom in the housing market, it is no longer so difficult to sell large, older homes most rural elderly prefer to remain in the familiar surroundings of their own home. Solutions in these cases might include alternatives which do not require selling the home. These include funding handy-person services to assist in the maintenance of the home of an older person or in the adaptation of that home to physical disabilities of the resident. Title III Older Americans Act funds have made this kind of program available to more and more rural older women. Major repair and winterizing efforts, administered by the Community Service Administration programs (formerly, community action programs), in rural counties have helped a portion of the lowest income older population. It should be noted here that Farmers Home Administration low-interest loan programs to upgrade substandard rural and small town homes of elderly have not been widely utilized by eligible persons. One reason for this is the fear of incurring any debt in the face of low, fixed, or declining resources.

Moderate income housing through Farmers Home Administration loans to community sponsors have been popular in Iowa. However, increasingly we hear older women saying that the rents on these are too high for many of them. Rent subsidized housing for older people would better meet the need. Requirements that at least 50 units of housing be built at a time has discouraged the establishing of these HUD 202, section 8 housing projects in rural areas. But a solution is available. Rural counties can join together to set up a regional housing authority to sponsor new construction of rent-subsidized housing.

A final comment on housing: New projects designed for the benefit of older persons should be located as much as possible in a location that mixes the older residents with neighbors of other ages. Too often area agency on aging staff hear the comment, "I live here among only the old, the sick, and the dying. It makes me feel bad." The health consequences of this self-image can be powerful and negative.

#### SENIOR CENTERS

Income loss affects not only access to necessities but also the amount of social involvement and interaction a person can engage in. Friendships, one of the best things in life, may be free in and of themselves, but the activities which friends share often cost some money.

There is an appetite for social life in the small towns and rural areas that generates a better turn-out to social events than in the big cities. Senior citizens' gatherings in small communities in Iowa—a monthly potluck or dinner, or a daily title VII nutrition site meal—draw good crowds. We are not sure what the real reasons are but certainly the evidence is clear that such events and places, offering as they do the companionship, group involvement, and an opportunity for volunteer work and cooperation, are much valued. Rural areas seem to show a great obvious need for senior centers and a high probable use of such facilities. Indeed, where already developed, they provide the ideal place for a single-point information and service center that has so long been missing from the rural resident's life.

#### ITEM 3. LETTER AND ENCLOSURE FROM THOMAS D. GARRY, PRESIDENT, HERITAGE APARTMENTS, BANCROFT, IOWA; TO SENATOR DICK CLARK, DATED AUGUST 18, 1976

DEAR SENATOR CLARK: I am president of Heritage Apartments and we have built four six-plexes which now total 24 units, financed by the Farmers Home Administration, and they are located across the street from the community center and are rented to elderly citizens.

The Farmers Home Administration does not provide a community center in their projects. We have checked this out several times and most of the tenants could use the community center. The attached article applies to us and I ask, are we wrong in trying to build a better community for our senior citizens? We had cooperation in the past, but in the last 2 years all of our efforts are in vain. "Keep up your spirits," advised Ben Franklin at age 80, "and that will keep up your hopes." This we have believed for 2 years—we can't hold our breath much longer. The senior citizens would appreciate cooperation.

THOMAS D. GARRY.

Enclosure.

[Article from the Saturday Review, Aug. 7, 1976]

## THE WILLY LOMAN COMPLEX

(By Albert Rosenfeld)

Jacob Jensen (a fictitious name, invented by his psychiatrist) was, by almost anyone's standards, a happy and successful man. He was the second-highest-paid executive in the company where he had started as a stock boy, right there in the same town, 37 years ago. He had a lovely wife, lovely children and grandchildren, plenty of money, and excellent health, and he was a respected figure in his community. Now, suddenly, as he approached 60, his board chairman had given him a stark choice: early retirement or transfer to South America.

Jensen had never given a thought to retirement. There had always seemed plenty of time to get ready for that distant event. The quiet confrontation with the chairman of the board has so unnerved him, however, that he soon found himself in the office of Dr. Herbert Klemme, at the Menninger Foundation, for psychiatric counseling. Klemme, recognizing that Jensen was in serious emotional trouble, advised his employers that either of the alternatives they were proposing would be psychologically disastrous. The company relented and gave Jensen a lesser—though still important—job, and 2 years to prepare for retirement.

Even under these revised circumstances the patient got worse instead of better. Nine months later, writing Jensen's case history, Dr. Klemme summarized: "Mr. Jensen is . . . agitatedly seeking release from the pain he is experiencing. Because of the severity of his distress, I referred him to the very competent psychiatric facilities available in his local community. He is severely depressed and at this writing suicide is a definite possibility. . . . In my opinion he is also a prime candidate for a severe debilitating physical illness: stroke, acute coronary heart disease, cancer. . . ."

Do many people, in real life, commit suicide for such reasons—as the fictional Willy Loman did, under somewhat similar circumstances, in "Death of a Salesman"? Yes, they unfortunately do. A decade ago Dr. Sidney Cobb, of the University of Michigan (now at Brown), kept track, for 2 years, of 100 automobile workers who had been laid off from their jobs. Their suicide rate was 30 times the rate that would normally be expected. They were, moreover, afflicted with a considerably higher-than-average incidence of nearly all the major diseases. These were younger men than Jensen, and their unemployment was only temporary—though it may have seemed like forever to them, and the emotional effects were equally profound.

Case histories such as Jensen's are all too common.

But it should be emphasized that they are not typical. Nor, are they as common as was once believed. Dr. Robert N. Butler, Director of the new National Institute on Aging, says in his Pulitzer-Prize-winning book, "Why Survive? Being Old in America," "There is much mythology built into the notion of an emotional and physical condition known as the 'retirement syndrome,' characterized by anxiety and depression. People who retire do not automatically develop declining mental and physical health. What social-science studies we have indicate such generalizations to be a fallacy." An intensive study made in 1957—at McGill University by James S. Tyhurst, Lee Salk, and Miriam Kennedy—of several hundred pensioners of the Bell Telephone Co. of Canada revealed that most retirees actually were able to make satisfactory adjustments. And, according to Dr. Bernice L. Neugarten, of the University of Chicago, writing 14 years later. "Three-fourths of the persons questioned in a recent national sample reported that they were satisfied or very satisfied with their lives since retirement."

Many people, in fact, seem to become happier, even healthier, after retirement than before—especially those who didn't care all that much about their jobs anyway and who have other interests they had always wanted more time to pursue. A retiree often has more opportunity to take care of himself, to eat and exercise properly, to get enough rest, to enjoy play and leisure without guilt, and still derive much satisfaction from continuing to work fruitfully—though, preferably, not too competitively. Most long-lived people do continue to work at something; it can be physical, mental, or both. Some people find themselves working even harder after retirement than before. Their attitude toward what they do is all-important.

Mark Twain used to insist that he never worked, only played. Challenged by friends who knew how many hours he spent writing, he would reply that writing was not work.

Even though the human organism does deteriorate with age, many people in their later years take up sports and other vigorous activities they never tried before, developing new skills, new muscular strength and physical endurance, new powers of coordination. Even sexual powers, though gradually diminishing, are still present and employable essentially throughout life. In many cultures, says Dr. Jean Houston, director of the Foundation for Mind Research, old age is expected to be the most satisfying stage of life—as with Browning's Rabbi Ben Ezra: "Grow old along with me! / The best is yet to be, / The last of life, for which the first was made."

New powers of mind may also be developed late in life—the ability to concentrate, to meditate, to turn off unwanted thoughts, to expand awareness and consciousness. In our society, says Dr. Butler, "we rarely find anyone paying . . . attention to the growth of wisdom in the individual" with age. Though people are slower to learn as they age, their intellects are generally unimpaired, and they are perfectly capable of new learning of every variety. Many of the brain's cells do die as we age. Even so, it's a cliché that we never use more than a fraction of our potential brain power. Most people in our culture have been trained mainly to use the left side of the brain—the hemisphere that deals with rational thought, logic, verbal skills, and the kind of mathematics computers can do, too—while neglecting the right hemisphere, which governs visual, spatial, integrative, creative functions and the kind of information processing that no known computer can yet simulate. (See "Left-Brain, Right-Brain," by Roger W. Sperry, SR, August 9, 1975.) While some of the brain's capacities may atrophy through disuse or never be developed at all through lack of stimulation, what remains may still provide new abilities, new insights, new aesthetic appreciation. Pianist Artur Schnabel is still playing brilliantly at 89—some critics believe with greater depth and sensitivity than ever. Grandma Moses didn't start painting until she was 74, and gained increasing worldwide fame for her creative efforts until her death, at the age of 101.

It should not be surprising that, in the absence of any chronic organic disease, a positive outlook on life can have a positive effect on both our physical and mental functioning. Nor, in view of what we now know of the intimate interrelations between "mind" and "body," should it surprise us that the opposite is also true—that many retirees, like Jacob Jensen, do not successfully make the transition.

After studying long-lived people in a diversity of cultures, Dr. David Gutmann, of the University of Michigan, concluded that "active mastery . . . is the ego state most clearly associated with longevity." Not power over others—but a sense of being master of one's own life and circumstances. In another study of longevity, covering 2,000 subjects over a period of 19 years, Dr. Robert Samp, of the University of Wisconsin Medical School, noted that an important ingredient was a continuing interest in the future.

When these two factors are missing, their opposites—helplessness and hopelessness—tend to take over. Thus the well-known "giving up" syndrome, with its serious physiological consequences. There exist many anthropological accounts of primitive tribes whose members go off and die simply because a powerful shaman has told them they will die, or because they have been cursed by a witch (Elsbeth Huxley tells such a story of one of her father's Kikuyu garden boys in Kenya), or because they have learned, in the words of Dr. Jerome D. Frank, of Johns Hopkins, "that they have inadvertently broken a taboo," which causes "a state of panic and excitement leading to death in a few hours." There are also stories of American prisoners of war in Japan, Korea, and Vietnam who gave up in similar fashion. Dr. Barbara B. Brown, in "New Mind, New Body," tells the story of a convict who was appearing before the parole board, which recommended his immediate release from prison:

"A moment after release was ordered, a court deputy read a summons from another State ordering the prisoner to be transferred to another prison to serve an additional 10 years. As the order was read, the prisoner collapsed, dying. My friend, in the next building, arrived within minutes. Resuscitation procedures were instituted immediately, but it took all the resources of experienced medical treatment to recover the patient. There was no heart attack, no asthma attack, no cerebral stroke; there was, in fact, no physical reason that could be detected in thorough examination to account for the imminent death. The prisoner ad-

mitted that he could not face further imprisonment and had simply decided to die."

A classic experiment was done in 1957 by Dr. Curt Richter, of Johns Hopkins. A rat was thrown into a tank of warm water; it swam valiantly for 60 hours before succumbing to total exhaustion. Richter held a second rat in his hand; though it struggled mightily, it could not break his grip and finally stopped trying. At that point Richter dropped the rat into the water. It splashed half-heartedly, rather than swam, for a few minutes, then went down. In Richter's view, he had taught the rat held in his hand to be helpless. And it died, in the water, of sheer helplessness.

What happens, physiologically, to bring about such startling effects.

Back in prehistory, especially before our ancestors learned to fashion weapons, the human individual lived a life fraught with danger at every turn. In order to survive, he had to react instantly to any threat. There was no time to think about what the danger represented or to reason out his alternatives in dealing with it. As a rule, with an attack imminent from either an enemy or a wild beast, he had only two alternatives—to defend himself or to run away: the famous "fight or flight" situation. There had to be built-in biological systems that would alert and energize the body's resources to act with the necessary swiftness. We are the inheritors of the biological systems that still perform today much as they did then—though we can seldom fight or flee. Animals can often get rid of their frustrations by engaging in "displacement activity." A herring gull, for instance, if put in a threatening situation in which it can neither fight nor flee, will start pulling up grass with great energy. We may, of course, take out our frustrations on some innocent third party—but more usually we take them out on ourselves. If it happens frequently or continuously, the result can be any of a whole range of psychosomatic or psychogenic ailments, some of them serious and life-threatening.

Jacob Jensen, faced by his board chairman, probably reacted very much as one of his Pleistocene ancestors might have in the presence of a saber-toothed tiger. The alert signal went instantly from his cerebral cortex to his hypothalamus, the more primitive brain center that controls the autonomic nervous system—with its complex networks of sympathetic and parasympathetic nerves—which also encompasses the endocrine system with all its hormone-secreting glands. His pituitary triggered a whole series of hormone releases—especially the adrenal hormones—affecting almost every organ system in his body. Sugar and stored fats were mustered for the instant use of nerves and muscles. His blood pressure and pulse rate went up. His circulatory and respiratory systems were accelerated. Red blood cells multiplied to supply more oxygen to his cells and carry off the excess of carbon-dioxide wastes. In case of wounds from the expected attack, his healing apparatus and coagulatory chemistry would have to be mobilized. The digestive processes would come to a halt, being postponable in such an emergency. All this and more happened, quickly and spontaneously, Jensen probably tensed up and grew pale. His Pleistocene ancestors would probably have grimaced visibly, even growled. But civilized men in offices cannot behave in that manner.

Another way of describing the fight-or-flight reaction would be to call it a stress reaction. We do not think of it as stress, however, if we discharge it immediately. Besides, as Montreal's Dr. Hans Selye, the world's leading authority on stress, has repeatedly emphasized, a certain amount of stress is necessary to life and health. When it keeps happening, however, and when we cannot cope with it adequately, that is when we perceive it as stress. And that is when it begins to do its physiological damage.

Jacob Jensen obviously perceived himself to be in a stressful situation—the permanent loss of his job—that he was helpless to cope with. It meant constantly elevated blood pressure, elevated cholesterol levels (another consequence of stress), a harder-working heart and lungs, overactive glands: in a word, his body was in an abnormal state of constant emergency from which he could find no relief.

In instances such as the sudden death of prisoners and primitive tribesmen, it's been theorized that the passive, giving-up-the-struggle mood activates a parasympathetic reaction—little understood—that slows down a number of body functions, including the heartbeat. That the heartbeat can be slowed to a lethal level can be demonstrated by Dr. Richter's autopsy on one of his drowned rats: the rat's heart was still full of blood that it couldn't pump out fast enough; it had probably suffered heart failure through helplessness, thus was dying anyway before it drowned.

We can begin to see now some of the ways in which mind and body are related and why attitude and mood can have such far-ranging physiological consequences, both positive and negative. "Keep up your spirits," advised Ben Franklin at 80, "and that will keep up your bodies."

But spirits can be hard to keep up under some circumstances, particularly under the often anxious and troublesome conditions of retirement and aging. If the attitude and mood of older people have a lot to do with their state of health, those attitudes are frequently the result of negative attitudes toward them by the rest of society. It's well known that our self-esteem often depends on how we are perceived—or think we are—by others. Most older people are not so fortunate as Jacob Jensen—who had family, friends, money, and other kinds of support to fall back on. Many have only themselves, and very little money or outside support. Dr. Leo E. Hollister, of the Veterans Administration Hospital in Palo Alto, Calif., believes that "unrecognized depression may be a more important problem in old age than organic brain conditions. . . . Poverty, isolation, and some drugs used in treating physical conditions may impair the mental capacity of the aged. Such reversible impairment often is thought to be permanent senility."

Depression, like stress (depression is, of course, a form of stress), has a striking effect on brain chemistry. Indispensable to the proper functioning of brain and mind are the substances known as neurotransmitters—those chemicals (notably the catecholamines) that are responsible for transmitting electrical signals across the synaptic gap from one neuron to another. (See "It's Not All in Your Head," by Seymour S. Kety, SR, February 21, 1976.) Lowered levels of some of the catecholamines—such as serotonin and noradrenaline—can, in fact, cause depression biochemically. Dr. Jay Weiss, of Rockefeller University, has made a special study of the effects of lowered norepinephrine levels in rats. Stress does lower norepinephrine levels to the point where the animal then is simply not able to organize itself to act protectively in a threatening situation; the chemicals necessary to transmit the messages across the nerve synapses are just not there—at least not in sufficient quantities to do the job. The same kind of deprivation could be taking place in those afflicted with the retirement syndrome.

Dr. Frank writes in "Persuasion and Healing" of a northern Australian tribe known as the Murngin. Among the Murngin, "when the theft of a man's soul becomes general knowledge, he and his tribe collaborate in hastening his demise. Having lost his soul, he is already 'half dead.'" Other tribe members perform mourning ceremonies and make clear what they expect. The victim's efforts, under the circumstances, are not to live, but to die.

Before we put down the Murngin as "barbarians," we should look to ourselves. When we force a still-vigorous individual to retire, do we not, in a sense, steal his soul? The more fool he, of course, for permitting his employment to become his soul, to be so easily stolen.

## Appendix 2

### STATEMENTS SUBMITTED BY THE HEARING AUDIENCE

During the course of the hearing, a form was made available by the committee to those attending who wished to make suggestions and recommendations but were unable to testify because of time limitations. The form read as follows:

"DEAR SENATOR CLARK: If there has been time for everyone to speak at the hearings in Rockford, Iowa, on August 18, 1976, on "The Nation's Rural Elderly,' I would have said:"

The following replies were received:

MARY ASTOR, GREENE, IOWA

I know the needs of the elderly. I get into their homes—they trust me. Home improvement is important, so is transportation; but at the top of the list is medical aid. Persons living on social security should not have to spend \$10 for a doctor appointment just to have something checked. We do, at our North Butler County nutrition site, check blood pressure once a week. I work under title VII Hawkeye Valley Area Agency on Aging and we have put to use everything that has been offered, such as transportation, handy person, and nutrition projects. I think we are far ahead of some, but this medical aid needs attention. We don't even have a county nurse—and only about three active doctors in county.

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A. W. BEHRENS, MARCUS, IOWA

I, Msgr. A. W. Behrens, now of Marcus, Iowa, formerly pastor of St. John's Church, Bancroft, Iowa, and chairman of the Bancroft Low-Rent Housing Agency, state that I organized the Senior Citizens Club of Bancroft and the congregate meals program in January and February of 1975. This project has been most successful under the capable leadership of Adelia Ulses and now operates 3 days per week and is serving meals out of the community center. I have written many letters, made many phone calls, attended several meetings in Mason City and Des Moines in regard to this matter, and the minutes of the Bancroft Low-Rent Housing Agency show an agreement that if the city of Bancroft would fund the operational costs, that the alteration would be approved. In the interests of the senior citizens of Bancroft, I sincerely hope so. The statement of understanding between the Administration on Aging and HUD concerning the nutrition program for older Americans means nothing on the local level if it is interpreted by rules and regulations contrary to the intention of the signers of the statement.

I can only hope and pray that the elderly will receive some benefit from this program.

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GOODIE V. BLAIR, OSAGE, IOWA

Do we in Osage, Iowa, have to have the land to be able to borrow money for new apartments, or can we borrow for land to? We need more low-rent housing here. What we really need is housing that we can get government help with the rent. And shouldn't we have sidewalks to our apartment building? We don't. We have to walk the road or across bumpy ground and stone parking lots.

The Lutheran Church in Osage has meals for elderly once a month at \$1.50. Riceville has them too, and an envelope to put what you can afford to pay into—no set amount. But lots of people are in our boat. Can't afford to drive that far and pay even \$1.

Hamlin Garland is eight blocks from one grocery store and nine from another. Thank you very much for taking the time to read this and I will be looking for an answer.

---

G. ORLANDO BRENNAN, ST. ANSGAR, IOWA

Enjoyed the hearing but was sorry there was no opportunity for audience participation. Many of us thought it was still a cut-and-dried deal.

My interest is mostly on housing for elderly. We have two Government agencies on housing—namely, HUD and FHA. Under HUD rental cannot exceed 25 percent of renter's income. FHA is housing at cost—namely, the apartments are built with 3 percent Government loans and rent being just enough to cover the cost of operation: taxes, utilities, sewer and water, lawn mowing, snow removal, etc.

I favor the FHA method, but find that the elderly can no longer afford housing at cost because of increasing costs. We cannot compete with HUD in rent and it seems to me that both agencies should be more equalized. We still have the urban-rural battle.

Under FHA regulations we must have so much surrounding ground area according to size of building, which is very good to a certain extent, but I think it is overdone. For instance, in St. Ansgar we could have three two-bed apartments and two one-bed on one location, and six one-bed apartments on the locations we already have if it wasn't for this ground building ratio we have to comply with. HUD builds high-rise apartments and we can't even build a two-story building—at least they frown on its suggestion.

Hoping my gripes haven't been too burdensome.

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DANIEL BRUSTKERN, MASON CITY, IOWA

You sought a comment concerning accessibility. As a staff person of the Iowa Easter Seal Society and a concerned citizen, we are concerned about accessibility for all people. Handicapped people of all types have difficulty in getting around. We know that buildings built by tax dollars must now be accessible. What about all the buildings and facilities that are in existence? It should be a tax incentive to rehabilitate or remodel existing facilities. The handicapped, seniors, children, any person with ambulatory needs have difficulty in navigating steps.

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HARRY G. BUNGE, OSAGE, IOWA

The building of low-cost housing for low-income elderly could be expedited, I believe, if the land cost could be included in the total cost of the FHA program, especially in those cases where low-income housing units have been built and in use for several years.

The experience we have had in Osage with the two Hamlin Garland apartment homes or units is that the occupants are friendly neighbors, one to another, and the fellowship they find in visiting, raising small patches of flowers and vegetables, and the friendly rivalry is heartwarming and enriches their lives. But transportation is available on call, at 25¢ one way.

Transportation is very important. We found that riders were hard to get in the beginning, even though our bus was kept invitingly clean and our driver is as fine a person to take care of the riders as anyone could be. The attitude of all connected to the bus service is one of joyfully serving the total needs of the elderly. It takes time to develop a following, but we are gaining right along and the future looks much brighter. Our driver, anxious to please, took out one seat and got a board for a ramp so he could wheel a wheelchair person up the ramp without removing him from his chair. The attendant is not charged for the ride. Such concern spread, and more and more people are using the bus—a 15-passenger maxibus.

All of the programs are good and needed; however, since there is such variance in the needs of the various areas, the programs should be carefully fitted to the needs of the various areas and needs.

It is heartening to see help available, financially and otherwise, for many elderly who, because of misfortune, adversities, bad luck, etc., became elderly with few worldly goods. All of us are in accord with this thinking. I wonder if this attitude might not have been, or is being, abused by many who seem to be of the opinion that suddenly and automatically when you get to be 60 years old you become poor and not able to make your own decisions as you used to. The Government has to provide finances and programs to keep you occupied and solvent.

On the other hand I believe that there are many elderly who are asking, "Not what can I squeeze out of the Government, but what can I do to help my neighbor?" in the same spirit that President John Kennedy asked at his inaugural: "Ask not what can my country do for me, but rather, what I can do for my country?" Senior citizens should become aware of the needs of others and take care of them as they are able. In our senior citizens group we have done a lot of this; namely: Collecting and preparing items for handicapped at Handicap Village, Woodward, and Crestview; helping with three blood pressure screenings; arranging to help with the swine flue shots; providing quarters for the poppy sales; helping with cancer, Easter seal mailings, and stuffing; bus tours conducted to various places; responsible for the senior citizens Mitchell County bus; and many other needs as they come up—visiting sick, deliver meals-on-wheels, etc.

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RALPH CAYLER, BANCROFT, IOWA

I hereby state that I am publisher of the Bancroft Register, a weekly newspaper published in Bancroft, Iowa.

As a public service, every week we publish an article by Adella Ulses, manager of the congregate meal site, and also an article by the activities director of the Heritage Nursing Home, as well as the visiting list at Heritage Nursing Home. All three of these columns are well received by our readers and attached is a copy of these columns from our newspaper.<sup>1</sup>

We feel that the community center alteration would be justified as money well spent for the senior citizens of the community. We also know that it would be used extensively by the senior citizens of the community.

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PHIL DOOCY, BANCROFT, IOWA

I am president of the Bancroft Chamber of Commerce, which organization of some 50 businessmen unanimously approve the alteration project of the community center so that it can be used and benefit the senior citizens of the community. This project has unqualified support by the people of the community. It would be an example of money actually being used by the senior citizens for which it was intended.

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RAY M. FAIRHOLM, DENVER, IOWA

I think it's time to separate the welfare programs from social security and from the programs for the older folks. It should not be necessary to be poor, black, or pregnant to receive aid. Also the administration of the elderly is too costly. All or most of the money meant for the older person is skimmed off by social workers. Even our State commission on aging is not above taking all they can get. I am president of the Hawkeye Valley Area on Aging (10 counties). I am 73 years old. Aside from my social security, I need no other help, but I see others who do.

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WALTER A. FANGMAN, BANCROFT, IOWA

I am city clerk of the city of Bancroft and attached find copy of Minutes of the council as requested by HUD for the approval of the community center

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<sup>1</sup> Retained in committee files.

alteration. This provides that the city would fund the operational costs of the community center up to \$600 a year.

[Enclosure]

SPECIAL MEETING OF BANCROFT CITY COUNCIL, MAY 17, 1976

The special meeting of the Bancroft City Council was held at the community center at 7:30 p.m. on May 17, 1976.

The meeting was called to order by Mayor Pro Tem George W. Kockler. Councilmen present were: Stanley Lowe, Mike Schiltz, and Jim Summitt. Absent were: Joe Welp, Jr., and Roy A. Fox, mayor. Also present were the board members of Low-Rent Housing Agency.

The purpose of the meeting was to discuss plans of the new addition to the community center.

After discussion, it was moved by Summitt, seconded by Schiltz, that the city give the Low-Rent Housing Agency funds to maintain the new addition to the community center not to exceed \$600 annually. Voted: Ayes: Lowe, Schiltz, and Summitt. Nays: None.

There being no further business to come before the meeting, on motion by Lowe, seconded by Schiltz, and carried, the meeting was adjourned.

GEORGE W. KOCKLER,  
*Mayor Pro Tem.*

Attest: WALTER A. FANGMAN,  
*City Clerk*

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THOMAS W. GARRY, BANCROFT, IOWA

We have a sincere problem for our rural Bancroft elderly—lack of rooms for meals for them. Along with meals are also many social gatherings, which also lacks space. In this day and age of inflation, which is the hardest on our elderly, why could there not be something done to give them an area to meet, talk, and play with respect, instead of limited area to do these things—a place their age and hard years of service deserve?

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ELIZABETH S. JOHNSON, MASON CITY, IOWA

One of the prime concerns in providing for people 60 years of age or older is to avoid the temptation to herd them, failing to remember that while they are in one age category, they remain people with specific personalities. One of the real needs of anyone is the ability to realize his personal worth and to achieve this, he must feel that he is a contributing member of the society in which he lives. He may be handicapped at an older age by limited income, by role loss, by health problems, but, above all, he must be able to retain his identity and his dignity as a human being. Having lived more than half a century with probably more than 40 years of experience in earning a livelihood for himself and others, other than the experience he has gained in simply living as long, he has too much to offer society to be shelved or placed in a position where his gifts are withheld from those who can and should benefit from them. Not to be able to give of himself lends to his frustration, depression, and finally to his defeat. To be able to do so gives him worth in his own eyes of those he serves. He is able to channel his experience and knowledge where it can benefit his community and he finds himself busy, interested, and alive.

It is to assist the older person to retain his sense of worth, to give him channels for giving of his experience and knowledge where they are of value, to help him retain his vitality and zest for living that the retired senior volunteer program exists. The person who is herded, who is patronized because of his age, loses his dignity as a person. It is true that he may need assistance to remain economically able to contribute, through transportation programs, through nutritional food programs and the like, but he also has an equal need for being satisfied with his role as a senior member of our society. As a member of society he has the same needs that anyone would have—the sense of worth, the dignity of being a unique individual with a contribution to make to the total welfare of everyone. No one remains a vital, contributing member of the total society when they are out of contact with other members of that society. Grouping people by chronological age is unnatural and deteriorating to the personality.

It is for that reason that an abject fear exists among older people of becoming dependent and being relegated to a euphemistically named "retirement" home. No matter how well they are physically cared for and no matter what is done to inspire activity, because the situation is an unnatural one, it defeats the personality of the older person and society is the loser. The problems of the older American must be met but with respect for the cultural differences which exist.

The great thing about the retired senior volunteer program is that it is the individual who is important. It is the primary concern of the professional staff of an RSVP project to see that the personality of the individual is not diminished in any way by his participation as an RSVP volunteer.

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C. L. KELEHER, BANCROFT, IOWA

I am Msgr. C. L. Keleher, pastor of St. John Parish in Bancroft, Iowa. In Bancroft, we have about 20 apartments for the elderly and a small community building, all constructed about 10 years ago with HUD funds.

About 2 years ago a program of congregate meals was set up in the small community building, for it was the logical location for such a project. The congregate meals program has been very successful, for not only have most of the residents of the apartments come for meals, but many of the nearly 100 senior citizens of the community also come. As a result, the community building is extremely over-crowded at meal time.

The local HUD board approved an enlargement of the community building, but we have been unable to obtain permission from the State HUD board. The reason given by them at a joint meeting of the local board and State board recently in Des Moines was that our enlargement plans went beyond the limit of their guidelines.

Could there be some consideration given to giving more flexibility to the HUD guidelines for community buildings?

Thank you.

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JAMES KENNEDY, BANCROFT, IOWA

The community center building enlargement program in Bancroft was started to assist the congregate meals program. The large number of elderly who are now enjoying hot meals three times a week in our community center building is a tribute to the staff and the planners of congregate meals.

We have tried to use the funds that are already allocated for modernization, but cannot get approval from the Des Moines HUD office. They state that building a larger community room and feeding the elderly is not their area of concern.

We would direct your attention to a report by a Special Committee on Aging of the U.S. Senate, number 94-478, page 32, last paragraph: "Added cost for footage and construction because of nutrition program funds requires serving eligible low income elderly from the neighborhood as well as occupants in a development." This seems to me to be quite clear in its meaning and intent. Why should it be so difficult to understand for a government agency such as HUD?

I am sure that your office is well aware of the problems that the local housing authority has encountered. You have been sent copies of correspondence from the HUD Des Moines office and a representative from Senator Culver's office was at a meeting of the local board with the Des Moines HUD people.

We would appreciate your help. Thank you.

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WILLIAM A. KENNEDY, BANCROFT, IOWA

I state that I am president of Heritage Nursing Home, a 40-bed community nursing home directly across the street from the community center in question. Living within 300 feet of the community center are 20 occupants of the HUD project, 24 occupants of the Farmers Home Administration project known as Heritage Apartments, and 40 occupants of the nursing home. We have an active arts and crafts program and other programs at the nursing home and our

ambulatory patients are able to visit back and forth with friends in the HUD program units and also in Heritage Apartments.

The community center is so small that accommodating only about 20 people is worse than no community center at all and is therefore unsatisfactory to any program dedicated to the senior citizens. Pending for over 2 years has been their application for alteration. They have started a retired seniors volunteer program to operate out of the community center since we thought the community center would be altered but this project is being held in abeyance pending the final decision on this matter. Also, the transportation van is being held up since it was to be housed in the community building garage alteration, so you see the future of the senior citizens is definitely dependent on the progress of the community center alteration.

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H. J. McNERTNEY, BANCROFT, IOWA

I, H. J. McNertney, make the following statement in regard to the alteration of the community center which has been pending for more than 2 years, and I have been a board member since the Low-Rent Housing Agency was started some 5 or 6 years ago.

So as not to be duplicating the record, I am enclosing a copy of my letter<sup>1</sup> of June 14, 1976, to which there has been no reply. This sets forth most of the facts, minutes of the local housing authority's meetings, and other pertinent data as it pertains to the pending alteration.

I must state first that the local board has worked hard on this project for the last few years and the fact that there is on hand some remaining funds out of the modernization grant which we received has been due to their hard work and effort. This all started when we received a modernization grant of \$100,000 to correct drainage problems and other problems. Two bids were received in excess of \$50,000 and through the efforts of the local board the low bidder submitted a bid lower than \$20,000. Despite pressure and advice to not accept the low bid, the board did accept the low bid, work has been completed, and there is a remaining balance on hand. The board has worked hard to save this money. The board is securing a bus so that the elderly will have transportation and, according to letter dated September 17, 1975, from the Des Moines HUD office, it appears that the garage can be approved in the form of a storage building provided it is detached. This interpretation is agreeable with the board and we also feel that this interpretation applies to the alteration versus addition argument that has been ongoing for some time. In one of the attachments to my letter of June 14 appear the minutes of the local board meeting of April 19, 1976, wherein our executive director having visited with representatives of the Des Moines office reported that the only way the project would be approved would be if we would secure an agreement from the city to fund the operational costs. This also I can verify as this was the agreement which I had secured from the Des Moines office and this was the agreement under which we secured the resolution from the city to fund the operational costs of this alteration to the operation of the community center.

The statement of understanding dated April 7, 1975, between H. R. Crawford, Assistant Secretary for Housing Management, and Arthur S. Fleming, Commissioner, stated that they were to pledge their diligent efforts to foster close cooperation and continuous liaison among the various agencies and to review from time to time the product of this collaboration and new potentials that may emerge. The action steps provided that HUD will be instructed that modernization funds can be utilized to accomplish alterations necessary in community space to accommodate meal preparation and service. We feel the community center can be so altered and architects have been employed and have reworked the plans three or four different times, all with HUD approval and have come up with a final plan which has been termed an addition rather than an alteration. All of the statements and principles to help the elderly and all of the money appropriated to help the elderly is meaningless unless it is translated at the local level and gets to the local elderly in terms of help. Much money has been spent by HUD in administrative road blocks, bureaucratic redtape, and repetitious paperwork, to stop this project from helping the elderly of the community. Regardless of this, on behalf of the elderly, many people have spent money, time, and sacrifice, written letters, made trips and telephone calls, because the cause is right. These people and the elderly of the community's vision of a community

<sup>1</sup> Letter and attachments retained in committee files.

center alteration can be realized if HUD officials would interpret the rules and regulations in a cooperative and fair manner in accordance with the intent of Congress and the signers of the statement of understanding referred to above rather than to engage in intentional administrative delays, intergovernmental paperwork and indecision, and bureaucratic autonomy.

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FRANK O'CONNOR, BANCROFT, IOWA

I am maintenance man at the HUD program, also Heritage Apartments and Shannon Apartments, being a total of 66 rental apartment units plus the community center next door, and part of this complex is the Heritage Nursing Home, a 40-bed home.

In this community of 1,100 people are approximately 380 elderly. Therefore, I am dealing with our elderly—our surplus senior citizens. Our elderly are put out to pasture with nothing to do here in Bancroft. We are wasting our human resources, our elderly; they have no place to go and socialize or do anything. We do have the small community center which holds about 20 people. They serve congregate meals in shifts but there is no room for arts, crafts, socializing, or any other senior citizen activities.

For the last 2 years I have seen the elderly and heard them plead for alteration to the community center and although local people and groups write or call, they are delayed and receive no response. They are in a desperate state of despair and I hope that the senior citizens of Bancroft can be helped by providing an adequate community center for congregate meals, the transportation program, the senior citizens volunteer programs, and the other programs that they are working on.

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MARY V. O'CONNOR, BANCROFT, IOWA

All of us are aware that we are bound by rules and regulations and laws. However, we also know that rules and regulations and laws are subject to change.

An example of a situation where a regulation could be given a different interpretation and a law amended lies in the situation now faced at our public housing facility, a HUD project.

On hand are funds labeled "modernization funds" which due to watchfulness on the part of the board of directors of the site were not needed to complete the job for which the modernization fund was granted. The Board then took the position that the money remaining should be used to enlarge the community building in the HUD project which is located centrally in the elderly units and directly opposite a FHA 24-unit complex of apartment homes and tenanted by other elderly and nonelderly as well. Although the HUD units are only able to house 20 elderly singles or couples, we have been serving a much larger segment of the other elderly in this community by offering the use of the community building as a congregate meal site. We are now actually suffering because there has been a tremendous response to this program and we have literally turned over the community building to the meal program and do not have room to provide any type of activity which does not fit into the dining room atmosphere and denies the elderly tenants of the HUD a place to use as intended.

No other suitable facility exists in this small town of approximately 1,100 population and even though a report prepared for use through a Special Committee on Aging of the U.S. Senate, No. 94-478, page 32, last paragraph, which states that at Government housing sites "added cost for footage and construction because use of nutrition program funds requires serving eligible low-income elderly from the neighborhood as well as occupants in a development," use of the modernization funds have been prohibited by the HUD Des Moines insuring office.

This particular case has other ramifications, for example the extremely high cost of utilities charged by the city-owned utility company which have resulted in putting the HUD project into financial difficulties and which has been quoted by the Des Moines insuring office as further evidence as to why the project

should be denied the permission to enlarge the community building. Due to the law which insists that only 25 percent of income may be charged for housing, we are not permitted to charge a rent in keeping with the increased costs of operation. In almost every instance the cost of utilities exceeds the rent which we are permitted to charge.

To sum up, we need funds desperately to accomplish our goal; enlargement of the community building which will enable us to better serve the over 300 elderly of the community and not just the 20 persons who now reside in the project.

Other avenues of funding have been investigated, a Federal grant or use of FHA funds, but the moneys have either been allocated or cannot be used by us for our stated purpose. We do not know when any other money will come to us, and for this reason we are asking if you know of any way that we can be helped.

Thank you for any consideration that you give to this matter.

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MURIEL M. PETERSON, MASON CITY, IOWA

There is continuous talk of the elderly preferring to remain in their own home, and also there are comments about the rising costs of health care and growing numbers in nursing homes—not needing that level of care. Yet home care/health care services are the most difficult to obtain! They may be the most economical, but services are scarce to nonexistent, depending upon the locality and, if available, there is a waiting list. Medicare regulations are more strict for coverage of home health care than for hospitalization.

In Iowa, all but four or five homemaker service programs are under the department of social services (DSS). The DSS provides for the person whose income is within 80 percent of the State's median income, adjusted for family size. Cuts in allowable numbers of State employees or some DSS area administrators feeling homemaker services is not beneficial means home care service is difficult to obtain and no expansion of services possible. Persons exceeding the 80 percent guidelines must pay at least \$4.23 per hour for service, if and when time is available. It is ironic the persons paying taxes (probably the greatest share) are the persons virtually denied services.

Nursing home costs are enormous, but what is being done to develop alternatives? Locally, nothing. It is easier to get funds through title XIX (medicaid) for a person's care in a nursing home than it is to get funds for other types of care. An adult day care program has much merit for our community, but where do you get the start-up funds—and where does coverage come to supplement the cost that the participants are not able to bear? The State of North Dakota received approval for title XIX to be used, but Iowa says "No, that is not possible." Both States are in the same HEW region—and the regional office OK'd North Dakota using it. Residential care centers are needed desperately—not the type of independent group housing of Shalom Towers or the Manor as mentioned at the hearing, but centers where staff are available to monitor needs, do meal preparation, laundry, cleaning, but no nursing staff. State Federal programs do not really pay for that level of care.

At the hearing, comments were made about winterizing/insulating older person's homes. Many older persons have decided years earlier not to keep up their homes because they'd not live long enough to benefit from the up-dating, but the Federal Government is supposed to step in and do it! That is perpetrating a bad situation. Older persons with health problems or physical limitation living alone and no neighbors nearby are in a very precarious and self-endangering situation. That is their right, but by fixing up their homes and providing various services for them, our tax dollars are encouraging inappropriate behavior. (Homemaker services are usually not provided if the environment is endangering, and the persons are assisted in making more suitable arrangements.) We must get away from the idea to own a home and to remain in it is all there is to life. Commitments to a physical/material object is overwhelming and placed in priority over life and limb.

Thank you. I've aired my gripes at the moment. About half of the patients with whom I work at NIMC are over 65 years of age, thus, in the 4 years I have been here, I have shared with many the frustration of bureaucratic redtape.

## MARIE PAULUS, ROCKFORD, IOWA

First, I think we had a wonderful meeting and crowd. Over 11 towns were represented—people I didn't know. Also, we had over 50 Rockford residents. The panels were good, but we would have found more facts if people from the floor had been able to talk and explain problems on chore service. So many silly questions were asked—for example, "How far did your husband get in school?" The service doesn't always get where it is needed the most. Also, the insulation helps people really in need. Some could do it themselves if they got the help.

Also, I think most of the money put out to help the elderly is spent on jobs for younger people at desk jobs, and that they really don't understand the problems. By the time salaries are paid, money is gone. Lots of people who could use congregate meals are too proud to come. Many enjoy just being together—going at 11 for 11:30 dinner.

## DAVID SCHILTZ, BANCROFT, IOWA

We have a good clean town with a growing population. We also have a good number of elderly people who don't have a place in town to have community lunches and other activities which they need very bad.

If I may add, the people of the HUD office in Des Moines are treating us like a bunch of criminals, just because we're trying to help these elderly people of our town.

The money which we are trying to do this with came from the HUD offices to fix a water problem we had in the low-rent housing project. We solved this problem with half the money they gave us, so I see nothing wrong with the idea of using the money we saved to better our community room for lunches. We need the extra room very much for there are a lot of elderly people in this town who depend almost solely on these lunches.

## ADELLA ULSES, BANCROFT, IOWA

I am site manager of the congregate meals for the elderly in Bancroft. We serve 45 to 50 a day, 3 times a week, and desperately need your help and need to expand. The facilities we have are nice, but we need more room; 98 percent of the people taking part in these meals are from one-person households. No one will ever know what these meals mean to the elderly for fellowship and nutrition.

We serve in the community room of the HUD-Bancroft low-rent housing which accommodates 20 people, and we serve many, many more. According to HUD regulations, we are refused to use modernization funds even though we have them on hand for this project.

We have met with objections all the way for enlarging this building and need your help—please.

## DONALD J. WELP, BANCROFT, IOWA

I am vice president of Shannon Apartments, a 12-unit rental housing project financed by the Farmers Home Administration. We have been advised by HUD to go to Farmers Home Administration for financing a contribution to the community center. However, they advise us this is not possible. We refer to the statement of understanding between HUD and the Administration on Aging concerning the nutrition program for older Americans dated April 7, 1975, and signed by H. R. Crawford, Assistant Secretary for Housing Management, and Arthur S. Flemming, Commissioner, wherein they refer to the implementation of the nutrition program and the collaboration between HUD and the Administration on the Aging and pledged their diligent efforts to foster close cooperation and continuous liaison among the various agencies and to review from time to time the product of this collaboration and new potentials that may emerge for their mutual benefit. This statement means nothing if it is not implemented on the local level and all funds go for administration, consultants, and experts, and none is spent for the elderly. We feel the elderly deserve a proportion of the funds allocated for them.