

The Elderly
ADN 9199

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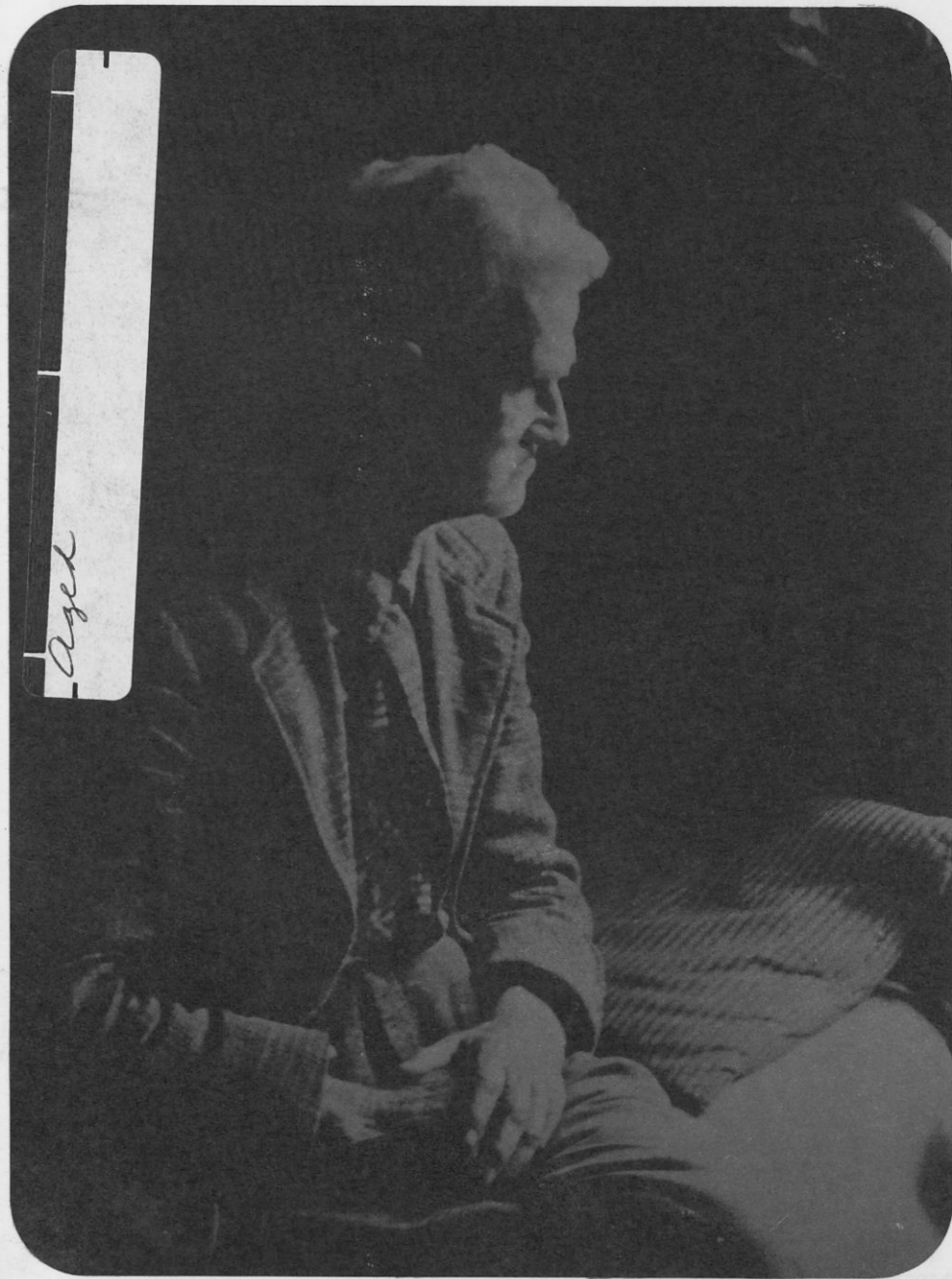
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WHAT DOES POVERTY MEAN....IF YOU'RE OLD?

INTRODUCTION:

President Nixon, in his 1968 Presidential campaign, declared, "A just and decent society must recognize its debt to its older citizens and honor its obligations to them." America owes its elderly citizens, who have worked hard in our society, an old age of dignity, security, and independence. But this is rarely the case. We have indeed prolonged the life of the aged, but we have not helped to make that life meaningful and self-sufficient.

We live in an age dominated by a youth culture. Within this youth culture, little attention is paid to the elderly and less to the problems of aging.

Nevertheless, each year 1.4 million Americans reach the age of 65. Moreover, today there are more than 20 million Americans who are 65 or over. The following module will explore the difficulties which surround the lives of many of these 20 million Americans and will make some concrete recommendations for the improvement of these conditions.

PRE-LESSON ACTIVITY:

Growing old is one of the most difficult tasks in human development. Today many people fear becoming old — they shun the elderly and seem indifferent to plans that might better the lives of the elderly.

1. The following activity should provide a springboard for the study of the elderly and should result in some concrete programs in which the students could become involved.

- a. Have you ever thought about what it means to be old? All of us have someone in the family who is elderly, or we know an older person who lives in our neighborhood. We might visit them to see what things are most difficult for these people. Is it loneliness, lack of friends, dependence on other people, inability to get around, concern with lack of money, or poor health? Perhaps after the visit you can think of some way to bring a little joy to the person whom you were visiting.
- b. The children who have carried out the above activity could participate in a class discussion about the things that are difficult for older people. Perhaps a chart similar to the following could be constructed.

2. The above activity might spur an interest in the children to visit elderly people in the community. Perhaps there is a nursing home that the students could visit on the weekend. Homes for the elderly usually appreciate volunteer service, skits or musical entertainment.

3. Recently there was an article in a large city newspaper about a very old lady who had died after living alone for many years. The city was shocked and shamed to learn that her diary for several years had contained the same daily entry, "No one came to see me today." This reveals in a very powerful way the loneliness that many elderly people experience. Have the class discuss some of the events that may have led up to this lady living alone for so many years. Is this typical of most older persons?

*Difficult Things for
Older People*

Why?

How Can I Help?

Loneliness	No one visits them	Visit an older person
Limited income	Unable to purchase necessary food, medicine, etc.	Find information that might supplement income
Poor health	Causes feelings of depression, etc.	Locate information about a medical clinic in your community
Lack of transportation	Unable to get to the doctor's office, the stores, etc.	Offer to go for a walk with the person

4. Have children try to imagine or simulate being alone. Perhaps one child could sit alone in the back of the classroom, able to see the class but not to participate or talk with anyone. How would you like to "be alone"? Write an account that you might enter into your diary from the beginning of a day to its close. Read these to the class and discuss the elements common in most entries.

These activities should make the children aware that money, housing, and material goods are sometimes not the most important things to an older person.

ECONOMIC CONSIDERATIONS

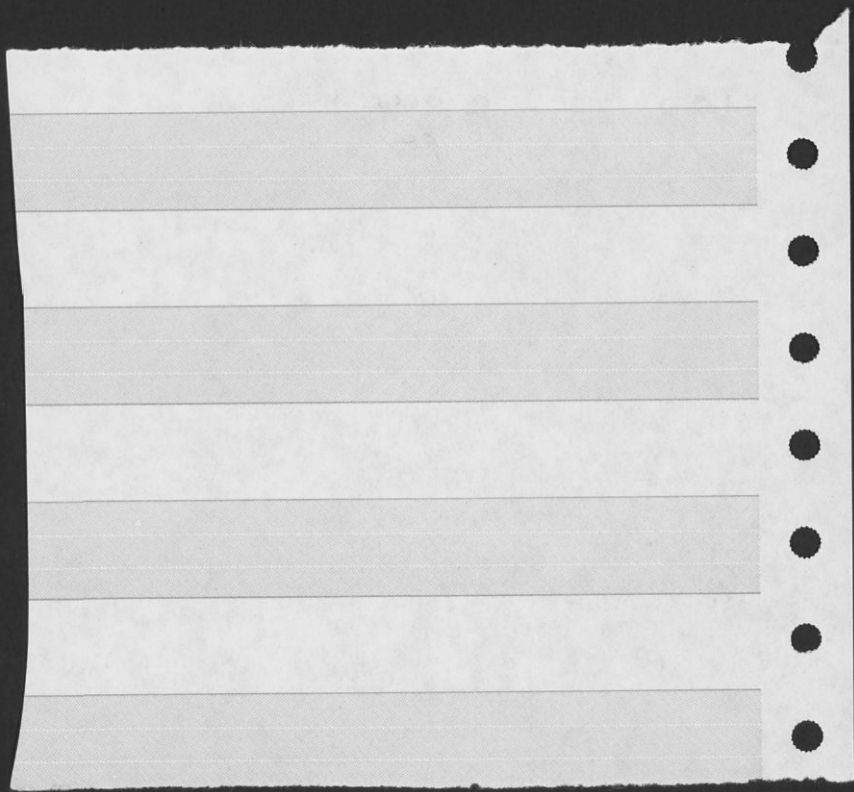
"The financial picture among older Americans...is a picture which badly needs improving. It is simply unacceptable in America that a large segment of older Americans have incomes below the poverty line. It is unacceptable that the aged should be the one group in the country where poverty is increasing today. This is a danger we simply cannot abide...." (Richard M. Nixon, CBS Radio Network Speech, October 22, 1968)

The danger of the increasing poverty of the elderly is growing. In 1968, in spite of our present welfare and Social Security systems, some 4.6 million older persons had incomes below the poverty line. These 4.6 million people constitute about 25% of

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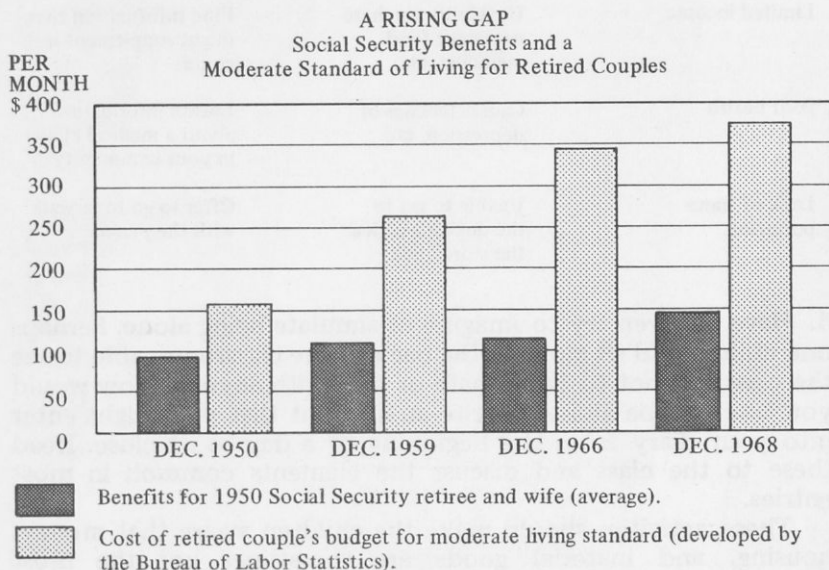
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all the aged persons in America. Of these 4.6 million aged poor, some 85% are white. However, the proportion of elderly poor is much higher among non-whites (47%) than among whites (25%).

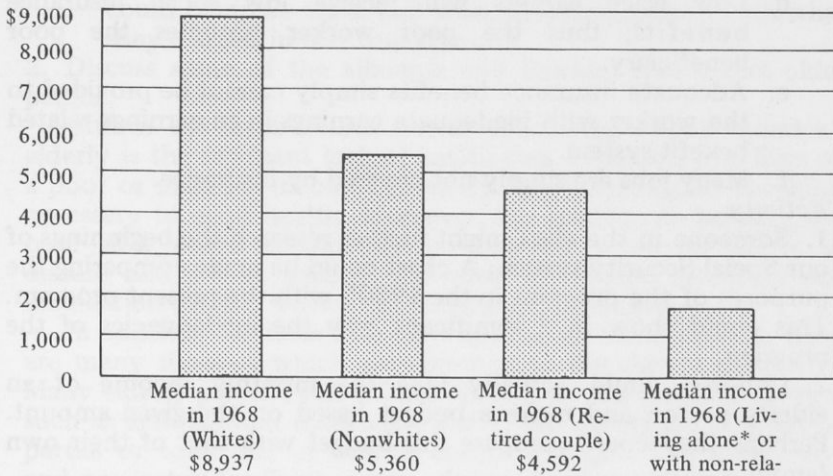
Because older persons have less than half the incomes of younger people, they must spend proportionately more of their incomes on such basic necessities as food, shelter, and medical care. The elderly do not necessarily need other things so much less; they simply cannot afford other things.

Income is extremely important to the elderly because, in addition to mere survival, it is essential to the maintenance of their independence and dignity.



Technical Note: The retired couple's budget for a moderate living standard provides for the maintenance of health, social well-being, and participation in community activities. The wife, self-supporting, living independently in an urban area, and enjoying fairly good health.

The aged poor, as a group, are the least likely to escape poverty through their own efforts at any time in the future. Thus, income level remains the major problem facing the elderly now and — unless major policy changes are made — the elderly of the future.



*Approximately 1/2 of the elderly poor live alone.

Discussion:

1. How does income play a different role in the lives of the elderly people than it does in the lives of younger persons? Discussion of this question should lead to some of the following answers:

- a. Older persons cannot improve their income by changing jobs or protect themselves against inflation.
- b. Older persons realize that an illness, even with the aid of Medicare, could completely wipe out a life's savings.
- c. Older persons pay higher insurance rates than younger people.
- d. Older persons become poor after they reach 65 because of a sharp drop in income upon retirement.

2. Why do older Americans live in poverty? The answer to this question is very complex, but it centers around the following facts:

- a. Old Age Survivors and Disability Insurance is the program most people call "Social Security." It began in the Depression of the 1930's when millions were unemployed. After 30 years it remains woefully inadequate.
- b. Social Security was not designed as a broad anti-poverty program, but rather as a program to sustain living standards when wages ceased. Thus, despite attempts to replace a higher proportion of earnings for lower-income workers, social insurance programs still do not provide adequate benefits to the poorest.
- c. Because social insurance is closely related to employment, it cannot reach effectively those who work at irregular intervals or for very short periods of time.



- d. Low wage earners will receive low social insurance benefits; thus the poor worker becomes the poor beneficiary.
- e. Adequate insurance benefits simply cannot be provided to the worker with inadequate earnings in an earnings-related benefit system.
- f. Many jobs are simply not covered by insurance.

Activity

1. Someone in the class might further research the beginnings of our Social Security system. A chart could be made comparing the purposes of the program in the 1930's with the present program. This could show in a significant way the inadequacies of the program.
2. Children could actually take the monthly income of an elderly person and make a budget based on the given amount. Perhaps they could compare this budget with that of their own family.

What can be done to better this situation?

The President's Task Force on the Aging made the following suggestions:

1. Voluntary programs supplementing the basic social insurance system are desirable. Employee pension programs deserve strong encouragement.
2. Social Security reform is essential in order to raise the incomes of all elderly people at least above the poverty line.
3. In many states the standards for assistance payments are grossly inadequate. These must be brought up to the standard.

Activity:

Write to your local state representative and find out what types of financial aid are available to the elderly in your state.

HEALTH CONDITIONS

"Americans of age 65 and over, though drawing substantial, essential economic assistance from Medicare, and to a much lesser extent, from Medicaid, nevertheless continue to be the major victims of unresolved problems related to the costs, quality, and availability of medical care in the United States today." (Advisory Committee Report, "Health Aspects of the Economics of Aging," for the Senate Special Committee on the Aging, July 1969)

1. To start the lesson on health conditions of elderly people the teacher could duplicate the story included in the module. (See Appendix A.)
 - a. In this selection students are given a real picture of the poverty and health conditions in the life of Edmund MacIntosh, typical of hundreds of others.
 - b. After reading the story allow the students sufficient time to react to its message.

- c. If students carried out the pre-lesson activity, perhaps they could compare their visit with an elderly person with what they learned in this true account.
2. Discuss some of the ailments and illnesses that afflict older people.

One of the most serious effects of poverty among America's elderly is the resultant lack of health care. A person who lives on a poor or marginal income can rarely afford the regular checkups necessary to good health. Moreover, the inadequate housing and poor diet which accompany poverty are often conducive to disease and illness. Finally, the costs of medical attention and medication further reduce the income of the elderly.

In addition to those illnesses which result from poverty, there are many illnesses which are common to the elderly in general. Many elderly persons suffer from chronic or degenerative diseases such as arthritis and diabetes. Finally, the elderly are plagued by partial or total loss of hearing and/or eyesight. The medication and apparatus (walkers, canes, glasses, hearing aids) which such disability requires further reduce the level of income.

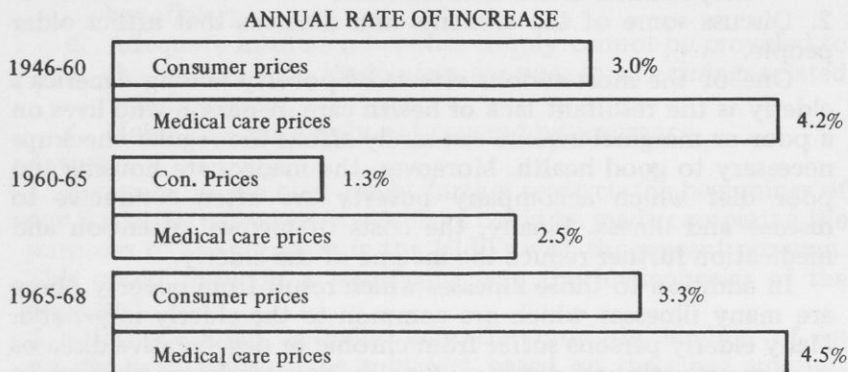
Some attempts have been made to remedy this situation. Medicare and Medicaid, in spite of all their faults, are the most extensive attempts at helping the elderly in the area of health care. There have also been programs to assist the elderly in the area of nutrition. In this area, the poor elderly are not the only ones who suffer. Those older people who can afford an adequate diet but who cannot cook for themselves, have no knowledge of nutritional principles, or have no transportation to stores are also likely to suffer from malnutrition. The Meals on Wheels program has been designed to provide the elderly with an adequate diet. (Read "Meals on Wheels" in Appendix B.)

Activity:

1. If an older person lives alone in your neighborhood, perhaps you and your mother might offer to cook a hot meal for her/him one day a week.
2. Find out if there is a Meals on Wheels program operating in your community. If there is one, make some effort to inform elderly people about it. If such a program does not exist, perhaps some church group would be interested in starting one. Inquire about this.
3. What keeps the elderly from receiving the health care they need?

A crisis exists in this country in regard to the financing and delivery of health services. The President's Task Force on the Aging believes that simply spending more money without making a substantial number of changes in the total health care system for Americans of all ages will not solve the crisis. These changes will involve a careful examination and evaluation of the Medicare and Medicaid programs.

Added to the already complex situation is the rise in health care costs as the chart below shows:



As the chart indicates medical care prices have jumped almost twice as fast as prices for all consumer items in the last three years.

Activity

Perform a small survey on the rising costs of medical expenses. Ask your mother or father to tell you the cost of visiting a doctor, having a tooth filled, or having an eye examination and getting glasses. What did these services cost a few years ago? What do they cost today?

4. What are some recommendations that might improve the health conditions of the aging?

- a. An important community service provided through some health departments is known as "multiphasic screening." It provides the elderly with special screening tests for many different diseases. Eye examinations, electrocardiograms, X-rays, blood pressure readings, and laboratory tests are included to pinpoint the potential diseases of an individual.

Activity:

In general, local health departments are considered an excellent source for all kinds of medical information. Contact this agency and ask for programs designed to offer medical assistance to the elderly. If such assistance is lacking, perhaps you could bring this fact to the attention of local civic organizations or church organizations which might be instrumental in starting programs benefiting the elderly.

- b. Coordinated home-care programs, developing in a number of communities, allow the elderly suffering a long-term illness to stay at home, when ordinarily they would be hospitalized. These programs, usually administered by

public health departments and visiting nurse associations, bring necessary hospital services, equipment, and personnel to a patient's home instead of keeping him in a hospital. While he receives required medical attention, he may continue to experience his family's love and care.

- c. Many communities already offer older persons some form of social dining or home-delivered meals.

See if such programs have been initiated in your local community. Perhaps a bulletin board concerning information on the elderly could be set up in the main school hall by students.

LIVING ARRANGEMENTS OF THE ELDERLY

The nation has a tremendous need for more adequate housing for all age groups. Thus, demanding more and better housing for the elderly is difficult because of the unsatisfied demand in the nation's total housing supply. The housing needs of the elderly, however, cannot be ignored.

Because the elderly have special needs, housing and living arrangements for them will necessarily differ from those of the general population. For example, the following factors contribute to their specific needs:

1. Reduced income in retirement.
2. Loss of activity and social contacts.
3. Loss of a certain amount of energy.
4. Inability to get around.
5. Uncertain health conditions.
6. The need of some elderly people to spend 24 hours a day in the housing facility.

The above list indicates that certain supportive services are essential in designing housing for the elderly. These include:

1. Communal dining facilities.
2. Social and recreational programs.
3. Provisions for emergency nursing and housekeeping help.
4. Information and counseling.
5. Transportation for residents.
6. Ready access to community services.

Older persons who are restricted in mobility may require some assistance in meeting the demands of daily living. Therefore, they need specialized housing, such as homes for the aged, which have health-related facilities. Nursing homes are needed by older persons who are still more frail and who require long-term nursing care.

The home is the only major asset which many elderly persons possess. Surprisingly enough, two out of three own their own homes, and 80% of these homes are free of mortgages. Rising property taxes and other costs, however, make it increasingly difficult for the elderly to maintain these homes. For those who

wish to sell their homes and live in smaller quarters, there may be difficulties, particularly for those living alone. The scarcity of living quarters at reasonable prices and in suitable locations poses a major problem.

The Department of Housing and Urban Development reports that the low-rent public housing program continues to provide more housing for senior citizens than any other housing program. As of December 31, 1968, some 183,000 units specifically designed for elderly occupancy were under annual construction contracts. Significant developments in housing for the elderly during 1969 included a trend toward conversion of family dwelling units, mostly high-rise apartments, for use by the elderly.

Activity:

1. Discuss some of the inadequate facilities in nursing homes. Lately, much has been revealed by investigations of nursing homes. Current literature, newspaper articles, and 'periodicals could be brought in and discussed. A letter written to your local congressman would show your concern for improved conditions in nursing homes.
2. Contact your local social welfare agency and ask for information on what your community is doing to meet the housing needs of its elderly citizens.
3. Find out if there are any federally-funded housing projects for the elderly in your community. Perhaps you could visit them and note the advantages they offer the elderly.
4. The American solution to the problems of the elderly seems to be nursing homes, homes for the aged, rest homes, etc. This raises the question of whether the aged are better off away from society and among others of their own age, or whether they should remain with their families amid a more youthful world. What are your ideas about this basic question?

MEASURES TO ENHANCE LIVING THROUGH SOCIAL ENRICHMENT

Even if the income, health, and housing problems of older persons were solved, or at least bettered, there would still be significant barriers to the involvement of the elderly in the life of the community. What are some programs that might socially involve the elderly?

1. Programs geared to the dissemination of information:

Frequently community services and financial aid for the elderly are confusing and complex. Consequently, many elderly persons do not take advantage of such resources. To obtain a health service, for example, an older person must:

- a. know of the existence of a clinic;
- b. know where it is located;

- c. know how to get there;
- d. know when and how it functions;
- e. know whether or not he is eligible for health care.

Communities must actively insure that older persons are informed of these facilities and helped to utilize the resources to which they are entitled.

Activity:

It might be possible for the children to inquire about setting up such an information center in connection with one of the church organizations functioning within the parish.

2. Opportunities for Community Service

Everyone recognizes the benefits and satisfaction which older persons derive from providing useful community services. Some of these services, such as Medicare Alert, Senior Aids, and the Foster Grandparent Program, show that many older persons possess unique qualifications for meeting a variety of needs from those of the home-bound and frail elderly to those of disadvantaged children.

Some older persons derive the greatest satisfactions from volunteering their services without pay. Thousands of retired people find that they can be useful to their communities and to themselves by volunteering for work in hospitals, nursing homes, children's institutions, senior citizen centers, schools, and settlement houses. For others, volunteering will become possible only if they can be reimbursed for expenses.

The need for expanded and varied opportunities to utilize the skills, talents, experience, and time of older persons has not only a special meaning for the elderly but will also enhance society in general.

3. Preparation for Living in the Later Years

As we have seen, retirement has become a way of life for millions of people. Many persons in their later years would be quite different if the transition from employment into retirement were eased. It is convincing to believe that older persons would be far less dependent on society if they were provided during their middle age with opportunities to prepare for life in the years to follow.

Pre-retirement preparation has merited increasing interest during the past decade. At the present time, however, most pre-retirement plans, courses, or counseling are geared to those who are about to retire. Little has been done to establish and to implement measures which do justice to the full demands of life in the later years.

Educational Institutions are in a strategic position to provide further growth and fulfillment in retirement. Traditionally, however, America's schools have been dominated by children and young people. Increasingly, schools are being recognized as

centers for preparing the young for life and work in a changing society. In the broadest possible sense they must become also centers for later life or retirement preparation.

Adult education may permit many older people in retirement to return to formal learning of arts and crafts, health, and vocational skills. Recent Federal legislation is helping states expand adult educational programs. It must now be realized that retired teachers and professional people from many walks of life have much to contribute to these expanding programs.

Activity:

Look into the possibility of setting up such educational facilities in your local community.

4. Senior Centers

The multi-purpose senior center is a community facility whose use is reserved exclusively to older persons. This allows the elderly to find companionship, to receive needed services, and to participate in community life in a congenial environment. Unfortunately, the quality of these centers varies widely. Although more centers are needed in addition to those already operating, Federal funds for the construction or renovation of senior centers are at present virtually non-existent.

Activity:

1. Many churches sponsor senior centers for the members of their community. See if your parish has such an organization. If not, perhaps a few class representatives could meet with the parish priest and discuss setting up such a center for the older people.

2. Many communities have organizations known as "Golden Age Clubs." These clubs have a variety of recreational activities (e.g., group tours) especially designed for the elderly. Also, these clubs frequently arrange discount prices in cooperation with local movies and theaters. In some cities even the transportation companies have cooperated, and senior citizens who use public transportation at non-peak hours can do so at reduced fares. Find out if your community has such an organization. If it does, do the elderly in your community know about it? If your area does not have one, could you perhaps contact some people (perhaps a church group) who could organize such a club for the elderly?

Films and filmstrips from *Materials About Poverty* which concern themselves with problems of the aged could be viewed at any time during the module.

CONCLUSION

During this module we have delved in a small way into the problems surrounding the aged in our country. We have seen that these people are plagued by loneliness, fear, frustration, as well as economic problems of low income and rising medical costs.

There were many activities suggested in the unit, but many more should and could be carried out by the class. The greatest gap between the elderly poor and the more affluent in the United States is not the \$4,000 or \$5,000 in income, but the lack of human beings to bridge the gap between the two different worlds. One of these human beings could be you. Do you care enough about these people to begin to do something to make their last years happy and productive ones?

APPENDIX A:

Edmund MacIntosh: How to be 74 on \$50 a Month

From "The Invisible Americans," Ben Bagdikian, *Saturday Evening Post*, December 21-28, 1963. Ben Bagdikian is author of **POVERTY IN THE MIDST OF PLENTY**.

Edmund MacIntosh had been depending on the theory that hard-boiled eggs and opened cans of meat need no refrigeration. And he was sick.

He had also depended on the theory that if you work hard, live frugally, and mind your own business, you will get by without help. And now he was 74 years old and needed help.

MacIntosh, to use a descriptive but not a real name, depended on hard-boiled eggs because his Los Angeles hotel room has no refrigerator, and he cannot afford to eat out. He is trying to live on his \$50 a month Social Security check. Room rent is \$38.50 a month, which provides a room with clean linen every two weeks and clean towels every day. The remainder goes for food and chewing tobacco. Every week friends on the same floor do his shopping for him: two dozen eggs, seven small cans of V-8 Juice, two cans of meat, a carton of dry cereal, and his tobacco.

MacIntosh has a solid, dignified manner. He looks vital, but he has dizzy spells, and so fears to walk outside. "I'm afraid I'll fall down, and the cops will think I'm a wino. That happened to a friend of mine, and when I couldn't find twenty-one dollars bail money for him, he got thirty days."

His response to the present problem is one of hurt rather than anger. He was always able to earn money. He finished high school in North Carolina and two years in a military institute. He was in the Navy in World War I, married a Georgia girl, had a daughter, and after the war bought a newsstand on Times Square in New York and made \$2,500 a year. When the Depression ended that, he worked in a Baltimore hospital, and then in the late 1930's got back to newspaper distribution in Washington at \$3,000 a year. He joined the Navy the day after Pearl Harbor and was on a troop transport at Midway when he got the letter saying his wife was getting a divorce.

After the war he became a watchman at a California air base for \$38 a week with free room, then a railroad guard at \$80 a week, until 1954, when the railroad began laying off men.

Then he came to Los Angeles and began doing a variety of odd jobs. He had a regular clientele for lawn cutting until automation reached him in its own way. "People began getting those power mowers. That was the end of me."

He had known he was eligible for Social Security but let it pile up. When the power mowers took over, he collected an accumulated \$1,250 and began his \$50 a month. He bought a suit of clothes and prepared for the rest of his days. But it became apparent \$50 a month would not care for the rest of his days. He sold his TV set when he was economizing. But this only brought \$15.50. He is down to \$250 in his nest egg and needs medical care for his stomach, his dizziness, his failing eyesight. And he needs something to help him through his loneliness. "I got a letter a year ago. It was from the bank telling me how much I had left."

MacIntosh did nothing wrong in planning for his old age, but his plans were not good enough. And now he needs help. "What I need most is medical attention. I need a suit of clothes. I'd like to go to church. I'd love to go to a picture show. And if I had some good company, I guess that would be pretty good."

The man referred to in this story as "Edmund MacIntosh" died three months after this interview. The coroner's report said death was from "apparent natural causes."

APPENDIX B:

"Meals on Wheels Mean a Lot"

Washington Post, Aug. 10, 1971, excerpts. (Betty Medsger, Washington Post Staff)

"It means everything to me," said Emma Blood, describing the meal that two women brought to her house at noon yesterday.

Mrs. Blood, who is 84 and no longer feels up to cooking a hot meal, now depends on the Meals on Wheels program at Zion Lutheran Church, New Hampshire Avenue and Kingwood Drive, Takoma Park. When Mrs. Blood lifted the aluminum foil from her tray yesterday, she found warm servings of green pea soup, baked halibut, curried rice, stewed tomatoes and tapioca pudding with cherry sauce. In another packet was her supper — orange juice, a chicken salad sandwich, and stewed apricots.

After a self-effacing laugh, Mrs. Blood admitted that if lunch had been left to her hands she probably wouldn't have bothered to cook and would have eaten a bowl of ice cream.

"Many older people get to the point where they just eat peanut butter and crackers," said Gloria Brown, one of the women who works at the Zion Lutheran Church Meals on Wheels. "That begins the downward spiral in their health." For the five hot meals and five cold meals a week, Mrs. Blood pays \$10.

A crucial part of Washington not now served by a home meals program will soon be covered by a Meals on Wheels operation taking shape at New York Avenue Presbyterian Church.

Sara Turlington, who is recruiting volunteer workers for the New York Avenue Meals on Wheels, said that program grew out of the national meeting last year of United Presbyterian women.

"The women who went to the meeting," she said, "pledged themselves to do something about hunger in America. We in our church looked at several possibilities and decided this would be the best thing we could do," acknowledging that the program, along with the others, would be melting only a very small part of the tip of an iceberg.

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