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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 4—IDA GROVE, IOWA

AUGUST 17, 1976

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The Nation's Rural Elderly :

- Part 1. Winterset, Iowa, August 16, 1976.
- 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.
- Part 7. Denver, Colo., March 23, 1977.

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## THE NATION'S RURAL ELDERLY

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TUESDAY, AUGUST 17, 1976

U.S. SENATE,  
SPECIAL COMMITTEE ON AGING,  
*Ida Grove, Iowa.*

The committee met at 2:40 p.m., pursuant to notice, in the community hall, Third and Main Streets, Ida Grove, Iowa, Hon. Dick Clark presiding.

Present: Senator Clark and Representative Bedell.

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. If I may have your attention, we are delighted that so many of you came out on such a warm day. We are very happy to be here in Ida Grove.

This is an official hearing of the Special Committee on Aging. We have several scheduled witnesses and then we are going to try to have some time at the end for people in the audience to make statements or ask questions that they may have.

On my left is a stenographer who will record what is being said and we will then issue a printed transcript of these proceedings. If any of you are interested in getting a copy, it probably will be about a month or two before it is printed. I hope you will write to me or leave your name and address here and we will be very happy to mail you one.

I might also say that we have a form for people who do not get the opportunity to testify here but who may have something they would like to say. It simply says: "If there had been time to testify, we would like to have said the following." That will be made a part of the official record<sup>1</sup> of this hearing as well, so anyone and everyone who wishes to participate in that way, may.

Our subject at this and five other hearings that we are holding this week in Iowa, Nebraska, and South Dakota is "The Nation's Rural Elderly," and I emphasize the word "rural." I suggested that such hearings be held about a year ago since, as I said at our opening hearing yesterday in Winterset, we can't hope to know what is happening in rural America if we simply stay in Washington, D.C.; that is not rural America. Our chairman, Senator Frank Church,

<sup>1</sup> See appendix 3, p. 243.

of Idaho, agreed with this suggestion. The committee will visit many different States of the Union and talk to people in rural areas.

We are starting here in Iowa. As I said, we were in Nebraska this morning and we are going to be going to South Dakota later tonight for hearings tomorrow, and then back in Iowa again.

I want to make my statement very brief because we have a number of witnesses. We also want to hear from Congressman Berkley Bedell. So let me just try very briefly to make three or four points.

#### ARE THE PROGRAMS WORKING?

One of the prime objectives of these hearings is to determine the responsiveness and the practical help provided to the rural elderly by programs such as the Older Americans Act, medicare, housing programs, transportation programs, nutrition programs—all of these programs that have been set up. We would like to know whether they are working, whether you think they ought to be kept, whether you think they ought to have less funding or more funding, whether there is too much redtape—anything that you feel you want to say about it by way of trying to improve these programs.

There is a real need for this kind of evaluation because, in our view, we failed to do what we said we were going to do at the 1971 White House Conference on Aging. We really stopped at the beginning of this decade and said, "What is it we want to accomplish in the area of aging?" We have not yet arrived at a national policy on aging, particularly on rural issues. Part of the lag has been caused by lack of leadership in the executive branch. Another part has been caused by economic uncertainties that have been related to such things as inflation and unemployment.

Nationally, about 8 million people—that is, about 28 percent—of all the people in this country over the age of 60 live in rural areas like Ida Grove, but in some States that percentage actually rises to as high as 50 percent. In fact, here in Iowa about 45 percent of all people over 60 live in small towns in the countryside. So there are major differences among the States. Even though each of our hearings has a rural theme, we find that there are special circumstances in each locality that call for close inspection. That is why we are here in Ida Grove.

#### DELIVERY OF HEALTH SERVICES

We will be especially concerned here about the lack of health services and the problems with delivery of services of this kind into rural areas. Shortage of health services in this country has reached a point, in my judgment, of extreme concern. In 138 rural counties nationwide residents do not have a single resident doctor. Now that figure is up about 37 percent—over a third from what it was in 1963. Unfortunately, it is getting worse, not better. In Iowa, the rate has dropped well below the national average.

Here in Ida County the shortage of medical care is particularly acute. The county has been designated as a medical shortage area by the Department of Health, Education, and Welfare, and today we are going to hear from health professionals of this area who will describe the barriers for the elderly persons to obtain adequate health care.

We also hope to hear from some successful programs to try to combat these barriers. The other panel of witnesses will detail the difficulties in providing any service to a rural area: The geographical obstacles, the low density of population, and the cost factors involved in providing services to the rural residents. This is what we will be discussing.

In a hearing last spring in Washington, D.C., on this very subject, I heard a great number of recommendations for removing obstacles of delivery service under the Older Americans Act. I hope that our witnesses today will have additional suggestions for improving the Older Americans Act and other Federal statutes.

Lastly, I would like to say that with the Older Americans Act programs, and in all of the others, the rural elderly must feel that no one is dictating to them. The progress that we are making in aging is due in no small part to the initiatives and the determination of older persons who are making things happen. The Federal share of their effort, if one is needed, ought to be part of the solution and not part of the problem. I think we have made much progress in the area of assisting elderly people, primarily because older people have organized themselves. Government responds to that kind of organization, whether it is at a local level, a State level, or a national level, and I congratulate you for that.

Now I would like to ask Congressman Berkley Bedell of this congressional district if he would like to make some comments before we start with the panel.

#### STATEMENT OF HON. BERKLEY BEDELL, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF IOWA

Representative BEDELL. Thank you, Senator Clark.

On behalf of the people of northwest Iowa in this sixth district and, more particularly, on behalf of the people that are here and our senior citizens all across the area, I want to tell you how appreciative we are of the fact that you would take your time and the committee's time to come out here, as you state, to try to learn firsthand about the problems that exist in the field.

I would like to echo what you said. I think so frequently we find people who think they know what the problems are in their organization or out in the field. I can tell you from having been in management myself that the only way you find out what the problems are anywhere is to get out there among the problems, and we certainly are grateful that you would take the time to do this.

I would like to say that I think it is important that we concern ourselves with the lives of all of our people in America, and some of those people are indeed senior citizens. So frequently I fear that they tend to be forgotten as we look at some of the issues that may be somewhat more exciting.

As we look at our senior citizens, I think we have two important things that we need to do. First, we need to help so that they can live meaningful lives. Second, I think we need to tap the assets and the capabilities that they have or that they can contribute. If any of you question that at all, you should have been here a little earlier to see the band that we had up here. Somebody mentioned to me, "Well,

I don't really have to worry about getting old when I see that band up there and the great fun that they are having."

#### INFLATION DECREASES NET BENEFITS

As we look at our problems, there are some specific problems that I think we need to address ourselves to. One of them is that, as the laws now stand, people who get social security cost-of-living increases frequently find that they have other problems—such as veterans pensions and this sort of thing—cut back even more than their increase. Legislation which was meant to help people get better benefits because of inflation sometimes actually decreases those benefits. I think it is important that Congress address itself to this problem and do something about it.

Senator Clark has already mentioned the problem of availability of medical care. I think that is a problem that exists all across our country—certainly it exists in rural America. We need to look at that problem.

Equally important in rural America is the problem of transportation for all of our people, particularly our senior citizens. All of our senior citizens in rural America are not where they can walk to the grocery store or walk to church or to the doctor, and it is important that they have some type of transportation available to them.

Finally, if there is one other thing, I believe it is that we have to change our value system in America. I believe we have to come to agree that we judge our success by the quality of the lives we live rather than the quantity of goods that we consume. If we are going to change that value system, I believe that it is going to have to come from rural America—from people like you. I think it is going to have to come from people who have their feet close to the soil, who have a religious heritage, who care about one another, and who are willing to do what they need to in order to help build the society. When we say what those values are and show that we care for one another and love one another, it will really change our society.

I am thankful to you people for being here and I am deeply thankful for Senator Clark and his staff being here. I am thankful for all the people who are here participating in this program.

Thank you very much, Senator.

Senator CLARK. Thank you for an excellent statement, Berkley.

I think I will introduce the staff members that are here before I introduce the mayor, so if you need to contact somebody in the process of the hearing you will know who they are.

First let me say Annabelle Short is the court reporter; back here is Dave Harf, my legislative assistant, who will be happy to help any of you; Debbie Kilmer, on my right, is a professional staff member of the Committee on Aging; Peg Fayé is a professional staff member who represents the minority side of the committee; and Donna Gluck is resource assistant with the committee.

Now let's go ahead with the first panel. We came here basically to get the judgments of the people from their area. First and very appropriately we are going to hear from Theo Murphy, the mayor of Ida Grove, who serves on the county task force on aging. He is going

to describe, I understand, what it is like to be a rural official who is responsible for the needs of the elderly people.

Theo, go right ahead. We are going to try to ask each of you to limit your comments to 5 minutes because we would like to ask you some questions and have some discussion.

Mayor Murphy.

## PANEL ON DELIVERY OF SERVICES

### STATEMENT OF HON. THEODORE E. MURPHY, MAYOR, IDA GROVE, IOWA

Mayor MURPHY. Thank you, Senator Clark and members of the Senate Special Committee on Aging.

My remarks basically will pertain to housing, because it is my firm belief that to give dignity to people you have to provide adequate shelter—clean, well ordered, secure—something that they can live in and feel proud of in their declining years. We have not been able to do this in most of rural America.

For many years most communities in northeast Iowa—and I am familiar with most of them—have been trying to develop a housing program to provide low-rent housing to the elderly people of their community, housing that they can afford to live in with a very moderate income. I know some of you would be surprised at the income that a lot of our people are living with—under \$2,000 a year. When you measure that against a need for rent and utilities that will be at least 25 percent, that means that they will be paying less than \$50 a month for Ida Grove, and you know that is an impossibility.

For a number of years we in Ida Grove, and many other areas of northwest Iowa, have been trying to develop a housing program and we have had our frustrations. We have employed architects and we have employed developers. We have tried to move this thing along so we could develop 30, 40, or 50 units in a town the size of Ida Grove and it has been impossible to do this.

We have moved away from any attempt to develop housing under the so-called HUD program. It just seemed like we could not get HUD interested in a small community that needed a lesser number of units.

We went to the Farmers Home Administration 2 years ago. A low-rent housing corporation made up of individuals of Ida Grove, we raised \$10,000 as our proportionate share of the cost to develop housing. We secured land to build on and then we moved along with the Farmers Home to build eight one-bedroom apartments and four two-bedroom apartments. They were completed on January 15, 1976, and they were completely occupied in 3 days' time.

### EVEN LOW RENTS TOO HIGH FOR SOME

Of these 12 families that moved into the housing unit we developed, 4 of them could not afford to pay the rent that we needed, which was very minor: \$100 a month for a very beautiful compact one-bedroom apartment, or \$125 for a two-bedroom apartment with all utilities furnished. We tried to get a rent supplement through section

8 of HUD to help these people get along, and that was impossible. We just could not get it off the ground. By talking to relatives of these elderly people, we did get enough supplemental rent from these children to move these elderly people into the housing units.

Now we didn't stop looking for rent supplement. We went to Washington last October and met with Berkley Bedell and his Northwest Iowa Conference; we talked to Mr. Dale Elwell of the Farmers Home Administration; Department of Agriculture; and with the man representing HUD. We tried to get these people together so that they might agree that in a small community we should have a rent supplement to help you people. We could not get it off the ground at this meeting.

However, by writing letters we have got a statement that now they have an understanding between HUD and Farmers Home. They are hoping to get this implemented so we can develop 24 more units in Ida Grove. We are starting on this at the end of this month by letting the contract, and then get low-rent housing subsidies for you people who may be moving in. Right now we have 27 people on our list, and of these 27—we note from the financial statement they have given us—several cannot afford to rent our housing units.

What do we have to do? We have got to go back and beg Farmers Home to go ahead and implement this part of the program to give us these low-rent subsidies, or we have to go out and contact the relatives again to give them some kind of a rent subsidy from their pocket.

Senator Clark, we have not quit in our endeavor to get a low-rent housing subsidy from Farmers Home. With your continued help through your office and your Senate Committee on Aging, I think we can get the job done in time to get the rent supplement for these two new 24-unit buildings which are beginning this fall and hope to have completed in May 1977.

I have two copies of my statement as you requested. With them I have copies of letters to Mr. Elwell,<sup>1</sup> copies of letters I have received from Mr. Elwell,<sup>2</sup> a letter that I sent to Mr. Pim<sup>3</sup> who is the Iowa director of housing under Farmers Home, and a reply from him<sup>4</sup> in which he states: "We anticipate getting this program going in the near future." This is the place where we need the aid.

Now in our small communities we can do a lot for ourselves. As Senator Clark and Congressman Bedell stated, we can pick up a lot of the loose ends. We are organized to do a good job in helping the elderly. We cannot do it all. We have to depend on the State or the Federal Government for assistance. This low-rent housing supplement that we need is the best we can get from your office.

Thank you for this opportunity.

[The prepared statement of Mayor Murphy follows:]

#### PREPARED STATEMENT OF MAYOR THEODORE E. MURPHY

For several years Ida Grove, as well as many other smaller cities in northwest Iowa, have endeavored to develop low-rent housing for the elderly. There have

<sup>1</sup> See appendix 1, item 1, p. 237.

<sup>2</sup> See appendix 1, item 2, p. 237.

<sup>3</sup> See appendix 1, item 3, p. 238.

<sup>4</sup> See appendix 1, item 4, p. 238.

been many frustrations along the way: lack of funding by Congress, plans were for a lesser number of units than HUD would go along with, etc. You people have heard many times from community leaders about the housing situation for the elderly.

Two and one half years ago Ida Grove organized a nonprofit low rent housing corporation. They raised \$10,000 to qualify for FmHA assistance, employed an architect, and developed eight one-bedroom units and four two-bedroom units. The only additional assistance we needed were low-rent subsidies under section 8, HUD, and this we have not been able to get. Our 12 units of housing were completed on January 15, 1976, and were filled within 3 days. Four of the tenants had to have assistance from their relatives to pay the rent of \$100 per month.

Attached to this testimony is a copy of my letter to Mr. L. D. Elwell, Assistant Administrator for Multiple Family Housing, FmHA, relative to a discussion I had with Mr. Elwell and Mr. Howard L. Huttman, Jr., policy planning division for HUD, at a conference in Washington, D.C., November 10, 1975. Mr. Elwell's reply dated May 12, 1976, is also attached hereto.

As suggested by Mr. Elwell, I wrote to Mr. Robert R. Pim, Iowa State director for FmHA. On August 10, 1976, Mr. Pim replied. Copies of both letters are attached.

At this time Ida Grove has qualified with FmHA for 24 additional one-bedroom, low-rent housing units for the elderly. From our list of applicants on file at this time we know there will be many who cannot pay the required rent because of their low income status. Somehow they will need a rent supplement from HUD which we know at this time is impossible to get; from FmHA which, from Mr. Pim's letter, may be forthcoming; or from relatives of the applicants, which in several cases is quite unlikely.

So, somehow, the impetus for low-rent subsidies must be placed on FmHA. This is the big reason why I am appearing at this hearing. I know we have to do as much as possible on all matters pertaining to the needs of the aging, by the individuals concerned, by the communities in which they reside, but we also need much assistance on the State and Federal level.

Statistics show that nationally, and especially in Iowa, the elderly population continues to grow. In a survey made in Ida Grove as late as November 1975, 27 percent of our people were over age 60. This figure applied to an Ida County population of 9,300 means that over 2,500 elderly people reside here. We have just begun to take care of the needs of these people, and the situation will continue to grow from year to year.

We feel confident that you, Senator Clark, and the Special Senate Committee on Aging, will give careful consideration to our problems.

Senator CLARK. Thank you very much.

I think it is an excellent statement and Congressman Bedell and I will be very happy to work with you on it. I know that both of us supported a \$750-million appropriation for elderly housing. We voted for that. We believe that people in the rural areas pay their taxes just like people in metropolitan areas and that is what this hearing is all about. That is really our purpose, to make certain that people in the smallest communities and people in the rural communities have that kind of assistance.

We are going on and hear from the other three witnesses, then we will have questions.

We are going to hear now from George Marsh, a resident of Sioux City, who is the chairperson of the State Advisory Committee on Aging. As I understand it, he is going to give us a brief description about communities in and around Sioux City and relate it to our topics of delivery of services in rural areas. I know as chairperson of the State advisory committee Mr. Marsh will be able to compare the Sioux City needs with those of the entire State of Iowa.

Mr. Marsh, you proceed in any way you think appropriate.

**STATEMENT OF GEORGE E. MARSH, CHAIRPERSON, STATE  
ADVISORY COMMITTEE ON AGING, SIOUX CITY, IOWA**

Mr. MARSH. Thank you, Senator Clark.

Appearing as a member and chairman of the State advisory committee, I would like first to indicate that this position is entirely elective and I want to describe for you the setup of this job. As a member of the various committees created to work with those who produce the services that we need, it is entirely voluntary. I began this voluntary service as a member of the Woodbury County-Sioux City group of the Woodbury County Task Force attempting to obtain financing for the Sioux Senior Citizens Center. We proceeded to attempt to develop financing from the city council and also from the Woodbury County Board of Supervisors. We were successful with one group, but not with the city council in Sioux City.

Along the way we learned of the availability of Federal funds that might be obtained on proper application. I got acquainted with the fact that we had to have an organization, not just locally, but that the requirements were such that we had to have an area of organization. I want to describe for you a little bit of these organizations that I have become acquainted with, worked with, and developed.

We did not at that time have the area organization required by the Older Americans Act which made provisions for the funds that might be available. This caused us to have to go to work to set up the organization we needed. At that point in time I discovered the existence of the State Commission on Aging and the fact that we had to get material assistance from them and the State staff in organizing the area that was allotted to us. This included the five counties up here—Monona, Ida, Plymouth, Cherokee, and Woodbury—and we worked with that organization in getting that thing together. It took a great deal of time. I want to thank the organization in Sioux City which became our sponsoring agency for the work that was done. This was very important to getting the thing set up and in place.

“WORKING FOR THE WHOLE AREA”

As the thing developed and I became a member of the advisory committee of the area, I discovered that we were not working just in the city, but we were working for the whole area, including the counties I just mentioned. The applications for services are to the State commission since the funds the State has available would have to be reviewed and passed through our hands.

We also discovered we would have a representative on the State advisory council to both the commission and Governor of the State of Iowa. For reasons rather dim to me, I became that member and went on to Des Moines and met with representatives from the other areas in the State and again became elected to the office of chairman of that group. I have had an opportunity to see the workings of the machinery that it takes to organize and deliver the services and get the funds out to local projects throughout the State.

The problems are not all local; they are areawide and statewide. I see one problem that has developed in the last 5 or 6 months, in terms

of the rural areas, in a feeling that their share of the funds that were allocated is inadequate and, perhaps, that they should have a higher proportion. I say this because these people representing those areas tell me that it costs more—and I am sure they are right—to deliver services to an individual in a rural area where the distances are great and where either the people have to be transported those distances or the services have to go out to the individuals.

Over the period of time that I have served with the committee in developing the Sioux City Center, we have come to believe that a center of the type that you people have right here is one of the important elements in reaching the people who need the services. In this way the problem of identifying the individuals or their becoming aware that the services are available is one of communication with those people who provide the services and who have the know-how to get the job done.

You have a fine center here which I believe is of the type where it will become so visible to the general public in the area that older people will recognize it as the place to go for any type of problem that they might have. Our elderly people can come to a center of this type and find the kind of services offered, although it may not be available at that particular point. At least they can find out about the service, get the information that they need, help in getting to it, or having it brought to them. This is one of the things they have learned to accomplish.

I think that is it.

Senator CLARK. Thank you very much. We appreciate your comments.

I might say you referred last to the multipurpose senior centers that you have in Sioux City and other places. The Congress has taken a particular interest in developing these centers and I know Iowa's allocation of money for this next year is about \$75,000. We are hopeful that more and more of these centers will be developed.

We will have questions in a little while, but I would like to go now to Beulah Webb who is from Sioux City and who, as I understand it, has independently organized, developed, and implemented a senior center in Sioux City. She has won awards from many organizations and from the Governor of Iowa for her services to the elderly. I think she knows everyone in Sioux City and certainly everyone in Sioux City knows her. She has the kind of experience to be a good witness on problems of the elderly.

Beulah, we are very interested in hearing you now.

#### STATEMENT OF BEULAH WEBB, SIOUX CITY, IOWA

Mrs. WEBB. Thank you, Senator Clark.

Good afternoon to Ida Grove and thanks to the mayor for having us here. I think it is a marvelous program. The one thing that I want to say concerns our problems as senior citizens of the center. I want to let you know that I was the first black delegate, and the only one, from the State of Iowa. I was selected by our Governor to represent the senior citizens at the White House Conference in 1971. I went because I knew the housing need. My main purpose was hous-

ing, because we had just as much trouble with housing in Sioux City as you do in Ida Grove, and we are just beginning to get it. Our State and National representatives know me so well. I have sent out many letters on my own in order that they would know our need and our problems with aging.

I want you to know something about senior citizen centers. Sioux City is the only registered, nationally known center in the State of Iowa. We do not have enough centers today in our State. We are open 5 days a week from 9 to 4:30. We accept the area council and say "thanks" to those who came to our rescue. I want you to know—starting out, we went to our city, and we went to our county. I will be ever grateful to our Woodbury County. Our peers of the city didn't accept us the first year, nor did our State. That meant those who were around and helped to open the doors—some of you have heard of Arthur Samford. He is a philanthropist, and he gave us our first year. We started out with a small amount of \$15,000, and from that we have grown.

The next thing that I would like to let you know is that we are here to stay. We are senior citizens and our agency is growing. Consequently, what we need is the people to back up whatever you want. Right now we have a dilemma. I don't know where to put the thing—whether to put it at the city, the State, or the Nation, but I am quite upset. I have these papers before me, but I am unable to see them. Consequently, it is very difficult for me to do the reading that I would like to do.

#### MANY SENIORS LIVE IN AREA

Project grants are slow coming in. I have four on my staff today. We have an attendance of better than 75 people a day who come in 5 days a week. I don't know how many of you get our bulletins that we put out stating our activities there. It is ongoing and I don't know how many of you know how many senior citizens we have in our area. We have better than 10,000 in Sioux City, so you can imagine how many are in area IV. If you multiply the five counties, you come up with a vast number.

The thing that is troubling me today is the delay of our grant. We are working from day to day not knowing whether we are going to be funded or not, and it is definitely known. On the way of positive thinking, we have to have operations. Our grants, when they get to us, are so very meager that I am almost out begging.

They want to know whether I am going to close the center. No. By faith we will survive. People have been very kind in the last few weeks with tremendous donations that are keeping us alive.

Our county has given us their allocation. They allocated us \$7,500. As we grow we have expanded, and it takes something like \$32,000 to operate our center. We have expanded into the basement; we are going to make people happy. I wish we had \$32,000 on the new building. This is our third year and we are on our last appropriation grant. We have to have it by September. This shortness of time to fill our grant is the thing that has disturbed me. There is so much paperwork that our area representatives cannot come down or get ours to come to them—and the things that we need.

If you could just see the paperwork alone. I am hoping the Government some way will find out that it has become so repetitious—of all the paperwork that has to be done. When you do that, you don't get to the rural. They don't know the people. We are in the centers and know our people. Neither do our State representatives know the people in the rural areas because they are bogged down again with a lot of paperwork. We in the community are developing the funds. On the other hand, I am hoping some way that there will be more funds to be allocated.

Now I just learned that a lot of you do not know about the Community Development Act. We have a title V that has just come up and we do have a Community Development Act. I don't think any of you know anything about it. We did not know that we have title V which we could use to ask for funds. When I went to Washington last year I asked them to listen. I wanted to know what was going on. I hope to make it to Chicago to the National Council on Aging Convention.

I asked some of the heads of our agencies if they would in some way bring in title V, which I find has been passed. There are two; the State has one. I bypass the State and am going to the national, because in our State we do not have a multiple-purpose center as yet. I don't know how the multiple-purpose center is classified. At present, we don't have the facilities for a multiple-purpose center. It is not that we don't want it, but you must have the facilities to correspond with your State needs, and there is no way at the present.

#### CENTER SERVES IN MANY AREAS

We do what we can. We have marvelous programs, but health, education, and welfare, and on down the line—homemakers and everything—comes within the center. We hope in the future to appeal to both the people, our Congressmen, and to our State. They will see our need.

I would like to leave these few words with the northwest part of Iowa; it is a thought to remember. You see, I have been working for 52 years in the States and whether you know me or not, I have learned a lot and I know our needs.

First, rise up and be counted. You don't know the strength we have as senior citizens. We have the voting power.

Second, if you don't like a thing, let them know about it. Our representatives we elect, but if they don't know our problems, how can they solve them? Just remember that.

Third, state what you want when you are with them. The time is now, not tomorrow. So keep in touch with your representative and yourself.

Keep in mind, "Not for myself but for others," because we are sitting around today building bridges for those who would pass over after we are gone.

Thank you.

Senator CLARK. Thank you very much, Beulah. I could not agree with you more, particularly on the closing part of your comment. I think in a democracy if people, of any age or any group, are not prepared to organize and work, and meet with their representatives at a

local level, the State level, or the national level, then it is not going to work. You really have to be organized and prepared, and have your views known, because only in that way is it going to work effectively in a democratic process.

Before we have questions, we are going to hear from Jean Sandman who is director of the AID center—that is, the assistance, information, and direction center. We are going to find out what that is first. She serves Sioux City and the vast area surrounding Sioux City—the rural areas as well. This program is an information and referral system which contacts the elderly and attempts to match them with any of the services that they might need in their area, or as individuals. In other words, they go out and try to find people and match them with the services that are available so that they are not just services and people, but that they get the two together. It is a very, very important job. We would like to hear from Jean Sandman on how she thinks it is going, what this program involves, and anything she would like to cover.

**STATEMENT OF JEAN SANDMAN, DIRECTOR, AID CENTER,  
SIOUX CITY, IOWA**

Mrs. SANDMAN. Thank you, Senator Clark.

First of all, I had better tell you what the AID center is. AID center is just a year old. We started in August of last year. We were funded by both Federal and local funds and we do serve a five-county area, which includes Woodbury, Plymouth, Monona, Ida, and Cherokee.

AID center is primarily a telephone service. You will find our cards on the table over here. We also have some brochures that tell you what we do. These are provided for you people so you will be able to call us. We have a toll-free number so there is no charge to you at all. If you have any questions about services, if you want to report something, if you feel you have some of these needs that we are talking about today, you can call AID center.

AID makes monthly reports, quarterly reports, and annual reports. We give that information to anyone who wants it. We document what people want, what they really feel—in other words, what they need. We see how satisfied they are with services or whether they are able to find what they want. We document what people call about and how many resources are available. We are probably the most complete source of information on services in northwest Iowa. We document and have information on every service that we know of.

**TOLL-FREE NUMBER AVAILABLE FOR QUESTIONS**

If you call us and ask us where you can write to the American Cancer Society, we can give you the local, the regional, and the national address. Any information like this that you want, we will give you. If we don't have it, we will find it. As I said, it won't cost you anything. You can call us with this toll-free number and we will answer any questions that you have. You do not have to identify yourselves if you do not wish to. We are very happy to answer your questions, even if we don't know who you are.

Senator CLARK. Jean, these look very, very practical. Were those passed out, or are they over on the table?

Mrs. SANDMAN. There are some on the table and I have some more with me.

Senator CLARK. Fine. I think everybody here might well want that, and you have a brochure as well to explain it.

Mrs. SANDMAN. And the brochure has the numbers on it, too. If you don't get a card, you can take a brochure.

As I said, we are a year old and we do document what is needed by the people, which is really what we are paid for. We are not paid to answer your questions, although we provide that service. We are funded primarily by title XX and through this we are allowed to have people call us. Through these calls we document needs, and needs are used for title XX planning. So because of funding, we are not allowed to call ourselves an information and referral service.

Funding is a very difficult thing to find, although under title XX, information and referral is included in the national plan. Information and referral is not included in the Iowa State plan; an agency like ours is rather unique in Iowa. I think we are lucky in northwest Iowa to have it. We can thank Chuck Sweeney, district director of the department of social services, because he worked very hard to get this service for us.

We also discussed whether AID would be an area service. For a while the State Commission on Aging had a toll-free telephone which one could call and get his questions answered. We feel that it is difficult enough being an area service without providing statewide services. My workers and I are trying to get out into the area. We are talking to people directly so that they know us and they will feel more comfortable when they talk to us. We are very interested in serving them.

Within the past few weeks, AID staff has gone to the congregate meal sites to gather information for this hearing. I know persons from Onawa and different places have seen me there. We talked to 119 people—they were all senior citizens—and we asked them what they thought they needed. We had a very simple questionnaire and we asked them to fill it out and state their needs in preparation for this hearing. Their needs are not too different from those we are now hearing about.

In health, for example, about 47 percent of the respondents said we need more doctors, and I think we all know that.

Transportation was another big item that they mentioned.

Income maintenance, as it is termed, they wanted more coverage on medicare. Some of them need larger social security payments.

Mr. Bedell was talking about the fact that senior citizens' incomes might be cut when they have income from two or three different sources and social security is increased. They were very concerned about that.

They were concerned with inheritance tax.

#### NEEDS DOCUMENTED

We documented all these needs and we are going to give this report to Senator Clark so he can find out what, at least, 119 people felt were the needs of the senior citizen in northwest Iowa.

Senator CLARK. Thank you very much. We appreciate having the report<sup>1</sup> and we will make it a part of the record so we will have it printed.

I would now like to ask a couple of questions of each of you.

Jean, on your AID program, how do you advertise your assistance program? How do elderly people know about your services? Now these people know about it because they can go over and pick up a pamphlet and call you because your number is on it, and so forth. But what about the tens of thousands of other elderly people in this part of the State? How do you get to them?

Mrs. SANDMAN. Yes. You have talked about our most difficult problem, because it does seem that no matter how much publicity we get, people forget about us the next day. We have been on all the radio shows that come out of Sioux City and even one in Lemars. The TV stations have all given us publicity. We sent articles to all the local newspapers. We follow up on this every few months. Getting known is our most difficult thing. We finally decided we are going to have to go out and meet the people and pass out the literature ourselves. AID center is free; anyone can call us without charge. Our one purpose is just to help people. I should mention we are getting over a thousand calls a month so you know somebody knows we are around. But publicity is a big problem.

Senator CLARK. Let me ask you—you are available to guide people to those services. What service do most people in this part of the State want or need?

Mrs. SANDMAN. That is very easy. It is housing.

Senator CLARK. Housing.

Mrs. SANDMAN. Without a doubt, it is housing, yes. We have more problems with that than anything else.

Senator CLARK. Does this AID service that you have offer any method of followup contact with the elderly persons you direct to services? In other words, do you often actually see elderly persons or follow up to find out whether they were helped by the services you put them in contact with?

Mrs. SANDMAN. Yes, that is part of our service. We do follow up. But you can understand if we do not ask persons calling to identify themselves, that does limit the amount of followup we can do. We follow up on anyone who identifies himself and accepts this service. We ask their permission to call back and find out whether they got the service they asked for and if they were satisfied with it. This information, too, is documented.

#### STUDENT USED AS COUNSELOR

We provided a service this summer which was rather interesting. I am sorry it has to end and that it was just for the Sioux City area. We took a college student, made him a housing counselor, and had him spend all his time looking for housing, asking people their housing needs, and trying to match people with houses. This was very successful but it is the type of program there is no funding for.

Senator CLARK. Well, that has been very good.

<sup>1</sup> See appendix 2, p. 239.

As I understand what you are saying, Jean, you provide any service that is available; you simply match them with the people who call you.

Mrs. SANDMAN. Yes.

Senator CLARK. What about matchmaking. Do you do any of that? [Laughter.]

Mrs. SANDMAN. You would be surprised. We get that question all the time.

Senator CLARK. I want to ask Beulah some questions.

Beulah, you have come in contact with seniors every day who come into your center in Sioux City. What do you think is the No. 1 service that they seek from your center?

Mrs. WEBB. I think one is housing, transportation, and counseling. We do have the senior citizens who do not want to go up to the AID center since they are not able to climb the hill. Through AID, Mr. Littlefield is our counselor down there.

Senator CLARK. What kind of counseling do you do?

Mrs. WEBB. Anyone who comes into the center and so desires, they get it. It may be on taxes; it may be on rent; it may be they don't understand the water bill or they don't understand the lawyer. You can go to him and he will work through with the lawyers on real estate or anything like that with the person who is confused and does not understand.

Some of the people in their home—there could be something that maybe he could help. We average from five to six people a day in that particular field.

We are the referral agents for the congregate meals. In that way, instead of them calling the average person, they call the Sioux City Senior Center. They will call and ask us rather than call the site, and so we do that.

Then we have a community action bus for out-of-the-county which serves 14 communities in Woodbury County. They come up to Sioux City, which is where they come in and register. We keep track of the people who are registering in it so we might know, and then they come back and pick them up. They come in 5 days a week for the congregate meals. The community action bus comes in and takes people. They register there for the meals for the next day, and she cares for five to seven. That bus goes to their home, picks them up, and takes them back.

Senator CLARK. Now, Beulah, I want to answer a question. I promise not to tell the answer to anybody. I understand you were the one that ran the center almost entirely on contributions, that you got the TV station to give you part of the kitchen, and that you talked the police department into giving you donations, and so forth. How do you do it?

Mrs. WEBB. Telling the truth.

Senator CLARK. What do you mean?

#### "I CALL THE NEWS MEDIA"

Mrs. WEBB. If they ask a question about what we need, I tell them. Consequently, if our landlord does not come across, I tell them, and I

call the news media. We had leaks in our center, and so I called the news media. I said to the landlord, "If you see me on TV mopping floors or catching this water in buckets or coming before the public asking for funds"—I just call the news media. The city does not want to always be faced with the facts of our needs, and we still are going to apply to our city for our grant. The thing that is troubling me is the revenue sharing and why our center does not get it.

Senator CLARK. Let me ask you one last question, Beulah. You come in contact with a number of elderly people, as you are right now, in other communities that would like to start a center. How do they do it? How do you recommend that they get started so that their communities could have a multicenter? You talked about this multipurpose kind of center that people could come to for services. How do you do it?

Mrs. WEBB. Well, I am not going to send them to Rick, but I do want to call for the cooperation of our director of the area agency. But how I did it—I don't know whether anybody would want to walk alone. I fought this battle since 1971. I saw the needs of our community. I saw the need of the rural elderly. There was no place for people to sit down.

I said if the opportunity for them ever presented itself, I would go out. I started out—not bellringing, but with a cry for the needs. So it materialized from the Woodbury County Council on Aging. I was the president at that time. Consequently, I sold the idea to them. We started to build up. You have to have people that work together. The most important thing in the world is the togetherness and belief in the thing that you are undertaking to do.

Everybody came in the door when they did open in July 1973. I was a volunteer, too; I was not paid then. I don't think there was any money involved, because I was the president of Woodbury. "Do you want to be my volunteer?" Everybody in the door. "Can you give me this much time?" They don't know how much. I said, "It is not how much, but what you can give."

Consequently that is the way we do it.

People had the faith and the belief in the things that were needed. They really are enjoying it, and we are growing. When you say you have, on average, 1,500 to 1,600 people a month coming in 5 days a week, it is something you needed in the five areas. They come from South Dakota and all over the Nation—dropping in. They hear about us and come to see what has been accomplished.

#### MANY MAN-HOURS VOLUNTEERED

The one grand thing—we have one man that I would like for you all to know. The different stations came to our rescue. We have an electric kitchen, believe it or not. Many homes don't have it, but we do. They volunteered their labor. We counted the money and figured it would cost over \$17,000. You could figure out how many man-hours five or six men put in.

I will tell you a funny story and stop. For every urban renewal torn down, we would creep in and get the material to build or expand. The city inspector came and said, "You can't put that in because it isn't fireproof."

I said, "We moved it from across the street; it was fireproof over there. Does it cease to be fireproof because we bring it across the street?"

He said, "Yes."

I said, "I will see about that. I will put it in the news."

So I got it without having to call the media. [Laughter.]

Senator CLARK. Thank you, Beulah.

I want to ask George Marsh just one question, but it is a very important question. As chairman of the advisory council, I think you are in a good position to give us your judgment. It is simply this. What, in your judgment, have you found to be most lacking in the Older Americans Act—in the services that it provides? In other words, if you could tell the Congress or the President what it is that we are not doing that needs to be done, what would you recommend?

Mr. MARSH. I think, as to provisions, the Older Americans Act covers the field very well. I think probably the principal need at the present time is additional funding to get the job done. This is the biggest item. I am concerned with our local situation, particularly with our—well, we have it in Sioux City. There is a requirement in the Older Americans Act have to do with—or at least if not in the act, then in the regulations relating to it—a percentage of local public matching which I think is necessary. The problem, however, is a little involved, in that we have a need for—the term is not "project," but that is the best I can do right here—a new item coming on.

Senator CLARK. When you undertake a new program?

Mr. MARSH. Yes. If we happen to start it. If we can only get it started in one county, for example, or one town, we are eligible for 90-10 in terms of matching.

Senator CLARK. In other words, the Federal Government pays 90 percent and the locals pay 10 percent.

Mr. MARSH. Yes.

Senator CLARK. When you start new programs.

#### TROUBLE OBTAINING MATCHING FUNDS

Mr. MARSH. When we start a new program. Now we have run this with regard to those funds that are available. We have the area set up, and some of these programs that are regarded as areawide, we get it in one locality. Then we wind up being behind the eight ball when the next community wants to set it up in that we have already existed with this program for a year or more in the area. We have a little trouble about getting any 90-10 or 25-75. I think that is a mechanical thing that needs to be corrected. It has to do with the definition of what constitutes a component—the program in that area.

Senator CLARK. Thank you very much.

Now I would like to ask the mayor a question.

As I understand it, you have a new minibus for the elderly in Ida Grove. In fact, it is right outside here, isn't it?

Mayor MURPHY. Yes, sir.

Senator CLARK. How is that going to operate in this area?

Mayor MURPHY. It is going to operate countywide. We are going to cooperate with the sheltered workshop people in Holstein, so we will be hauling seven of their clients to begin with, and probably more

at a little later time, from the south part of the county to the workshop area. We will be making a trip up there at 9 o'clock—to arrive there at 9 o'clock each day, Monday through Friday. Then we will pick those people up from the workshop at 3:30 in the afternoon and deliver them back to their homes, wherever they may be, in this part of the county.

At the same time we will be hauling people to Battle Creek, to Arthur, to Galva, and to Holstein from Ida Grove, and from those communities back to Ida Grove or to other parts of the county. We intend to schedule regular trips every week. We intend to meet with a bus from Cherokee County at Holstein on a particular day of the week so if people from this area want to go into Cherokee County or to the city of Cherokee, they may do so on this particular day. Then we will meet them later in the afternoon at 3 o'clock and deliver them back to their homes in other parts of the county.

We expect to work the same way with Woodbury County; we may come into Holstein either on Thursday or Friday. I believe at this time they are thinking Friday. We will meet them there at 9 or 9:30 in the morning—I am not positive. They will have an express run from Holstein into Sioux City and then they will allow the people to stay there for a period of approximately 4 hours. Then they will deliver them back in express down to Holstein to be there at 3 or 3:30 in the afternoon.

We expect the Monona County bus to drive into Ida Grove from the west through Danbury, Battle Creek, and into this area. Just how often we are not sure, but it could be 1 or 2 days a week.

#### TRIPS SCHEDULED FOR ELDERLY

So with this kind of cooperation, we hope to have a wider area that we can cover to take these elderly people over to the places that they want to see. This runs Monday through Friday in this way. We expect to schedule trips from nursing homes and from the senior citizens centers to as many of the communities as they wish to have them scheduled, on holidays, Saturdays, and Sundays.

Our bus will haul 15 people. We expect to load in 15 people and take them to Strong Lake, Sioux City, and Ida Grove. We feel this thing can work very well throughout the entire county, and somewhat throughout this northwest Iowa area.

Senator CLARK. Thank you very much, Mayor. You covered a lot of territory there and it was very valuable material. I know there are a lot of people in this room who wonder what day it is going to be where. Who would they contact to find out how to get this particular question answered?

Mayor MURPHY. We have set up a special phone in the city hall in the clerk's office, and we will have a schedule out to all of the people of the county in the very near future. We have it out somewhat now as to the needs of the senior citizen groups in the various communities. They can call on a special line to our office, tell the clerk over there that they would like to have the bus stop and pick them up, even in the rural areas between here and Holstein or between here and Lamar. We can drive off the regular route and pick up people and take them into the community in which they want to go.

Senator CLARK. I want to congratulate you for providing this bus and making it available to the whole county. I know it is going to be an enormous help. Transportation continues to emerge as a major problem for older Americans and, in fact, I understand some of you came in on this bus today.

Those who did, raise your hand.

[Show of hands]

Senator CLARK. Good. Excellent.

Well, it has already been put to use.

I want to thank this panel very much.

We have one more panel with three people and we hope you can stay for that. This panel did an excellent job and gave very helpful information. We thank you very, very much.

Mayor MURPHY. Thank you, Senator.

Senator CLARK. The next panel is on health services and it is made up of Anne Snell, R.N., regional supervisory nurse, Iowa State Department of Health, Ida Grove, Iowa; Dennis Tobin, director, Department of Social Services, Ida County, Iowa; and James Krick, Ida Grove, Iowa.

Please come up to the table. We will hear from each witness and then have a question period.

We will hear first from Anne Snell. Anne has worked for years here in Ida County and she knows the health service needs of the residents here. As I understand it, she is going to relate what health services are severely lacking for the elderly now, and the consequences of what must be activated to compensate for the lack of health services in such rural dwellings.

#### PANEL ON HEALTH SERVICES

##### STATEMENT OF ANNE SNELL, R.N., REGIONAL SUPERVISORY NURSE, IOWA STATE DEPARTMENT OF HEALTH, IDA GROVE, IOWA

Mrs. SNELL. Thank you, Senator Clark.

The goal of most elderly persons is to retain their independence and live in their own homes as long as possible. This goal can be reached only through expansion of existing home health services. Are public health nurses who assume responsibility for most of the home health services provided in our rural counties serving the elderly population?

Let us look at some 1974 statistics of two counties in the area. Ida County, which we are now in, has a population of 9,100, with 1,900 persons—or 21.3 percent—being age 60 or over and 1,400—or 15.9 percent—being age 65 or older. During the fiscal year July 1, 1975 to June 30, 1976, the one public health nurse in the county made a total of 1,397 visits; 1,202—or 86 percent—of the visits were to persons age 65 and older; 112—or 8 percent—of the services were to persons between the ages of 45 and 64; and 83—or 6 percent—to persons under age 45. About 19.5 percent of the 16,000 residents in neighboring Cherokee County are age 60 or older. Of the 2,210 home visits made by two public health nurses during the past fiscal year, 1,862—or 84 percent—of the visits were to persons 65 years of age or older. So when we think about the number of visits for 65 and older, we see

that nurses are spending over 80 percent of their time in this area and still are not beginning to meet the needs of the people.

Last fall the public health nursing services and departments of social services in Calhoun and Pocahontas Counties established there was a need to provide health screening for persons age 60 and older as many of these persons do not see a physician regularly due to physician shortage, transportation problems, lack of finances, or they do not recognize the need. Around 22.7 percent of the 14,300 residents in Calhoun County are over 60 years of age, and Pocahontas County, with a population of 12,700, has 20.5 percent age 60 and older.

#### SCREENING CLINICS ESTABLISHED

Grant funds were obtained from the Iowa State Department of Health to establish well-elderly screening clinics. These clinics are held in each of the towns in the 2 counties on a rotating basis. There are 21 towns in the 2 counties with 7 physicians located in 1 town, 3 physicians in 1, 2 in another, and 1 physician in each of 2 towns—leaving 16 communities with no physician. A hospital is located in 2 towns, and nursing homes in 8—leaving 13 communities with no health care facilities.

The well-elderly screening clinics have been in operation only 5 months. During that time, 180 persons who had not seen a physician within a year were screened. The screening program includes obtaining a social and medical history, vision screening, including glaucoma testing, blood and urine testing, a complete physical assessment, counseling regarding the findings, and referral.

To show that these clinics are needed, 107—or 57 percent—of the persons screened were referred; 71—or 66.4 percent—of the referrals were to physicians; 22—or 20.6 percent—to public health nurses, and 14—or 13 percent—to others, such as dentists, ophthalmologists or optometrists, department of social services, and mental health centers. Many other counties recognize the same need but are unable to provide a similar program due to lack of funds.

A recent survey showing the length of time persons had not been seen by a physician was done at the well-elderly clinics in Poweshiek County by the public health nurses. Of 245 elderly persons seen at the clinics, 43 were seen by a physician 1 year ago, 67 between 1 and 2 years, 78 between 2 and 5 years, and 57 had not seen a physician for 5 years. There were many reasons given for not seeing a physician, but the most common were, "My doctor doesn't have time to talk with me," "I can't stand to sit in the waiting room 2 or 3 hours and then see the doctor for only 5 or 10 minutes," and then, of course, the common one, "I can't afford to go."

I feel that the primary problem in providing adequate home health care services to the elderly population in our rural communities is lack of funding. Local health fund moneys are appropriated from the county's general fund, which creates problems. Many counties in Iowa receive shared salary appropriations from the State department of health for one nurse, but there are several counties in northwest Iowa who receive none as there is no money available. These counties were able to establish home health agencies through use of Federal Grant 314d funds which were available for 3 years, after which they went

on county funding. The 9 percent limit placed on increasing expenditures from the general funds has created problems in several counties. Studies show that to provide adequate public health nursing service there should be one public health nurse for each 3,000 population, whereas there usually is one nurse for 8,000 to 12,000 population. This nursing shortage is not due to lack of available personnel—there are plenty of trained personnel. It is due to lack of funding.

#### LIMITED FUNDS HAMPER SERVICES

Less than half of the home health agencies in northwest Iowa are certified for medicare, thus depriving many persons of the benefits they should be receiving. These people should be entitled to services provided by nurses, home health aides, physical therapists, speech therapists, occupational therapists, and medical social workers. Personnel are not available to provide these services due to lack of funds.

Studies are being done throughout the State to compare costs of home care and nursing home care. One study recently submitted to the home health agency surveyor showed the following expenses in the care of an 84-year-old lady with cardiovascular disease who was admitted to a home health agency in June 1972.

There were 100 visits by public health nurses from June 1972 through April 1976 at a cost of \$1,160, and 396 visits by home health aides at a cost of \$2,962—for a total of \$4,122. Nursing home cost in the community from June 1972 through April 1976—1,418 days at \$17.59 per day—would have amounted to \$24,814.

So think of the savings in being able to keep them in their own homes.

We have found to be true what Senator Clark said in his support for the Church-Kennedy home health care amendments. People are better off when they can take care of themselves in their own homes with some assistance. Our public health services can provide that help at less public expense than institutional care. There is no other provider for this service that can meet the needs as well.

Thank you.

Senator CLARK. Thank you for a very comprehensive statement—a very complete one. We thank you for it.

We are going to hear now from Dennis Tobin, who is the director of the Department of Social Services for Ida County. He has worked chiefly with the homemaker-home health programs and will relate what his aides find to be the most requested services, those which are lacking, and those which are attempting to suffice the need in predominantly rural areas.

Dennis.

#### STATEMENT OF DENNIS TOBIN, DIRECTOR, DEPARTMENT OF SOCIAL SERVICES, IDA COUNTY, IOWA

Mr. TOBIN. Thank you.

I have been asked to speak to this committee regarding the health needs of the elderly and, more specifically, the homemaker-health aide program. In order to discuss the homemaker-health aide program, it is first necessary to explain the context in which the program functions.

The department of social services has two very basic goals: to maintain people as independently as possible, and to protect those persons unable to protect themselves.

The homemaker-health aide program and the chore service program work toward these goals while combating some of the other basic problems of the elderly, such as loneliness, boredom, special dietary needs, and lack of knowledge of existing programs.

We find few persons who are really physically unable to leave their homes. The program finds itself in a continuum of services ranging from simple financial assistance, so the elderly can avail themselves of existing services, to complete institutionalization, hopefully of a temporary nature.

#### PROGRAMS LISTED

These programs include, but are not limited to:

- (1) Financial assistance, social security, SSI, and SSA.
- (2) Chore service.—A program designed to arrange for persons to perform simple daily tasks that a client is unable to do himself such as lawnmowing, snow shoveling, and heavy cleaning.

This is a very efficient program, helping a lot of clients for very little expenditure. It should be expanded substantially as an alternative to higher levels of care.

- (3) Homemaker-health aide program.—Performing many types of services for clients under the supervision of a PHN and/or a social worker to make it possible for a person to live in their own home rather than leaving their home for a higher level of care. We feel that a great majority of elderly can function at this level and would prefer it to higher levels of care.

- (4) Family life homes, adult foster homes, and board and room homes.—These programs allow the client a degree of freedom; however, they are no longer in their own home. We have a definite need for more of these facilities as an alternative to institutional care.

They are currently bogged down with bureaucratic problems.

- (5) Custodial care.—The least confining and most flexible level of institutional care. This level of facility can care for many elderly persons as well as younger persons who do not need a great deal of physical care. This type of facility is practically nonexistent in rural areas due to the strict requirements for physical plants and low payment level. Many current nursing care patients could function in a custodial home.

- (6) Nursing homes.—These facilities have, in the past, been a catchall for all types of patients unable to function in their own home. With the availability of alternative types of care, it is hoped that clients will be allowed a number of choices other than the classic home or a nursing home.

- (7) Extended care facilities.—These are special highly skilled nursing homes designed as an alternative to long-term hospitalization. In rural America they have simply been strangled by Government regulations and redtape. Since this is a program paid by medicare, many elderly are cheated out of part of their medicare benefits by the lack of these facilities.

(8) Hospital care and institutional care.—We are blessed with a number of good facilities in this area. We need many lower levels of care to avoid unnecessary hospital or institutional care.

We have found the homemaker-home health aide program to be a viable alternative to these higher levels of care and ask that this committee attempt to see that State and local governments are allowed the resources and flexibility to develop these programs to their fullest.

Thank you.

Senator CLARK. Thank you very much.

We will hear next from James Krick who is, as I understand, the former mayor of Ida Grove, and I believe someone who has experience in what Dennis Tobin was just talking about in terms of homemakers and the chore aide program, and so forth. You proceed in any way you think appropriate, Mr. Krick, and then I will have some questions.

#### STATEMENT OF JAMES R. KRICK, IDA GROVE, IOWA

Mr. KRICK. I think you sure picked a bum person to talk after all these good talks that have been given. I suppose I would have to say most everybody here has been in contact with me or my wife since I was in the transfer business for 46 years. My wife was 79 and I am going on 83, so if there are any mistakes made, just forget it.

Friends, Senator Clark, and Mr. Bedell, Mr. Tobin wanted me to tell my experience that I have had with the new social service of Ida Grove, Iowa.

Twelve years ago my wife, Rose M. Krick, had a stroke which left her a very much crippled person, and 10 years ago she had her second stroke. She stayed in Ida Grove Hospital for, I think, 46 days, and then went to St. Vincent's for a month to learn to walk again. She got along very well and I took care of her in our home.

Then 10 years later she had another bad stroke. She stayed in the hospital for a month or so. After a long stay, I was notified that her time of medicare was up and she could not stay any longer under medicare. I could not take her to a rest home or to another hospital, it had to be a private home so that she would get her privileges back from medicare.

I talked with her doctor, J. B. Dressler, and asked him if I could get a nurse to come once or twice a week to help. He said, "Yes," so I brought her home. Mrs. Anne Snell here—my wife was one of her first patients under this new program. At that time she was a county nurse. I took my wife home and we took care of her for about a month or so. Then she went to a new job in other counties.

#### SOCIAL SERVICE PROGRAM HELPED

So the county got Mrs. Betty McGuire as a nurse. She did a nice job and said the new social service was here in Ida Grove and that I could get a nurse's aide and chore women to help us out. I asked her to get someone to help out, which she did, and Mrs. Delores Peffer came five times a week to take care of Rose. Later, Joan Segebart came to help and then the chore women 3 hours a day per week. Nobody knows what that meant to me after 10 years of this trouble.

Mrs. SNELL. May I interrupt to say the first two ladies mentioned are home health aides in the county.

Mr. KRICK. Yes.

They came to help me out then in any way, shape, or form.

Then in May I got my heart attack with my diabetes and could not care for my wife. I went to the hospital for 23 days and in the meantime they took Rose, my wife, to the nursing home—Morningside Manor—June 7, 1975. She stayed there for 10 months before she died on April 7, 1976. I came home from the hospital after 13 days. In the meantime the flu got bad and took my wife on April 7, 1976. We would have been married 57 years on April 9, 1976. She was buried on the 10th. She was 78 years old and would have been 79 the 15th of October. I am going on 83. I was born January 9, 1894.

I have had this social service ever since my wife died. They have been a wonderful help to me and I cannot praise them enough. I cannot say enough for the care this social service has provided. I cannot thank Mr. Tobin, Phyllis Fick, Larry Bayliss, and Delores Pepper, Joanne Segebart, and Mae Brookbank enough for their wonderful help. I feel I owe something to the social service and these wonderful people who can't do enough for the aged.

I thank Dick Clark and his staff for their help. They have done a good job for the aged. We all get there sooner or later. Phyllis Fick has done a good job for the aged in this social service work. I also want to thank my daughter Barb, her husband, Al, my sister-in-law, and all of my friends.

I thank you all for listening to me.

Senator CLARK. Thank you very much, James, and thank you for your kind comments.

Mr. KRICK. This is my first talk. I don't need to tell you that—you know it. I did the best I could, and I am surely glad to be here and help you out. There are just a few here a little older than I am. My friend over there, John Shultz, is 87. Is that right, John, 87?

Mr. SHULTZ. Eighty-eight.

Senator CLARK. Eighty-eight he said.

Mr. KRICK. I'm just a kid at 83.

If you ask me anything in the transfer business or gray line, I could have done it—most anything of that kind. I had 46 years there. I don't believe there are very many in Ida Grove that I have not been in contact with one way or the other.

I want to thank you for listening. Excuse me for my bad language.

#### "BEST KIND OF TESTIMONY"

Senator CLARK. I think that was the best kind of testimony that this committee could receive about the value of the chore aides and the value of the homemaker services, because it has made it possible for Mr. Krick to stay in his own home for a very long period. This simply would not have been possible had we not had these programs.

I would like to ask Dennis Tobin and Anne Snell a couple of questions before we see if there are any questions or comments from the audience.

First, Mr. Tobin. I recently conducted a survey of the title XX services that are provided to Iowa. We wrote to virtually everyone who was associated with this program and one of the expressed points

of concern was the State matching requirements of 25 percent. In other words, the Federal matching share is 75 percent and the State share is 25 percent in this program.

My question is this. Is 25 percent a reasonable share, in your view, or is it too difficult for a State like Iowa to come up with this amount?

MR. TOBIN. I don't know what the official opinion is supposed to be, Senator Clark, but we have not found the problem to be getting match money. Our problem has been to run into the federally assigned maximum for the State. We have been able to raise the match money wherever we made people aware of the programs and how they would function. We have a breakdown in Iowa two different ways. Many programs are matched by State dollars, many of them are local dollars—and there has been some problem in some areas with the local dollars—but in this area that has not been a big problem.

Senator CLARK. Good.

Now the second question. What percentage of your service program participants are elderly? In other words, of the services that you provide, to what degree do you serve the elderly as distinguished from others?

MR. TOBIN. I don't believe I could tell you the absolute statistics, but I think the statistics that Anne came up with would come awfully close. The vast majority of the services we provide are either to the elderly or from the handicapped.

Senator CLARK. Another question. We just heard from Mr. Krick about the benefits of the chore services and homemaking. Can you be more specific about just what that means? If they go into the home once, twice, or three times a week, what do they do? What does a homemaker do, or what do you do with the chore aides?

MR. TOBIN. There is a basic difference between the three functions. A chore service person, at least the way we are using it, is generally a neighbor lady or a friend who can come in and do any of the simple daily tasks such as heavy cleaning, helping someone go for the groceries, and that type of thing—the type of task that a neighbor or a friend could do. We do this on a contract basis, and on an individual basis.

The homemakers, when they are functioning as homemakers, do skilled types of functions: Teaching people how to do tasks of daily living, teaching some how to function when they are physically handicapped—for example, helping them prepare special diets—this type of thing.

#### GRAY AREA IN SUPERVISION

There is a gray area between the homemaker and the health aide, however. When they are doing specifically health aide work they are under the supervision of the public health nurse and she has received orders from a physician. So when they are doing health aide work they are doing the types of things required for health reasons to keep them in their own home.

Senator CLARK. Fine. Thank you very much.

I would like to ask Anne Snell a question. As I understand it, approximately 90 percent of all the persons that you serve as a public health nurse in Ida County are elderly people.

Mrs. SNELL. That is correct.

Senator CLARK. Are you trained to care for the elderly specifically in that kind of program?

Mrs. SNELL. All of the public health nurses have basic nurses training, of course. Our goal is to find nurses who have public health experience or who have public health training in the program, but this is not always possible. So through some of our area technical schools, as well as the State department of health, in-service training is given so that they do learn while they go along. There does not seem to be any problem finding qualified personnel.

Senator CLARK. Suppose someone here at some future time wanted the services of a public health nurse. When you find someone, do you make regular calls or do you simply respond to telephone calls? How does that work?

Mrs. SNELL. Anyone may be referred to the public health nurse in the county. Many of them are doctor referrals, the patient, the patient's family, or a concerned neighbor.

Senator CLARK. How do they reach you?

Mrs. SNELL. Just simply call the phone number in the phone book. There are many different ways—through newspapers, and so on. They call the office, the public health nurse makes a home visit to assess the situation and, upon an assessment, if she feels that she can provide a service she then contacts the family physician for orders. The public health nurse only works under direct supervision of the family physician unless it is general health supervision, and then she may function without a physician's orders.

Senator CLARK. Good.

I want to thank this panel very much. Please stay seated because we are going to see if there are any comments or questions from the audience.

I do want to thank you very, very much. I know that it is very warm and we are not going to take more than about 5 minutes or so. There is a microphone up here in the center and anybody that would like to walk to the microphone and make any statement or ask any questions, we welcome you to do so. I will then see if Congressman Bedell has anything to say. I am going to take about 30 seconds and that will complete the program.

Come up to the microphone and identify yourself for the record.

**STATEMENT OF BOB TORRY, CHAIRMAN, CITIZENS ADVISORY COMMITTEE, CHEROKEE COUNTY HOMEMAKER/HEALTH SERVICE, CHEROKEE, IOWA**

Mr. TORRY. Senator Clark, Congressman Bedell, I am Bob Torry, a farmer in Cherokee County. I have been on the health board of Cherokee County since it started. I have been on the homemaker service since that started. I report that both of our organizations in Cherokee County have been very successful.

What we need is a comprehensive program which will meet the social, psychological, and physical needs of the homebound elderly. These people who are testifying are not as concerned with health programs because they are well enough to be here. The ones that I am talking about are the ones that are found in their home.

As chairman of the Citizen's Advisory Committee for the Cherokee County Homemaker/Health Service, I respectfully recommend that Federal assistance is necessary for continuance of this vital service to the elderly and handicapped.

The Cherokee County Homemaker/Health Aide Service is designed to place responsible workers in homes where illness, disability, or other crisis threatens normal family living. Aides are assigned to the home to perform whatever duties are required to meet the needs of each individual situation.

While services are available to all citizens in need, the majority of cases involve the elderly. In the month of June, 50 individuals were provided this service in their homes. Forty-seven of the individuals served were over 60 years of age. Seventeen were unable to pay full cost for services provided. Consequently, funds generated from other sources provided the resource for subsidizing the services for those financially incapable of paying full cost of services provided.

#### INFLATION CAUSES FUNDING PROBLEMS

We have mobilized funds to subsidize the program for those in need, such as social services, department of health, Commission on Aging, Cherokee Board of Supervisors, Mid-Sioux Community Action Agency, and citizens' contributions. Any decrease in Federal or State funding plans place an added burden on local resources. Local resources are inadequate to sustain the homemaker/health aid service. Ever-increasing costs, because of inflation, complicate the problem. This inflation really eats us up.

The Cherokee County Homemaker/Health Aide Service has citizen support in evidence by financial assistance from the county board of supervisors and concerned citizens.

We feel the program has a twofold benefit. First, many of our senior citizens can remain in their homes living with dignity and respect for an indefinite period when a helping hand is provided by the homemaker/health service. For many, the only other alternative would be institutionalized facilities. Our program is a human approach to satisfying a need for many of our elderly and others plagued with sickness.

Second, we feel it is good economics to provide this service within the home as compared to institutional care. A few hours of aide service in the home each week will satisfy the needs for many of our elderly.

We feel our citizens and county officials have responded to the need by providing financial assistance within their capability. As stated previously, local resources are inadequate to sustain the program. Without continued Federal assistance, the services of the program will have to be curtailed or discontinued.

It is the concern of the advisory group I represent that services should be expanded, but limited funds compel us to do the best we can with what we have.

I thank you.

Senator CLARK. Thank you very much. That was a very good statement.

I wonder if there is anyone else in the audience who would care to say anything or ask any questions.

Rick Motz.

Let me say, by the way, that if you want to speak for only a moment or two, if any of you have a longer statement we will put that in the record as if given.

So you go right ahead, Rick.

#### STATEMENT OF RICK MOTZ, DIRECTOR, AREA AGENCY ON AGING FOR AREA IV

Mr. Motz. The first thing I want to say to you is that now is your chance to speak up. The second thing I want to say, and you already know that, I am Rick Motz. I am the director of the area agency on aging for area IV.

First of all, thank you, Senator Clark, and Congressman Bedell also, for coming to our area to listen to our concerns regarding aging programs. Your efforts at the National and State level on behalf of older Iowans are to be commended.

Aging programs have come a long way during the short time in which Older Americans Act funds have been available to our area. Transportation is evolving from a one-county, one-bus system to a multicounty, tristate system. Senior centers or clubs exist in almost every town of area IV. Other programs, such as meals-on-wheels, homemaker-health, and winterization programs have enjoyed similar success.

We have been involved with the aging concept for about 3 years now. I have two concerns regarding programs for older persons. First, I would recommend to you the elimination of the 25 percent local public cash match requirement. The rule, in effect, does not recognize cash match from entities other than local taxing bodies. For example, if a program needed a total of \$10 match, \$5 of it would have to be cash and \$2.50 of the \$5 would have to be identified as being received from a local taxing body. If a service club would give \$5 for match, the program could only use \$2.50 of it and hope to get the other \$2.50 from local and county governments.

Second, as you are very aware, there is a large river running down the boundary of area IV. This boundary, called the Missouri River, prevents services from being delivered to many counties in Nebraska and South Dakota. The Older Americans Act has fostered a separation of State's policy thus far. I would suggest to you that future legislation encourage interstate agreements. Interstate area agencies on aging would provide the potential to serve many more older persons in the most efficient way possible.

I appreciate this opportunity to express my comments at this time.

Thank you, Senator Clark.

Senator CLARK. Thank you very much.

Anyone else who would like to make a statement, comment, or ask a question? Is there anything you would like to say?

#### STATEMENT OF BERNICE DAHL, WHITING, IOWA

Mrs. DAHL. I am Mrs. Bernice Dahl. My husband, Willard R., and I live in Whiting, in Monona County. Thirteen came in on the mini-

bus today. My request is: please, when you get our proposal for transportation, do all you can and all Mr. Bedell can do. We are really land locked. The Missouri River is on the one side, there are no buses going down the middle, and no trains—only on the outer edge. We would really appreciate anything you can do.

We have worked and retired from the Monona County Task Force and we have a new one, but I have been with it since it started. I am a member of the transportation committee so I ask you, please help all you can to get more transportation to our part of Monona County. The Sioux City agency is working with us. That is my need.

Also, for some of the senior citizens, we got a raise on our social security, yes, but we also got a raise in our medicare payments, so it didn't mean much. Those are things that need to be looked into because for a lot of our people, their money does not reach what they need to reach. I did learn that if a person is eligible, SSI welfare can help.

Many of our senior citizens are disturbed over the cost of hospital costs. That is the initial payment, cost of medicine and doctors. Some of us squeeze through, but it is difficult sometimes. What can be done? I don't know, but I feel that you and the committee will come to some satisfactory or helpful solution.

I certainly appreciate today and I thank you very kindly for listening.

Senator CLARK. Thank you for an excellent statement.

#### STATEMENT OF MARY RUTLEDGE, YOUR, INC., WEBSTER CITY, IOWA

Ms. RUTLEDGE. I am Mary Rutledge and I work in Webster City, Iowa, for a community action agency, YOUR, Inc. About a month ago I went to Washington about a consumerism program about the high cost of utilities for the Midwest. I would like to be told why utilities are low on the priority list of Senators and Congressmen in our area. It upsets me a great deal.

Senator CLARK. What do you mean by "low"?

Ms. RUTLEDGE. Liaisons from Senators' and Representatives' offices informed our agency that lifeline and energy stamps are the lowest on their priority lists. The bills have not been polished off as of now. This upsets me quite a bit because in some areas the cost of utilities has been raised 100 percent or more, and it is very difficult for elderly persons with the small amount of social security they get.

When the elderly do receive raises in their income, they are cut back or denied other necessary services. Because of these reasons, utility bills are prohibitive. This is why I would like to see the rising costs of utilities top on the priority lists of our Senators and Representatives.

Senator CLARK. Fine. That was a very good statement.

I think all of us who have paid any attention or followed the problems of the elderly are particularly concerned about the problems of inflation. One of the major reasons for inflation, obviously, is the increased cost of energy, and so it is very high on our priorities.

Yes, sir.

STATEMENT OF KEVIN BEAUVAIS, EXECUTIVE DIRECTOR, WOODBURY COUNTY COMMUNITY ACTION AGENCY, SIOUX CITY, IOWA

Mr. BEAUVAIS. Senator, my name is Kevin Beauvais representing the Woodbury County Community Action Agency in Sioux City. I have already submitted a copy of the statement that my board chairman had prepared for the committee. [See below.]

Senator CLARK. Good. It will be made a part of the record.

Mr. BEAUVAIS. I want to thank you very much for coming to the area and giving us an opportunity to be heard. Essentially the Woodbury community has identified three major concerns. Mayor Murphy talked about the problem of housing and Jean Sandman mentioned housing. We are of the opinion, after having operated a winterization program, to do some work especially in the elderly homes. There is a need to service at least the homes that we presently have.

Many people are living on a subsistence level of fixed income which makes it difficult for senior citizens to maintain a home and to keep it in a safe and sanitary condition. Also, as their lives change and their physical capability changes, sometimes that home needs to change with them. We think that comprehensive home rehabilitation or home maintenance programs for the elderly would actually be protecting two of our valuable American resources: The housing supply that we presently have, minimizing the additional need to replace housing, and also protecting the lives and health of the senior citizens that live in what was formerly a family home, which maybe now has only one or two of them left in it.

The other aspect we think, as was mentioned earlier, is in terms of counseling. Senator, we think that the governmental maze of regulations and bureaucracy, as well as the change in the economic systems of our country, various businesses and economic institutions often leave the senior citizens entirely confused by the encounter. Many times it takes a paralegal assistant, a legal aide, an attorney, or somebody that has a great deal of time to deal with them, to take them by the hand and show them the regulations, and also deal with the bureaucracy that they are encountering in order to handle or to solve the particular problem, whether it is a social security check that didn't arrive or some problem with paperwork. The regulations that they encounter as senior citizens are extremely confusing to them.

Also, concerning the aspect of consumer education or consumer rights, paralegal assistance could go a long way to help alleviate some of the complicated problems that the elderly citizens run into.

[The statement prepared by Donald Graham, chairman, board of directors, Woodbury County Community Action Agency, follows:]

STATEMENT OF THE WOODBURY COUNTY (IOWA) COMMUNITY ACTION AGENCY

Ladies and gentlemen, the Woodbury County Community Action Agency appreciates this opportunity to appear before and submit testimony to this Senate Special Committee on Aging as our comments on the problems of the rural aging in our area from our perspective.

First of all, the Woodbury County Community Action Agency is a non-profit Iowa corporation which exists to identify, mobilize, and utilize available public and private resources to assist the low income, the minorities, and

the elderly to improve their economic conditions and standard of living. Toward this end the Woodbury County Community Action Agency applies for and receives programmatic funding from a variety of sources, principally of a categorical nature, to provide certain select services for these target populations. Our major sources of funding are the Community Services Administration (CSA), Department of Health, Education, and Welfare (HEW), Older Americans Act—Title III—Area Agency on Aging, the State of Iowa, and local county boards of supervisors, specifically Woodbury County and Monona County.

With these various resources, the Woodbury County Community Action Agency conducts a wide variety of programs; those of service to and of interest to the elderly persons included in our service area: our neighborhood center and outreach (personal contact and information and referral services) community nutrition program which funds food stamp outreach, emergency food, and related assistance, our winterization/weatherization housing energy conservation program, and a developing rural transportation program.

Participant statistics for these programs have previously been submitted to the Kansas City regional office of the Community Services Administration for submission to this Senate special committee. All of our agency's programs, except for those specifically targeted for economically disadvantaged children, include a high percentage of elderly participation as our area includes an extremely high percentage of elderly citizens. According to the 1970 census, Woodbury County contained 17,618 persons 60 years of age or over. This is over 17 percent of the entire population in Woodbury County. Of the 17,618 persons 60 years of age or over, in excess of 28 percent of this number was identified as being 65 years of age or over and living below the recognized governmental poverty level income figures.

#### ELDERLY OFTEN "THREATENED" BY CHANGE

The Woodbury County Community Action Agency comes into contact with many of these elderly persons existing on subsistence level fixed incomes in an economic environment which is continually placing essential needs and services at spiraling costs. Among these essential needs and services are food, housing, energy, medical, and transportation. We also find the elderly persons to oftentimes be intimidated and even threatened by the rapidly changing political and economic world in which they now live. There can be no doubt that the current world and the current political and economic structures are very much changed and entirely different and alien from those with which our elderly citizens had learned to confront, deal with, and operate with in their earlier lives.

The WCCAA would like to take this opportunity to offer a few ideas on behalf of our elderly citizens which we are respectfully requesting the Senate Special Committee on Aging to give careful consideration in your future deliberations on the design of programs and upon the appropriations and expenditures of funding targeted to the needs of the elderly. Others have offered or will offer testimony today from a wide spectrum of vantage points. We will limit our comments to essentially three areas of need for our elderly citizens—housing, transportation, and legal services.

*Housing:* During the conduct of our winterization/weatherization program geared toward energy conservation and thus home heating cost reductions for low income and elderly citizens, our agency has become increasingly aware of the inhumane and dangerous conditions in which some of our elderly citizens and homeowners are forced to exist. Homes that were once the pride and joy of a growing family are now full of hazardous situations and many are identified as containing major housing code deficiencies. In 1975, according to Sioux City's housing assistance plan, there were 4,642 low-income households in substandard housing; 32 percent of these were elderly citizens. From July 1973 through December 31, 1975, the Sioux City Housing Inspection Office has in their random housing code inspections encountered major housing code deficiencies in over 400 homes of senior citizens in Sioux City alone. We expect this type of experience to be representative of the housing situation throughout other towns and the rural areas of Woodbury County.

Subsistence level fixed incomes and the spiraling building costs have worked in combination to severely limit the capabilities of many senior citizens to maintain and to repair their family home. We are recommending the development of a program of home maintenance and home rehabilitation targeted to the

elderly homeowners. At the present time, the Woodbury County Community Action Agency has on file an approved, extremely small, pilot project application with SIMPCO's area agency on aging; but the funding has been held up by the Iowa Commission on Aging. This program calls for a meager \$8,850 in Older Americans Act title III funds for materials and essential building improvement contracts targeted for 10 homes owned by elderly citizens in Woodbury County. We have also submitted a similar application for fiscal year 1977 funding in the requested amount of \$75,912 to repair and to rehabilitate an estimated 35 elderly homes. This program would be targeted to the structural and building hazards such as dangerous steps and sidewalks, deteriorating plumbing systems, crumbling foundations, faulty heating systems, hazardous electrical systems, as well as insulation, weather stripping, roofing, and physical appearance/structural protective features. The results of this program would have two significant impacts: (1) the elderly owners would enjoy a much improved and safer living condition through the minimization of crippling accidents, much improved comfort and cost, and the avoidance of unnecessary premature institutionalization; and (2) the deteriorating housing in our towns and countrysides would be preserved for a much longer life; we would, in effect, be protecting two valuable American resources—our elderly citizens and our supply of safe, sanitary, and decent housing.

#### FUNDING DIFFICULTIES IN HOUSING PROGRAMS

However, at the present funding levels and under the present match requirements, the housing maintenance rehabilitation programs targeted for the elderly citizens are extremely difficult to fund and to develop. With the competition for scarce funding, our area agency on aging cannot afford to allocate sufficient funds to relatively expensive rehabilitation programs. Secondly, local agencies such as ourselves find it extremely restrictive to generate 10 percent, 25 percent, and 40 percent matching funds. I am suggesting that the Senate special committee give consideration to a revision of the match requirement of title III to exempt this type of program or to develop a separate funding mechanism earmarked for the dual purpose of protecting both our elderly homeowners and our scarce housing resource.

*Legal aid:* Our neighborhood centers and our outreach staff members as well as other portions of our agency staff continually encounter senior citizens who are intimidated by the current maze of governmental agencies and regulations as well as by the complicated alien economic environment, both of which represent distinct problems to our senior citizens. Not being as well versed as some of the younger citizens in the exercise of their rights of citizenship, the elderly often suffer the pains of abusive and unresponsive governmental bureaucracy and often exploited by the various elements of our economic environment. Effective legal aid services and/or paralegal assistance could be very helpful and productive to the senior citizens in exercising the rights of citizenship through education in the utilization of the judicial system, the exercise of consumer rights, advocacy or ombudsmanship services with respect to governmental agencies in many other areas of supportive assistance. The elderly are fully cognizant of and often infuriated by seemingly unfair treatment but also are unsure of who, what, or how to seek remediation; instead they often seethe in their anger and just throw up their hands in disgust with a world which they helped to create but which has now changed so much and so rapidly as to have left them largely undereducated and largely defenseless.

Recent congressional action in appropriating additional funding for the Legal Services Corp. is one small step toward improvement of the valuable legal aid services if the Legal Services Corp. is required to expand the geographic coverage of its service. Two other suggestions for improvement of legal aid service availability would be to increase the Older Americans Act funding and to include legal aid and paralegal assistance in the mandated elements of state and area agency on aging plans and programming.

*Transportation:* The enhancement of mobility for senior citizens must be pursued. Our elderly citizens, for physical, psychological, and financial reasons, find themselves increasingly unable to utilize the most usual mode of transportation in America—the private automobile—and thereby become increasingly remote from essential medical services, desirable nutritional resources or services, and the essential business and professional communities. This distance from or inaccessibility to reliable, serviceable transportation also minimizes access

to valuable social and recreational contacts which contribute so much to a fuller life for our elderly citizens. Urban situated elderly citizens are not as adversely affected by this need for transportation if they can accommodate themselves to the rigid fixed routes and to relatively inaccessible equipment or can afford the relatively expensive paratransit cab facilities. For the urban elderly, even the local existence of the mass transportation and paratransit operations does not represent solutions to the needs to travel for essential medical, nutritional, business/professional, social, or recreational needs. If the urban situated elderly cannot avail themselves of available mass transit/paratransit operations, the transportation problems of the rural elderly are astronomical. The facts of low-density population and relatively long distances contribute to make rural oriented transportation virtually nonexistent. Elderly, both in the urban and rural environments, are forced into a relatively empty life existing without access to means of fulfilling basic human needs or are forced to become increasingly dependent upon family, friends, neighbors, etc., to assist them. Forced dependency is extremely distasteful to the proud elderly citizen of this area.

#### TRANSPORTATION FOR ELDERLY STILL INADEQUATE

In this area, Ida County, Cherokee County, Woodbury County, and Monona County have initiated efforts to overcome some of the transportation inaccessibility faced by the elderly; but much more needs to be done. The State of Iowa, local county boards of supervisors, the area agency on aging, and others, have all contributed to the initiation of rural transportation systems targeted primarily for the elderly in each of the above counties. However, Cherokee County has but one vehicle for a large rural county; Ida County has recently acquired one vehicle to serve the entire Ida County. Woodbury County has had until recently only one vehicle to service the transportation needs of an area encompassing over 17,000 persons over 60 years of age, 5,000 of which are economically disadvantaged. Monona County just recently acquired the availability of one vehicle for a county which contains 2,000 elderly citizens, half of which are below governmental poverty standards.

WCCAA has currently in the offices of the Federal Highway Administration in Washington, D.C., an application for a rural highway public transportation demonstration program of a 2-year pilot project nature with the goal of establishing a comprehensive, integrated transportation system of a regional nature. If funded, the rural transportation program would allow the region to demonstrate to ourselves, to the local communities, and to the Federal Government what can and must be done to enhance the mobility of our senior citizens.

The problems of mobility and transportation service for our senior citizens has not received enough attention and enough funding in the past. Present funding by the Older Americans Act, title III, is about to terminate because of unreasonable expectations that any project initiated by the Older Americans Act funding mechanism should be self-supporting after 3 years. Where has public mass transportation in heavily populated centers become self-sufficient? The elderly could also benefit much more by door-to-door or demand-response systems, but these services are extremely costly to perform because of the time, the mileage factors, and the capital equipment needs to cover a large scarcely populated rural area. Even the rural highway public transportation demonstration program which includes 100 percent funding for capital equipment and partial funding for operational expenses contains a requirement that the project be self-sufficient after 2 years. The local political communities could absorb the costs of these services, but they cannot be expected to do so entirely alone as they would have to rely upon property taxation (which would increase the burden upon the elderly homeowner) or upon other relatively scarce resources. It should be increasingly apparent to Congress and to the administration that units of local government are not fat with underutilized financial resources. Congress and the administration are going to have to realize that rural public transportation operational subsidies are going to be essential to the future expansion of and continuation of rural public transportation systems; Federal rural public transit operational subsidies are going to have to become part and parcel of our national transportation program.

WCCAA welcomes the opportunity to be of service to our elderly citizens and to contribute what resources we can mobilize toward the goals of helping our older Americans lead a much more productive and much fuller life for a longer period of time. We sincerely hope that our comments here today will have

contributed, even in some small way, to the improvement of that golden age life.

Senator CLARK. Thank you very much.  
One more statement and then we will close.

**STATEMENT OF MARY C. COLLETTI, YOUR, INC., WEBSTER CITY,  
IOWA**

Ms. COLLETTI. I am Mary Colletti and I work for the community action agency. I am the new projects developer; I am also the public relations officer. I would just like to thank the people in Washington for their insight and foresight as related to public relations in CAA work. I have lots of gripes, but the one thing I am happy about is that they are recognizing it is very important to have a public relations program for the community action agencies. Since last year when we started, our public relations program has increased two times and are serving approximately 150 clients per month. We are now serving almost 400 a month just because the word is out. Now I wish we could have enough funds to be able to support our programs and have a little more administration for such things.

Senator CLARK. Thank you.

I think we are going to have one last statement here.

**STATEMENT OF MYRTLE SIEVERTIEU, IDA GROVE, IOWA**

Mrs. SIEVERTIEU. I am Mrs. Myrtle Sievertieu. I would like to bring something forward that I have been talking about for 7 years—ever since I moved from the farm to Ida Grove. My biggest problem, and it is a big problem for a lot of other people, is that I have seen my elderly neighbors over 65 years old—we put in applications sometimes to Grace Montgomery at our center where we are expected to get help with our yard work and snow shoveling in the wintertime. It is absolutely impossible to get dependable help to shovel our walks and porches and get us out of the house, after a heavy snowfall especially. After a very light snowfall maybe we can get a neighbor boy or someone to shovel and sweep, or maybe it is something that we can do ourselves.

When we have a heavy snowfall and we really need help, there is no one available. I have called Grace Montgomery on various occasions. I have been fairly successful in getting help to mow the yard or to rake leaves, but when it comes to shoveling snow it is just an impossible situation. School children can't come until the afternoon. They promise you faithfully that after school they will come and clean your walk, but when there is a heavy snowfall it just lays there and lays there until you go out and dig it off yourself. By that time it is an icy, impossible mess to clean off.

We have some wonderful facilities in this town and I am very proud of my town. I will back it 100 percent in every way I can, but when it comes to helping the elderly people clean their sidewalks in the wintertime, it is no good.

Senator CLARK. Thank you.

Mrs. SIEVERTIEU. I hate to say it, but I wish we could get some dependable snow shoveling here in the wintertime.

Thank you.

Senator CLARK. Thank you very much. It is hard to imagine snow in weather like this.

We are going to close now. I wonder if Congressman Bedell might have any further comments.

Representative BEDELL. I just want to thank you and the staff again for coming out here to Ida Grove.

Senator CLARK. Thank you.

With that we close our hearings. Thank you very much for coming. [Whereupon, at 4 :32 p.m., the hearing was recessed.]

Thank you very much for the  
 letter of the 12th inst. I am  
 glad to hear that you are  
 well and hope you will  
 continue to improve. I  
 am sure you will find the  
 treatment very beneficial.  
 I am, Sir, your obedient  
 servant,  
 J. W. Wainwright

## APPENDIXES

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### Appendix 1

#### LETTERS SUBMITTED BY THEODORE E. MURPHY<sup>1</sup>

ITEM 1. LETTER FROM THEODORE E. MURPHY TO L. D. ELWELL, ASSISTANT ADMINISTRATOR, MULTIPLE FAMILY HOUSING, FmHA, WASHINGTON, D.C., DATED APRIL 14, 1976

DEAR MR. ELWELL: You may recall that I visited with you at the Northwest Iowa Community Conference sponsored by Representative Berk Bedell, and on November 21, 1975, wrote a letter to you regarding rent supplements under section 8.

The 12 housing units for the elderly with limited incomes was completed on January 15, 1976, and was completely occupied in less than 1 week. It appears to be operating very satisfactorily.

Now our housing corporation group have requested FmHA to finance the development of 20 additional units. Our housing survey of Ida Grove of October 1975, and the list of applicants we already have for the additional units, indicates there will be no problem in filling up the units as soon as available.

Again we have the problem I mentioned in my conversation with you in October 1975 and in my letter of November 21, 1975, "We need assistance under section for rent supplements for a number of our prospective tenants."

In your reply to my letter to your office, you indicated there was much work being done about this matter with HUD and FmHA holding meetings and that a satisfactory solution could be worked out by March 1976.

We are much concerned and I would welcome a letter from your office bringing us up to date on this matter. Our board holds monthly meetings and I would like to present your reply to them.

Representative Bedell and his wife will be visiting in my home on April 24 and I will include this subject in our conversations.

Yours respectfully,

THEODORE E. MURPHY.

ITEM 2. LETTER FROM L. D. ELWELL TO THEODORE MURPHY, DATED MAY 12, 1976

DEAR MAYOR MURPHY: This will reply to your letter concerning the present status of the rental assistance payment program for low-income prospective tenants.

Our letter of December 2, 1975, indicated that we were working on the tandem approach of utilizing the Department of Housing and Urban Development's (HUD) section 8 and the Farmers Home Administration's (FmHA) section 515 rural rental loan authorization.

The FmHA and HUD representatives have been working together to develop a memorandum of understanding which proposes to eliminate the processing of dual applications to both HUD and FmHA to obtain section 8 rental assistance payments on new construction to be financed by FmHA. It is contemplated that FmHA will handle the complete application and processing on all new construction projects financed by FmHA section 515 loans. As the situation now exists, FmHA can consider your loan application for a section 515 loan to be operated

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<sup>1</sup> See statement, p. 205.

under plan II with interest credits the same as your previous project; however, when the proposed memorandum of understanding between HUD and FmHA is reached, there would be a possibility that the proposed project could be developed utilizing the tandem approach which may provide the rental assistance payment program you require to meet the needs of the low-income families in your community.

We suggest you contact our Iowa State director, Mr. Robert R. Pim, room 873, Federal Building, 210 Walnut, Des Moines, Iowa 50309, telephone 515-284-4121, who will be glad to keep you informed of changes within our rural rental housing program.

Sincerely,

L. D. ELWELL.

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ITEM 3. LETTER FROM THEODORE E. MURPHY TO ROBERT R. PIM,  
IOWA STATE DIRECTOR, FARMERS HOME ADMINISTRATION, DES  
MOINES, IOWA, DATED AUGUST 6, 1976

DEAR MR. PIM: I am enclosing a copy of a letter I received from Mr. L. D. Elwell some months ago, relative to the rental assistance payment program.

In January 1976 the Ida Grove Low-Rent Housing Corp. completed 12 units of one- and two-bedroom apartments. They were filled within a week. No rental assistance was available from HUD or FmHA, so four of our tenants had to receive rental assistance from relatives.

Now we have been approved for 24 one bedroom units and we expect to have a letting on August 31. We know from the applicants we have on file that a number of them will need the rental assistance payment program for low-income tenants.

We have contacted HUD a number of times through the Siouxland Interstate Metropolitan Planning Council (SIMPSCO) and the latest information is that we cannot qualify for low-rent assistance under section 8. If we are to receive any assistance for the low-income elderly in the Ida Grove area it will have to be through Farmers Home Administration program, so we urge you to give the fullest consideration to this matter.

If at all possible we would like to have a reply from your office before August 17 because on that date Senator Clark and his staff will hold a meeting in Ida Grove relative to the problems of elderly people, especially in the fields of housing and transportation.

Sincerely,

THEODORE E. MURPHY.

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ITEM 4. LETTER FROM ROBERT R. PIM TO THEODORE MURPHY, DATED  
AUGUST 10, 1976

DEAR MAYOR MURPHY: In response to your inquiry dated August 6, 1976, it is our understanding that the memorandum of understanding which was referred to in Mr. Elwell's letter of May 12 has been signed by both agencies, and the implementation of the understanding now is contingent on both agencies issuing operating instructions to their field offices. As of this time we have not received any such instructions, and therefore do not have rent subsidy assistance available except as it is currently available through Housing and Urban Development section 8 program.

We anticipate that this program should be operational sometime in the near future, and our county offices will be informed as soon as it is available.

If you have any further questions, please feel free to contact us.

Sincerely,

R. R. PIM.

## Appendix 2

### AID CENTER REPORT, SUBMITTED BY JEAN SANDMAN<sup>1</sup>

#### AID CENTER: SURVEY OF NEEDS OF RURAL SENIOR CITIZENS IN RURAL AREAS OF NORTHWEST IOWA

The form, "Survey of Needs of Rural Senior Citizens" was given to 119 rural residents, age 60 or older, who were attending congregate meals in the towns of Cherokee, Onawa, and LeMars, and visiting the Siouxland Senior Center in Sioux City.

Service categories in the survey, as well as individual service items, were adapted from the United Way of America Service Identification System (UWASIS).

Participants were requested to check service items they felt important to senior citizens, indicating either "needed," "adequate," "available," or a degree of need. Participants were encouraged to make written comments on felt needs and to note other concerns of rural older citizens. These comments are attached to a summary of survey results. No copies of the survey were signed.

From answers recorded on the survey, one can conclude rural seniors feel their greatest needs are in the areas of income maintenance, housing, transportation, and health.

*Income maintenance.*—Of those completing the survey, 51 percent indicated they needed increased coverage in medicare and 49 percent expressed a need for larger social security allotments. An additional 20 percent requested more coverage in survivor's insurance as well as 20 percent expressed need for emergency financial assistance service.

*Housing services.*—Low to moderate cost housing was checked as a need by 54 percent of the respondents while 14 percent indicated a need for assistance in housing search. Public housing units were seen as a need by 22 percent and rent supplements by 21 percent.

*Low-cost transportation for older persons.*—Fifty percent of persons completing the survey saw transportation within the home community as a need. Transportation to neighboring communities was indicated "needed" by 32 percent and to special functions and events by 37 percent.

*Health.*—Health care ranks high as a concern of older citizens. Twenty-four percent requested more public health nursing, 18 percent called for community clinics, 28 percent asked for home health care, and 24 percent indicated adequate nursing home facilities are needed. Physicians were checked as needed by 47 percent and 30 percent asked for rehabilitation for persons afflicted by crippling diseases.

*Other priorities.*—Other priorities include 31 percent who stated legal aid is a need, 25 percent who checked opportunities for free or inexpensive clothing as a need, and 27 percent who marked jobs for older persons as a need.

*Sidelights.*—One item of interest to the respondents was congregate meals which commanded a 60 percent response. Twenty-eight percent indicated more sites are needed, 4 percent requested cheaper meals, and 34 percent stated congregate meals are adequate.

Interest of senior citizens in community problems became evident through the questionnaire with 24 percent expressing need for drug and alcohol prevention and treatment and 25 percent marking a need for pollution and litter control.

*Conclusions.*—The survey was made as a sampling of needs of rural senior citizens in the Siouxland area. Though an unscientific and inconclusive study, the survey indicates that older persons in northwest Iowa are aware of their needs and quite ready to express their opinions. Planning for older citizens re-

<sup>1</sup> See statement, p. 212.

quires their involvement and a respect for their expression of needs, solutions, and methods.

(119 persons interviewed in Woodbury, Monona, Plymouth, and Cherokee Counties, in the State of Iowa)

*Question:* What do you feel is most needed as a service for persons aged 60 and over in your northwest Iowa community—a need that presently is not met?

*Question:* Check one or more categories which apply. Star those items which you feel are priority needs.

1. Employment services for persons 60 years and older :

Help in finding a job : 18—15% needed ; 3—2% available.

Training for jobs : 13—11% needed ; 1—5% available.

Jobs for older persons : 32—27% needed ; 3—2% available.

2. Income maintenance services :

Health insurance (Medicare) : 61—51% more coverage ; 11—9% adequate.

Social Security : 59—49% larger allotments ; 12—10% adequate.

Survivor's insurance : 24—20% more coverage ; 6—5% adequate.

SSI (Supplementary Income) : 15—13% more persons covered ; 8—7% adequate.

Emergency financial assistance : 24—20% needed ; 6—5% adequate.

Special benefits for persons aged 72 and older : 48—40% needed ; 8—7% adequate.

3. Consumer protection and safety services :

Consumer Education, classes or individual : 7—6% needed ; 6—5% available.

Merchandise quality control : 22—18% needed ; 3—2% adequate.

Service to handle consumer complaints : 21—18% needed ; 5—4% adequate.

4. Food and nutrition services :

Food stamp program : 10—8% more persons eligible ; 18—15% adequate.

Congregate meals : 33—28% more sites needed ; 5—4% cheaper meals ; 34—28% adequate.

Meals on wheels : 18—15% needed in area ; 7—6% cheaper meals ; 17—14% adequate.

5. Clothing and apparel services : Opportunities for free or inexpensive clothing  
30—25% needed ; 16—13% adequate.

6. Housing services :

Low to moderate-cost housing : 64—54% needed ; 3—2% available.

Assistance in housing search : 17—14% needed ; 3—2% available.

Rent supplements : 25—21% needed ; 3—2% available.

Public housing units : 26—22% needed ; 2—1% available.

7. Low-cost transportation for older persons :

Within the home community : 60—50% needed ; 9—8% adequate.

To neighboring communities : 38—32% needed ; 9—8% adequate.

To special functions and events : 44—37% needed ; 8—7% adequate.

8. Protection, justice, and safety :

Free or low-cost legal aid : 37—31% needed ; 2—1% available.

Adequate police and fire protection : 24—20% needed ; 11—9% available.

Public disaster services : 14—12% needed ; 8—7% available.

9. Environmental protection :

Pollution—littering control : 30—25% needed ; 4—3% adequate.

Environmental conservation : 2—1% needed ; 5—4% adequate.

Historical conservation—buildings, etc. : 11—9% needed ; 6—5% adequate.

10. Community health :

Communicable disease control : 17—14% needed ; 8—7% adequate.

Public health nursing : 29—24% needed ; 9—8% adequate.

Public health sanitation : 12—10% needed ; 9—8% adequate.

Health education : 10—8% needed ; 8—7% adequate.

Community clinics : 21—18% needed ; 4—3% adequate.

Home health care : 33—28% needed ; 4—3% adequate.

Adequate nursing home facilities : 29—24% needed ; 7—6% adequate.

**11. Medical care services :**

Hospitals : 16—13% needed ; 14—12% adequate.  
 Emergency care : 23—19% needed ; 8—7% adequate.  
 Physicians : 56—47% needed ; 6—5% adequate.

**12. Mental health and mental retardation :**

Psychiatric clinics : 6—5% needed ; 7—6% available.  
 Alcoholism prevention and treatment : 12—10% needed ; 10—8% available.  
 Drug abuse prevention and treatment : 17—14% needed ; 2—1% available.  
 Services, treatment and care of mentally retarded : 14—12% needed ; 6—5% adequate.

**13. Rehabilitation :**

(For stroke patients, crippling diseases) : 36—30% needed ; 2—1% available.

**14. Optimal personal and social adjustment services :**

Chore service : 10—8% needed ; 5—4% adequate.  
 Homemaker service : 15—13% needed ; 7—6% adequate.  
 Friendly visiting : 19—16% needed ; 7—6% adequate.  
 Recreation—social groups/senior centers : 18—15% needed ; 9—8% adequate.  
 Cultural opportunities : 4—3% needed ; 7—6% adequate.  
 Spiritual services : 6—5% needed ; 10—8% adequate.  
 Equal opportunity, civil rights : 6—5% needed ; 10—8% adequate.

(Cherokee County—48 respondents)

*Income maintenance :*

1. Right for persons to marry without losing pension.
2. Persons can get married without losing pension.
3. Cheaper rates—hospitals and doctors.
4. Right to give your children property while you're living without gift tax.
5. Trouble getting medicare—takes forever.
6. Pension for war widows should not be cut when social security is increased. These widows sometimes have minimum social security and it is difficult for them to make both ends meet.
7. Stop cutting pensions of widows or veterans of WWI every time social security raises. Instead they need a raise.

*Food and nutrition :*

1. Need better meals (congregate).
2. Need better meals (congregate).
3. Deep investigation of present set-up. Make it a State law that all names of persons on welfare and those getting food stamps and those getting ADC be published monthly. Taxpayers have a right to know where their money is being spent and who is getting it (food stamp program).
4. Inequitable, unfair (food stamp program).
5. Not always fair (food stamp program).

*Housing :*

1. Need low-rent housing by HUD.
2. Public housing units—better built buildings.

*Transportation :*

1. Cab service needed in Cherokee.
2. We have excellent minibus service.

*Personal and social adjustment :* More service is needed to supply entertainment to those in nursing homes.

(Plymouth County—34 respondents)

*Income maintenance :*

1. We need a larger estate tax exemption.
2. We need a larger estate tax exemption.
3. Lower rates on dental and eye care.
4. There should be an overhaul of the inheritance tax. It is too severe for the little guy.
5. There should be an overhaul of the inheritance tax. It is too severe for the little guy.
6. Insurance for those who pick up old people in their own cars.

*Food and nutrition:*

1. Too much is spent and too many are not eligible (food stamp program).
2. No more persons eligible (food stamp program).
3. Overdone (food stamp program).

*Housing:*

1. Needed bad (low to moderate cost housing).
2. Bad. We need this (low to moderate cost housing).

*Transportation:*

1. County wide transportation needed.
2. Transfer rate for a minibus.

(Monona County—30 respondents)

*Income maintenance:* Raise the \$60,000 deductible in inheritance tax.

*Food and nutrition:*

1. A place to meet (congregate meals).
2. Need new meeting place (congregate meals).
3. We need a place to meet of our own where there is no stairs to go up and down.

*Transportation:* Ride to doctors, et cetera.

*Personal and social adjustment:* More good fishing areas for older people.

(Woodbury County—7 respondents)

*Transportation:* Low-cost transportation for older persons—badly needed.

### Appendix 3

#### STATEMENTS SUBMITTED BY THE HEARING AUDIENCE

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

DEAR SENATOR CLARK: If there had been time for everyone to speak at the hearing in Ida Grove, Iowa, on August 17, 1976, on "The Nation's Rural Elderly," I would have said:

The following replies were received:

MARTHA AMENT, MARCUS, IOWA

We in Cherokee County need more help in transportation. We have only one 10-passenger bus for the whole county. No other public transportation is available in the county, and that includes the city of Cherokee—plus eight other towns.

Why penalize the low-income persons when the social security benefits are raised a small percentage? All other help or supplementary income is cut back until their gain is nil.

I certainly enjoyed the meeting at Ida Grove. I have worked with the elderly for many years as volunteer, and 5 years with OEO. I can understand their problems.

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MAY ANDERSON, SIOUX CITY, IOWA

I would have inquired concerning the funding of home-delivered meals under other than title VII as compared to nutrition funding under title VII.

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GEORGE W. KENNEDY, IDA GROVE, IOWA

I would like to know what is being done about national health care for the population as a whole.

I speak of population as a whole, although I am a senior citizen. I think some other groups of different ages are as important as mine.

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BETTY MAGUIRE, IDA GROVE, IOWA

I am a public health nurse who has functioned entirely on a county-fund payment for 2 years. Our budget has been protected this past year because it was above the 9-percent level. We really could use some sharing money to support our local health agency. There has been talk in other counties of dropping or cutting the service. I hope you can appreciate this disservice to the elderly. I can function as a nurse and earn a living without the employment. But will the elderly be helped and stay as healthy without the public nurses' services? Please try to get some tax dollar money designated to help support county-funded nurses. I don't feel the nurses that help should have to be hassled by local politics.

## MARIE RABE, ONAWA, IOWA

Here in Onawa there is a lack of doctors. We do have three, but two of them are past 60 years old. All the surrounding towns depend on these doctors: Turin, Moorhead, Soldier, Ute, Little Sioux, Pisgah, Whiting, Solix, Sloan, and Blencoe—to name a few towns without a doctor. What we need is younger doctors to fill in and finally take the place of the ones we now have.

Transportation is another problem to older citizens.

To get any repair job done—even a fallen tree off the electrical wires in Onawa took several calls to the city. The tree had fallen on my roof during a storm. It took more than 2 weeks before anyone came to even look.

To get a senior citizen center in Onawa has been worse than pulling teeth. Until we even get the city council to realize that we definitely need a center—we were pushed out of the former multipurpose center over a year ago. Now we have our congregate meal program in the Methodist Church. We certainly are handicapped. Why?

## JANE ROLOFF, AMES, IOWA

The North Central Regional Center for Rural Development located at Iowa State University is involved in a project to summarize and synthesize information and research concerning the rural elderly. We would appreciate a copy of the hearing as soon as it is available.

## MARK K. SUZUMOTO, REMSEN, IOWA

In essence, what all the speakers asked for were more options, although there was talk of housing as the primary need, health care, and title XX programs as tantamount needs. What the government is or should be attempting is a housing program that would provide for everyday needs as well as the unexpected needs. The system is only as good as its weakest link—the government can provide adequate I & R service and dial-a-ride programs, but if inadequate income prevents the aging from owning a telephone, the programs become feathers in some bureaucrat's hat and nothing more.

The Older Americans Act in its entirety is exceptional legislation. Why are the programs administrated so strangely? The budget appropriators have the compassion of social darwinists, waiting through financial attrition for the "least fit" to fall by the wayside. Goodloe said some hundred years ago an appropriate phrase for today, "Millions for defense but not one cent for tribute." The "millions" should be changed to \$104.5 billions, and the "tribute" interpreted as programs created to show our Nation's gratitude to those who helped build it.

To believe that our industrial-military complex will bow down its head "in tribute" to our Nation's aging is a pipe dream. What is perhaps a feasible national plan is to place a focus on education at all levels and in all segments of society (age, income, urban, rural). We must educate to restore the dignity of growing old—the "Pepsi generation" mentality of today is the perpetrator of many subtle crimes against the aging; it makes growing old kin to growing ugly. If we do not begin to educate our young about aging today we will continue toward further segregating our people by age and the financial burden will continue to grow. We need to create options for the elderly by trying to make their environment less hostile until this horrendous task is accomplished. I suggest that the government take a wholistic approach by adequately funding and implementing all titles under the Older Americans Act.

## BEULAH E. WEBB, SIOUX CITY, IOWA

At present, everything is geared to youth.

Not too far into the future northwest Iowa will have more senior centers.

Revenue sharing has been distributed in various projects, but Sioux City seniors have not been able to receive one dime.

Since the hearing on August 17, we have been in the dark. The money for training never got to the grassroots, where the need is, but reaches workers, more personnel in homemaker services, et cetera. Yet, I know that money has been allocated. I regret to say that the majority of the elderly do not know anything concerning what region they are in or how many States are in their region. Please try, in your own way, to reach the people. My time is running out. I am 81 years of age with 50 years of service to my community. It is sad when a few people exploit the ones who need the services for their own selfishness. Thanks for coming. You and your staff were most gracious.







